

MOTOR SURVEY ASSIGNMENT

Date	28-12-2020	Our Ref No. D21000020MFSH
Accident Date	22-12-2020	Claim Type. Third Party
Insured Vehicle	SHA0968H	Third Party Vehicle. SMW2414B
Survey Location	23 KAKI BUKIT AVENUE 4 #04-01AAS KAKI BUKIT CENTRE	
Contact Person.	KELVIN CHEW	
Contact No.	0/ 82925595	Fax No. 0
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	XIN HUA WORKSHOP 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.