

MOTOR SURVEY ASSIGNMENT

Date	11-09-2020	Our Ref No. D20003684MFSH
Accident Date	09-09-2020	Claim Type. Third Party
Insured Vehicle	SHA3209X	Third Party Vehicle. SGX9111U
Survey Location	BLK 1010 BUKIT MERAH LANE 3 #01-105	
Contact Person.	SHARON LEE	
Contact No.	62717054/ 0	Fax No. 62736676
Survey Type	DIRECT SETTLEMENT: PLEASE REQUEST FOR TP VIDEO,VERIFY TP DAMAGE CONSISTENCY AND QUANTUM AND NO. OF D	
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	SANGHILAN VIC ALPEH SUMAGANG	

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.