

ASS. REC. BY:

REF: CS/AIG20010227/R1qf3

Special Instruction:

Surveyor: RASULASSIGNMENT (Office)From (Person): CHIN LEE YING of AIG Date/Time: 23/9/2020 5:13 PM

Estimated Cost: _____ Bill to: _____

☒ OD TP WS TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SLT 9102H Insured: _____at Workshop m/s Cycle & Carriage Tel: 91865200of 209 Pandan Gardens

Policy No: _____ Claim No: _____

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 22-9-2020
(Client's Record)CA ☒ REV / REP. / REV 24 HRS

H.O.D. Endorsement: _____

Date/Time: 23-9-20 5.18P.M Person Contacted: COCO Vehicle IN ☒ OUT

Date/Time	Action/Instruction (☒) Estimate
	<u>SLT 9102H-X</u>