

ASS. REC. BY:

REF: CS/AIG21001238/Evf3

Special Instruction:

Surveyor: STEVE ASSIGNMENT (Office)From (Person): WINNIE FAN of AIG Date/Time: 26/1/2021 3:34 PM

Estimated Cost: _____ Bill to: _____

OD ☒ TP / WS / TP RES / OD RES / EVA / INV / MV / CSTo Inspect Vehicle No: SMQ 3930C Insured: _____at Workshop m/s CYCLE & CARRIAGE KIA Tel: 81680997of 209 Pandan Gardens

Policy No: _____ Claim No: _____

Sum Insured: _____ Excess: _____

Make of Veh: _____ D.O.A. 25.01.2021
(Client's Record)CA ☒ REV / REP. / REV 24 HRS

H.O.D. Endorsement: _____

Date/Time: 26-01-21 3.52P.M Person Contacted: KEVIN Vehicle ☒ IN ☐ OUT

Date/Time	Action/Instruction (☒) Estimate
	SMQ 3930C-X