

ASS. REC. BY:

REF: CS/CTI21000885/Atf3

Special Instruction:

Surveyor: ADRIAN ASSIGNMENT (Office)

From (Person): JENNEY LEW of CTI Date/Time: 19 Jan 2021 10:57

Estimated Cost: _____ Bill to: _____

OD: TP / WS / TP RES / OD RES / EVA / INV / MV / CS

To Inspect Vehicle No: SMP 852U Insured: YQ 1926L

at Workshop m/s BIFROST Tel: 93290237

of 8 Kaki Bukit Ave 4 #01-49, Premier @ Kaki Bukit

Policy No: DMCVSNW00123562000 Claim No: SNM21D200302

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 12/01/2021
(Client's Record)

CA / REV / REP. / REV 24 HRS "WP" H.O.D. Endorsement: _____

Date/Time: 19-01-21 1.28P.M Person Contacted: IKHWAN Vehicle IN OUT

Date/Time	Action/Instruction (<input checked="" type="checkbox"/>) Estimate
	SMP 852U- NA/TMI20008286/z4 DOA :08/08/2020
	YQ 1926L- X