

ASS. REC. BY:

REF: CS/ASM20012871/f3

Special Instruction:

Surveyor:

ASSIGNMENT (Office)From (Person): KHONG LYN of AXA Date/Time: 23-11-20

Estimated Cost: _____ Bill to: _____

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SJL 9114P Insured: SLR 6042Cat Workshop m/s GARAGE 13 Tel: 87970013of BLK 1 KAKI BUKIT AVE 4 #03-46 PREMIERPolicy No: _____ Claim No: SOM02XFA

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 18/11/2020
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 23-11-20 3.31P.M. Person Contacted: CRISILLA Vehicle IN ☒ OUT

Date/Time	Action/Instruction (☒) Estimate
	SJL 9114P- NA/AIG19000921/z4 DOA : 13/01/2019
	SLR 6042C- ☒