

ASS. REC. BY:

REF: CS/AIG21000620/Aqf3

Special Instruction:

Surveyor: ADRIANASSIGNMENT (Office)From (Person): Divyashni Subramaniam of AIG Date/Time: 13/1/2021 1:24 PM

Estimated Cost: _____ Bill to: _____

OD ☒ TP WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SJR 8036G Insured: SMU 6663Hat Workshop m/s TICK HAI Tel: 81397246of BLK 1 KAKI BUKIT AVE 6 #01-54 AUTOBAY @ KAKI BUKITPolicy No: _____ Claim No: 0194180180SG

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 09/01/2021
(Client's Record)

CA / REV / REP. / REV 24 HRS

"WP"

H.O.D. Endorsement: _____

Date/Time: 13-01-2021 1.26P.M Person Contacted: CONNIE Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SJR 8036G- ☒
	SMU 6663H- ☒