

ASS. REC. BY:

REF: ~~CS3/III20006331/Esf3~~

Special Instruction:

MERIMEN

Surveyor: STEVE Meka

ASSIGNMENT (Office)

12/07/2020

From (Person): ~~Gabriel Wee~~ of III

Date/Time: ~~16 June 2020 0:40 am~~

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No: SLN 8843R Insured: SHC 1042L

at Workshop m/s H S Automotives Pte. Ltd. Tel: 6538 1368

of Blk 2 Kaki Bukit Avenue 2 #01-15 AUTOHUB

Policy No: _____ Claim No: _____

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 12 JUNE 2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 16-6-20 1.29P.M Person Contacted: ALEX Vehicle IN OUT

Date/Time	Action/Instruction (X) Estimate
	SLN 8843R -NA/AIG20006229/z4 DOA : 12/06/2020
	SHC 1042L-NA/AIG20006229/z4 DOA : 12/06/2020
	SUBMIT L/S \$ 3,200.00/3 DAYS
	(\$ 1,400.00/RED - 30%)