

MOTOR SURVEY ASSIGNMENT

Date	24-12-2019	Our Ref No. D19008086MFSH
Accident Date	21-12-2019	Claim Type. Third Party
Insured Vehicle	SHA3376X	Third Party Vehicle. SMG2860E
Survey Location	BLK 53 UBI AVE 1 #01-24 PAYA UBI INDUSTRIAL PARK	
Contact Person.	SHU SHAN	
Contact No.	67442475/ 0	Fax No. 68442474
Survey Type	WITHOUT PREJUDICE: OUR INSURED REPORTED NO DAMAGES ON TP VEHICLE. PLEASE INSPECT THE TP VEHICLE THOR	
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	TEAMWORK GARAGE 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.