

MOTOR SURVEY ASSIGNMENT

Date	07-10-2020	Our Ref No. D20004073MFSH
Accident Date	06-10-2020	Claim Type. Third Party
Insured Vehicle	SHD3039D	Third Party Vehicle. SHB8971P
Survey Location	23 CHANGI SOUTH AVENUE 2 #01-02	
Contact Person.	LIEW HAI LEONG	
Contact No.	62148880/ 0	Fax No. 62141511
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	PREMIER AUTOMOTIVE SERVICES PTE LTD	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.