

MOTOR SURVEY ASSIGNMENT

Date	14-09-2020	Our Ref No. D20003721MFSH
Accident Date	13-09-2020	Claim Type. Third Party
Insured Vehicle	SHC2868P	Third Party Vehicle. SMH4372D
Survey Location	209 PANDAN GARDENS	
Contact Person.	DON BONG	
Contact No.	65684501/ 91865202	Fax No. 65651240
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	CYCLE & CARRIAGE AUTOMOTIVE PTE LTD	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.