

MOTOR SURVEY ASSIGNMENT

Date	04-01-2021	Our Ref No. D21000097MFSH
Accident Date	30-12-2020	Claim Type. Third Party
Insured Vehicle	SHB4707M	Third Party Vehicle. SDR5665G
Survey Location	BLK 9005 TAMPINES STREET 93 #01-246/254	
Contact Person.	PEGGY FOO	
Contact No.	67840663/ 0	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	NPH AUTO SERVICE	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.