				31 10
2/03/2002 ASS, REC, BY;	REF: CS/SMO20012843/R1qf3		Special Instruction:	
urveyor : RA	SUL ASS	IGNMENT (Office)		3
From (Person):V	/INNIE FAN of	AIG	Date	Time:20/11/2020 5:57 PM
Estimated Cost:		Bill to:		
OD TP WS/TP	RES / OD RES / EVA / INV	/MV/CS		
To Inspect Vehicle No: SMB 3166X			Insured:	SMJ 5347K
at Workshop m/s SBS TRANSIT			Tel:	81335877
of 3 Yio Chu	Kang Crescent road,	Singapore 78601	0	
Policy No:		Claim No:		
Sum Insured:		Excess:	3	
Make of Veh: (Client's Record)			D.C	A_08/11/2020
The same of personal conditions of	2. / REV 24 HRS "W	'P"	H	i.O.D. Endorsement:
Date/Time: 23-11	-20 10.54A.M Person Co	ontacted: GUANO	3Vehi	cle IN/OUT
Date/Time Act	ion/Instruction ( X )	Estimate.		
S	MB 3166X- ★			-
S	SMJ 5347K- CC4/AIG20004961/Kga3q2 DOA :01/04/2020			
			1	
	N. C.			