

MOTOR SURVEY ASSIGNMENT

Date	04-12-2019	Our Ref No. D19007678MFSH
Accident Date	30-11-2019	Claim Type. Third Party
Insured Vehicle	SH8896L	Third Party Vehicle. FBM5464U
Survey Location	BLK 4001 ANG MO KIO INDUSTRIAL PARK 1 #01-21	
Contact Person.	LEENA	
Contact No.	64524898/ 0	Fax No. 64526898
Survey Type	WITHOUT PREJUDICE:	
Appointed Surveyor	LKK AUTO CONSULTANTS PTE LTD	
Contact Person	NA	Fax No. 68416315
Contact Number.	NA	

FOR DIRECT SETTLEMENT

Please submit to us the Tax Invoice together with letter of claim for Rental OR Loss of use (based on NIMA Benchmark rates) together with your survey report.

THIRD PARTY SURVEY REQUEST

Cc : Workshop	SG 98 MOTOR PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	KARENT	

IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.
This is a computer generated letter, no signature required.