15/5/2010

INS. CASE OWNER: CC6/AIG20009046/Aga3

LKK:

IDAC:

ASSIGNMENT

Surveyor: LWP DOI: 26/08/2020 Date / Time :

Registered in Merimen:

Pre-assign / CCU / FTE

Insured Vehicle No. : SKV 6079M Claim No. :

Name of Insured : Policy No. :

Insured Tel No. : HP: Make / Model :

Excess Sec II :S$ D.O.A : 25/08/2020 Place of Accident :

Is driver the owner? (YES / NO) Nature of Accident :

If **NO**, Driver Name / Age : OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO

Driver Tel No. : (V/L: YES / NO) Insured Liability : % **Final ? Yes / No**

SJQ 8249P → → →

INSRS:	INSRS:	INSRS:	INSRS:
WSP: SM AUTOMOTIVE	WSP:	WSP:	WSP:
Tel :	Tel :	Tel :	Tel :
Liability :	Liability :	Liability :	Liability :
RMKS:	RMKS:	RMKS:	RMKS:

Date/ Time	