

MOTOR SURVEY ASSIGNMENT

Date	08-04-2020	Our Ref No. D20001832MFSH
Accident Date	07-04-2020	Claim Type. Third Party
Insured Vehicle	SHA4117X	Third Party Vehicle. PA9870B
Survey Location	BLK 113 TECK WHYE LANE #05-650	
Contact Person.	MR ALAN TAN	
Contact No.	83868989/ 83868989	Fax No. 0
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	A T AUTO CONSULTANT	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.