

MOTOR SURVEY ASSIGNMENT

Date	26-08-2020	Our Ref No. D20003404MFSH
Accident Date	25-08-2020	Claim Type. Third Party
Insured Vehicle	SHD7267K	Third Party Vehicle. SJR3861Z
Survey Location	BLOCK 731 WOODLANDS CIRCLE #01-09	
Contact Person.	CLEON CHENG	
Contact No.	93866315/ 90611218	Fax No. 67672081
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	GMA AUTOMOTIVE SERVICES	Attention. NIL
Cc : TP Solicitor	HIN TAT AUGUSTINE & PARTNERS	TP Solicitor Fax No. NA
Officer Incharge	CHRIS LIM	

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.