

MOTOR SURVEY ASSIGNMENT

Date	03-11-2020	Our Ref No. D20004472MFSH
Accident Date	02-11-2020	Claim Type. Third Party
Insured Vehicle	SHB6649J	Third Party Vehicle. FBL5529Y
Survey Location	8 KAKI BUKIT AVENUE 4#03-46 PREMIER @ KB	
Contact Person.	ENN JIE YING	
Contact No.	87970013/ 96664445	Fax No. 0
Survey Type	WITHOUT PREJUDICE: NO ESTIMATE. VERIFY DAMAGE CONSISTENCY	
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	GARAGE 13 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.