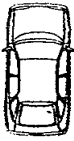


ASSIGNMENT

Surveyor: XING GUO QIANG DOI: 02/08/2022 Date / Time : 02/08/2022
Registered in Merimen:

Pre-assign / CCU / FTE

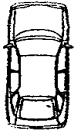


Insured Vehicle No. : <u>SKX 2511Y</u> Name of Insured : _____ Insured Tel No. : _____ HP: _____ Excess Sec II :\$ D.O.A : <u>28/07/2022 14:50</u>	Claim No. : _____ Policy No. : _____ Make / Model : _____ Place of Accident : _____
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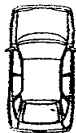
Is driver the owner? (YES / NO) Nature of Accident : _____

If NO , Driver Name / Age :		OI GIA REPORT: YES / NO ; TP GIA REPORT: YES / NO	
Driver Tel No. :	(V/L: YES / NO)	Insured Liability :	% Final ? Yes / No

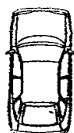
SHA 2040X



INSRS:
WSP:
Tel :
Liability :
RMKS:



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Liability :
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Liability :
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Liability :
RMKS:

[illegible]