

MOTOR SURVEY ASSIGNMENT

Date	30-01-2020	Our Ref No. D20000695MFSH
Accident Date	20-01-2020	Claim Type. Third Party
Insured Vehicle	SHA1370A	Third Party Vehicle. SGE9079E
Survey Location	8 KAKI BUKIT AVE 4 #01-49, PREMIER @ KAKI BUKIT	
Contact Person.	LUCAS	
Contact No.	0/ 81316518	Fax No. 0
Survey Type	WITHOUT PREJUDICE: LIABILITY NOT CLEAR	
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	BIFROST AUTO PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	MAY CHUA	

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.