

MOTOR SURVEY ASSIGNMENT

Date	12-10-2020	Our Ref No. D20004116MFSH
Accident Date	08-10-2020	Claim Type. Third Party
Insured Vehicle	SHA0996B	Third Party Vehicle. FBF1446K
Survey Location	50 BUKIT BATOK STREET 23 #02-02 MIDVIEW BUILDING	
Contact Person.	LIM W. KOON	
Contact No.	68966619/ 0	Fax No. 62678616
Survey Type	WITHOUT PREJUDICE:	
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	HUA CHIN (2000)TRADING MOTOR SERVICE CENTRE	Attention. NIL
Cc : TP Solicitor	MAHADI ABU BAKAR & PARTNERS	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.