ASS. REC. BY: | REF: CS3/AIG21003184/Gqd3 | Special Instruction:

Surveyor: Merimen

ASSIGNMENT (Office)

From (Person): DIVYASHNI of AIG Date/Time: 10/03/2021@4.31PM

Estimated Cost: Bill to:

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

To Inspect Vehicle No: FBQ 4175P Insured: EU 1428Z

at Workshop m/s H.L CYCLE Tel: 9748 9940

of 1 KAKI BUKIT AVE 6 #02-58/60

Policy No: Claim No: 6525255254SG

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 25/02/2021

CA / REV / REP. / REV 24 HRS 'WP' H.O.D. Endorsement:

Date/Time: 4.47PM@10/03/21 Person Contacted: SHAWN Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	FBQ 4175P-X
	EU 1428Z-