

MOTOR SURVEY ASSIGNMENT

Date 09-12-2019 **Our Ref No.** D19007750MFSH

Accident Date 05-12-2019 **Claim Type.** Third Party

Insured Vehicle SHC0228A **Third Party Vehicle.** SML8661Y

Survey Location 8 KAKI BUKIT AVENUE 4 #02-24 PREMIER @ KAKI BUKIT

Contact Person. SHANELLE LIM

Contact No. 62866060/ 91878064 **Fax No.** 62867060

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 RICO 60 AUTO **Attention.** NIL
SERVICES PTE LTD

Cc : TP Solicitor NA **TP Solicitor Fax No.** NA

Officer Incharge MERINA CHIA SAN SAN

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.