

MOTOR SURVEY ASSIGNMENT

Date	04-12-2019	Our Ref No. D19007675MFSH
Accident Date	02-12-2019	Claim Type. Third Party
Insured Vehicle	SHA2306E	Third Party Vehicle. SLN6431J
Survey Location	385, SIN MING DRIVE (INSIDE VICOM)	
Contact Person.	JENNY CHONG	
Contact No.	65662112/ 87990066	Fax No. 62593326
Survey Type	WITHOUT PREJUDICE: WE ADMIT LIABILITY QUANTUM TO BE AGREED:	
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	ESTEEM PERFORMANCE 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.