

ASS. REC. BY:

REF: CS3/AIG20013094/Uvf3

Special Instruction:

Surveyor: MARCUSASSIGNMENT (Office)From (Person): HOR YINRUL of AIG Date/Time: 27/11/2020 8:54 AM

Estimated Cost: _____ Bill to: _____

OD ☒ TP WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SKG 9538P Insured: SMC 9560Xat Workshop m/s Bluwel Automotive Service Pte Ltd Tel: 67452088of 1 KAI BUKIT AVE 6 BLK C # 01-55Policy No: 1800090913 Claim No: 6661202388SG

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 25/11/2020
(Client's Record)

CA / REV / REP. / REV 24 HRS "WP" H.O.D. Endorsement: _____

Date/Time: 27-11-20 9.38A.M Person Contacted: SALLY Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SKG 9538P- ☒
	SMC 9560X- ☒
9/12/20	Submit DAR, 6 days