

MOTOR SURVEY ASSIGNMENT

Date	02-01-2020	Our Ref No. D20000135MFSH
Accident Date	19-12-2019	Claim Type. Third Party
Insured Vehicle	SHC0629B	Third Party Vehicle. SKS7515E
Survey Location	51 UBI AVENUE 1 #05-02 PAYA UBI INDUSTRIAL PARK	
Contact Person.	CHRISTINA TAN	
Contact No.	91883197/ 91883197	Fax No. 0
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	1ST AUTO PRO PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	RACHELWU LIMEI	

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.