

ASS. REC. BY:

REF: CS/AIG21002050/d3

**Special Instruction:**

SUNADAY

ASSIGNMENT (Office)

## Merimen

From (Person): CHIN LEE YING

of

AIG

Date/Time: 11/02/2021@8.49AM

Estimated Cost:

Bill to:

OD TP/WS/TP RES / OD RES / EVA / INV / MV / CS  
GMS 0005B

SMS 8305P

**Insured:**

To Inspect Vehicle No:

at Workshop no/s CYCLE & CARRIAGE KIA

Tel: 6568 4501

at Workshop m/s

209 PANDAN GARDENS

of

Policy No: 2070043686

Claim No:

Sum Insured:

Excess: TBA

D.O.A 09/02/2021

Make of Veh:

(Client's Record)

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

H.O.D. Endorsement:

Date/Time 9.38AM@11/02/21

Person Contacted:

DON BONG

Vehicle IN OUT

DateTime

| Action/Instruction | ( ✓ ) | Estimate |
|--------------------|-------|----------|
|                    |       |          |

SMS 8305P-X