

MOTOR SURVEY ASSIGNMENT

Date	06-12-2019	Our Ref No. D19007743MFSH
Accident Date	05-12-2019	Claim Type. Third Party
Insured Vehicle	SHB2306A	Third Party Vehicle. SME9396T
Survey Location	247 ALEXANDRA ROAD	
Contact Person.	CHARMAINE KONG	
Contact No.	63057176/ 63057299	Fax No. 64743643
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	VOLKSWAGEN CENTRE SINGAPORE	Attention. NIL
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.