

MOTOR SURVEY ASSIGNMENT

Date	07-09-2020	Our Ref No. D20003600MFSH
Accident Date	31-08-2020	Claim Type. Third Party
Insured Vehicle	SHD3016U	Third Party Vehicle. SFJ6922B
Survey Location	10 ANG MO KIO INDUSTRIAL PARK 2A #04-04 AMK AUTOPOINT	
Contact Person.	ELEANOR	
Contact No.	64833353/ 0	Fax No. 64842457
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	LYE DESIGNS	Attention. NIL
Cc : TP Solicitor	VISION LAW LLC	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.