

12/01/2021

REF: CS/AIG21000592/Eqd3

Special Instruction:

ASS. REC. BY:

SURV BY: STEVE

ASSIGNMENT (Office)

Merimen From (Person): CHIN LEE YING

of: AIG

Date/Time: 12/01/2021@6.32PM

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SLX 1885M

Insured:

at Workshop m/s: CYCLE & CARRIAGE KIA

Tel: 6568 4501

of: 209 PANDAN GARDENS

Policy No: 1800025612-01

Claim No: 4195096656SG

Sum Insured:

Excess: 0/-

D.O.A: 12/01/2021

Make of Veh: (Client's Record)

CA /  REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 9.15AM@13/01/21

Person Contacted: KEVIN

Vehicle:  IN  OUT

Date/Time	Action/Instruction ( <input checked="" type="checkbox"/> ) Estimate
	SLX 1885M-X