

MOTOR SURVEY ASSIGNMENT

Date	08-04-2020	Our Ref No. D20001829MFSH
Accident Date	07-04-2020	Claim Type. Third Party
Insured Vehicle	SHD4037C	Third Party Vehicle. SKN4667X
Survey Location	BLK 160, SIN MING DRIVE, SIN MING AUTO CITY #05-01	
Contact Person.	VRONICA LAW	
Contact No.	64531235/ 0	Fax No. 64537944
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	CITY AUTO 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.