

ASS. REC. BY:

REF: CS3/CTI21003905/T1vf3

Special Instruction:

Surveyor: TAUFIKHASSIGNMENT (Office)From (Person): IRENE TAY HUI PING of CTI Date/Time: 25/3/2021 3:57 PM

Estimated Cost: _____ Bill to: _____

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SLE 1939S Insured: IRENat Workshop m/s GARAGE 13 Tel: 9853 5175of at 8 Kaki Bukit Ave 4 #03-46 Premier@KB

Policy No: _____ Claim No: _____

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 23.03.2021
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 25-03-21 6.21P.M Person Contacted: IRENE Vehicle ☒ IN/OUT

Date/Time	Action/Instruction (☒) Estimate
	SLE 1939S-NA/INC21003780/u DOA :23/03/2021
	GBE 8684Z - NA/INC21003780/u DOA :23/03/2021