

MOTOR SURVEY ASSIGNMENT

Date	16-03-2020	Our Ref No. D20001478MFSH
Accident Date	13-03-2020	Claim Type. Third Party
Insured Vehicle	SHC8790P	Third Party Vehicle. WD22T
Survey Location	160 SIN MING DRIVE #06-01 SIN MING AUTOCITY	
Contact Person.	DOREEN CHAN	
Contact No.	6453 5654/ 6459 1630	Fax No. 6459 1698
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	AUTOEXCEL ENGINEERING 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.