

12/02/2021

REF: CS/AIG21003937/Eqf3

Special Instruction:

ASS. REC. BY:

SURVY BY: STEVE

ASSIGNMENT (Office)

Merimen

From (Person): CHIN LEE YING

of AIG

Date/Time: 26/03/2021@1.40PM

Estimated Cost:

Bill to:

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

To Inspect Vehicle No: SMJ 5285E

Insured:

at Workshop m/s

CYCLE & CARRIAGE KIA

Tel: 6568 4501

of

209 PANDAN GARDENS

Policy No: 1900017656

Claim No: 3668465047SG

Sum Insured:

Excess: 0/-

D.O.A. 25/03/2021

Make of Veh:

(Client's Record)

CA ☒ REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time: 1.55PM@26/03/21

Person Contacted:

KEVIN

Vehicle ☒ IN/OUT

Date/Time	Action/Instruction (☒) Estimate
	SMJ 5285E-X