

MOTOR SURVEY ASSIGNMENT

Date	07-08-2020	Our Ref No. D20003119MFSH
Accident Date	03-08-2020	Claim Type. Third Party
Insured Vehicle	SHC8598D	Third Party Vehicle. SLU7316R
Survey Location	BLK 1010 BUKIT MERAH LANE 3 #01-105	
Contact Person.	SHARON LEE	
Contact No.	62725429/ 0	Fax No. 62736676
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	CHARN'S CUSTOMCRAFT	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.