

MOTOR SURVEY ASSIGNMENT

Date	19-10-2020	Our Ref No. D20004228MFSH
Accident Date	16-10-2020	Claim Type. Third Party
Insured Vehicle	SHD8536C	Third Party Vehicle. SMP9076J
Survey Location	BLOCK 1008 BUKIT MERAH LANE 3 #01-04/06/08	
Contact Person.	AVRIL HO	
Contact No.	62723892/ 0	Fax No. 62708314
Survey Type	DIRECT SETTLEMENT:	
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	MOVA AUTOMOTIVE PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	WOO JUN KIATERIC	

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.