

MOTOR SURVEY ASSIGNMENT

Date	31-01-2020	Our Ref No. D20000720MFSH
Accident Date	30-01-2020	Claim Type. Third Party
Insured Vehicle	SHB6226X	Third Party Vehicle. SLL1467A
Survey Location	2 KAKI BUKIT AVENUE 2 #02-13 AUTO HUB	
Contact Person.	NA	
Contact No.	67459633/ 0	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	HIAP HONG MOTOR REPAIR	Attention. NIL
Cc : TP Solicitor	TNG SOON CHYE & CO	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.