

MOTOR SURVEY ASSIGNMENT

Date	22-06-2020	Our Ref No. D20002503MFSH
Accident Date	20-06-2020	Claim Type. Third Party
Insured Vehicle	SHA8704A	Third Party Vehicle. SML1466R
Survey Location	1 KAKI BUKIT AVE 6 #02-11 AUTOBAY @ KAKI BUKIT	
Contact Person.	AH SIONG	
Contact No.	97864483/ 97864483	Fax No. 0
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	AUTOMOBILE HUB ENTERPRISE	Attention. NIL
Cc : TP Solicitor	JUSEQUITY LAW CORPORATION	TP Solicitor Fax No. NA
Officer Incharge	MERINA CHIA SAN SAN	

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.