

ASS. REC. BY:

REF: CS/AGI21002038/Atf3

Special Instruction:

Surveyor: ADRIAN ASSIGNMENT (Office)From (Person): IVY RATILLA of AGI Date/Time: 10/2/2021 5:08 PM

Estimated Cost: _____ Bill to: _____

OB / TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SMV 8884T Insured: SJH 2234Tat Workshop m/s iShare Auto Pte. Ltd. Tel: 6341 6789of 8 Kaki Bukit Avenue 4 #08-09 Premier @ Kaki BukitPolicy No: _____ Claim No: C10009039/CH

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 10-2-2021
(Client's Record)CA / REV / REP. / REV 24 HRS "WP" H.O.D. Endorsement: _____Date/Time: 10-2-21 5.13P.M Person Contacted: MICHELLE Vehicle IN OUT

Date/Time	Action/Instruction (☒) Estimate
	SMV 8884T- NBA/CTI21002029/Y DOA:10/02/2021
	SJH 2234T - X