

MOTOR SURVEY ASSIGNMENT

Date	12-02-2020	Our Ref No. D20000963MFSH
Accident Date	11-02-2020	Claim Type. Third Party
Insured Vehicle	SHB6687Z	Third Party Vehicle. SLK5521E
Survey Location	2 KAKI BUKIT AVENUE 2 #01-18 KAKI BUKIT AUTOHUB	
Contact Person.	ZI TING	
Contact No.	68420051/ 0	Fax No. 67410510
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	N-51 AUTOMOTIVE PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	JOANNEY	

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.