

ASS. REC. BY:

REF: CS/AIG20014219/Evf3

Special Instruction:

Surveyor: STEVE

ASSIGNMENT (Office)

From (Person): CHIN LEE YINH of AIG Date/Time: 21/12/2020 4:05 PM

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SLA 3918K Insured:

at Workshop m/s CYCEL & CARRIAGE KIA Tel: 91819978

of 209 PANDAN GARDEN

Policy No: Claim No:

Sum Insured: Excess:

Make of Veh: D.O.A. 20.12.2020
(Client's Record)CA / ☒ REV REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 21-12-20 5.23P.M Person Contacted: EDWIN Vehicle ☒ IN OUT

Date/Time	Action/Instruction (☒) Estimate
	SLA 3918K- X