

MOTOR SURVEY ASSIGNMENT

Date	21-09-2020	Our Ref No. D20003808MFSH
Accident Date	05-09-2020	Claim Type. Third Party
Insured Vehicle	SHC8800U	Third Party Vehicle. SGJ943T
Survey Location	25 DEFU LANE 9	
Contact Person.	MR BEN OOI	
Contact No.	66791146/ 91478545	Fax No. 0
Survey Type	WITHOUT PREJUDICE: NO ESTIMATE	
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	ALLSWELL MOTOR TRADERS	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.