

ASS. REC. BY:

REF: CS/AGI21001594/Atf3

Special Instruction:

Surveyor: ADRIANASSIGNMENT (Office)From (Person): IVY RATILLA of AGI Date/Time: 2/2/2021 4:01 PM

Estimated Cost: _____ Bill to: _____

OB / TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SMM 9964L Insured: SJF 3544Cat Workshop m/s MCS Garage Tel: 9270 0917of 10 Kaki Bukit Road 2 #03-25 First East CentrePolicy No: _____ Claim No: C10008917/KY

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 30-01-2021
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 2-2-2021 6.12P.MPerson Contacted: Kendrick Vehicle IN OUT

Date/Time	Action/Instruction (☒) Estimate
	SMM 9964L - NA/FWD21001478/h4 DOA :30/01/2021
	SJF 3544C - NA/FWD21001478/h4 DOA : 30/01/2021