

12/02/2021

ASS. REC. BY:

REF: CC3/AIG20009681/f3

Special Instruction:

SURV/01

ASSIGNMENT (Office)

From (Person):

of

AIG

Date/Time: 10/09/2020

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SMR 100X

Insured:

at Workshop m/s Premium Automobile

Tel:

of 55 Ubi Road 1

Policy No: 2070006573

Claim No: 1209457860SG

Sum Insured:

Excess:

Make of Veh:

D.O.A. 30/08/2020

(Client's Record)

CA ☒ REV REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

Person Contacted:

Vehicle IN/OUT

Date/Time

Action/Instruction ( ) Estimate

SMR 100X - X

11/09/2020 Cancel case, owner withdraw claim. No survey done. *Celine 14/09/2020*