

MOTOR SURVEY ASSIGNMENT

Date	11-02-2020	Our Ref No. D20000931MFSH
Accident Date	09-02-2020	Claim Type. Third Party
Insured Vehicle	SHC3240T	Third Party Vehicle. SKX7318G
Survey Location	209 PANDAN GARDENS	
Contact Person.	DON BONG	
Contact No.	65684555/ 0	Fax No. 65691056
Survey Type	WITHOUT PREJUDICE: WE ADMIT LIABILITY QUANTUM TO BE AGREED:	
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	CYCLE & CARRIAGE AUTOMOTIVE 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.