

MOTOR SURVEY ASSIGNMENT

Date	07-07-2020	Our Ref No. D20002689MFSH
Accident Date	03-07-2020	Claim Type. Third Party
Insured Vehicle	SHA1517U	Third Party Vehicle. SH7042Y
Survey Location	BLK 9 SECTOR C #01-42, SIN MING INDUSTRIAL ESTATE,	
Contact Person.	MS LIM / MS LEE / MS HEAH	
Contact No.	0/ 97921329	Fax No. 0
Survey Type	WITHOUT PREJUDICE: NO EST. COR PROVIDED	
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	BIFROST AUTO PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	HENG DING CHAO	

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.