

ASS. REC. BY:

REF: CS/AIG21000377/Uqd3

Special Instruction:

SUNADAY

ASSIGNMENT (Office)

Merimen

From (Person): CHIN LEE YING

AIG

Date/Time: 08/01/2021@2.44PM

Estimated Cost:

Bill to:

OD-TP+WS+TP RES / OD RES / EVA / INV / MV / CS

To inspect Vehicle No: SMW 607A

Insured:

at Workshop no/s TRANS EUROKARS

Tel: 6395 7875

of 5 UBI CLOSE

Policy No: 2070149213

Claim No: 9303492847SG

Sum Insured:

Excess: 600

D.O.A. 02/01/2021

Make of Veh:
(Client's Record

CA / **REV** / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time 3.12PM@08/01/2021

1 Person Contacted: RONALD

Vehicle IN/OUT

DateTime

Action/Instruction	(✓)	Estimate
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SMW 607A-X