

ASS. REC. BY:

REF: CS3/GRB21002215/Nvf3

Special Instruction:

Surveyor: NAZ ASSIGNMENT (Office)

From (Person): GABRIEL WEE of III Date/Time: 16 February 2021 5:06 PM

Estimated Cost: \_\_\_\_\_ Bill to: \_\_\_\_\_

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

To Inspect Vehicle No: SCW 8880S Insured: SLS 9851J

at Workshop m/s 3 MOTORWERKZ CONCEPT Tel: 9797 2800

of 25 KAKI BUKIT ROAD 4 SYNERGY @ KB #01-42

Policy No: \_\_\_\_\_ Claim No: \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

Make of Veh: \_\_\_\_\_ D.O.A. 04/02/2021  
(Client's Record)

"WP"

CA / REV / REP. / REV 24 HRS H.O.D. Endorsement: \_\_\_\_\_

Date/Time: 16-02-2012 5.53P.M Person Contacted: JAY Vehicle  IN  OUT

Date/Time	Action/Instruction ( X ) Estimate
	SCW 8880S - X
	SLS 9851J - X