

ASS. REC. BY:

REF: CS/AGI21001233/Dtf3

Special Instruction:

Surveyor: BRYAN ASSIGNMENT (Office)From (Person): IVY RATILLA of AGI Date/Time: 26/1/2021 3:08 PM

Estimated Cost: _____ Bill to: _____

OD ☒ TP WS/ TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SHA 4914L Insured: SLZ 4192Zat Workshop m/s BIFROST Tel: 62436687of Blk 9 Sector C #01-42, Sin Ming Industrial EstatePolicy No: _____ Claim No: C10008815/CH

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 23.1.2021
(Client's Record)

CA / REV / REP. / REV 24 HRS "WP"

H.O.D. Endorsement: _____

Date/Time: 26-01-21 3.11P.M Person Contacted: REGINA Vehicle IN ☒ OUT

Date/Time	Action/Instruction (☒) Estimate
	SHA 4914L - NA/AIG20001186/z4 DOA:19/01/2020
	SLZ 4192Z - ☒