

12/01/2021

REF: CS/CTI21001316/d3

Special Instruction:

ASS. REC. BY:

SURVEY BY:

ASSIGNMENT (Office)

From (Person): ALFRED TOH

of CTI

Date/Time: 27/01/2021@4.43PM

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SLT 6033T

Insured: GBG 3715R

at Workshop m/s AP AUTOMOTIVE

Tel: 6784 4465

of BLK 9006 TAMPINES ST.93#01-202

Policy No:

Claim No: SNM21D200507/C02/GBG3715R/TOHHS

Sum Insured:

Excess:

D.O.A. 16/01/2021

Make of Veh:
(Client's Record)

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

H.O.D. Endorsement:

Date/Time: 5.24PM@27/01/21

Person Contacted: JULIANA

Vehicle: IN ☒ OUT

Date/Time	Action/Instruction (<input checked="" type="checkbox"/>) Estimate
	SLT 6033T- X
	GBG 3715R-X