

**MOTOR SURVEY ASSIGNMENT**

**Date** 21-04-2020 **Our Ref No.** D20001955MFSH

**Accident Date** 18-04-2020 **Claim Type.** Third Party

**Insured Vehicle** SHA0610P **Third Party Vehicle.** SMA5871K

**Survey Location** 2 KAKI BUKIT AVENUE 2 #01-18 KAKI BUKIT AUTOHUB  
**Contact Person.** MELODY CHIN  
**Contact No.** 68420051/ 0 **Fax No.** 67410510

**Survey Type** WITHOUT PREJUDICE: WE ADMIT LIABILITY QUANTUM TO BE AGREED (NO EST COR PROVIDED. TO REQUEST 3P VIDEO

**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** RACHELWU LIMEI

**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.