

ASS. REC. BY:

REF: CS/AIG20013218/Eqf3

Special Instruction:

Surveyor: STEVE

ASSIGNMENT (Office)

From (Person): CHIN LEE YING of AIG Date/Time: 2/12/2020 9:07 AM

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SMH 626Z

Insured:

at Workshop m/s CYCEL & CARRIAGE KIA

Tel: 91819978

of 209 PANDAN GARDEN

Policy No: 1900002912

Claim No: 9361303863SG

Sum Insured:

Excess: 300

Make of Veh:

D.O.A. 01.12.2020

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 12-2-20 10.42A.M

Person Contacted: EDWIN

Vehicle ☒ IN ☐ OUT

Date/Time

Action/Instruction (✓) Estimate

SMH 626Z- X