

MOTOR SURVEY ASSIGNMENT

Date	04-05-2021	Our Ref No. D21001401MFCV
Accident Date	26-04-2021	Claim Type. Third Party
Insured Vehicle	GBG6207X	Third Party Vehicle. SKC1866R
Survey Location	27A TANJONG PENJURU SINGAPORE 609042	
Contact Person.	JESS FRANCIS CARLOS	
Contact No.	81289802/ 81289802	Fax No. 81289802
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	TRANS EUROKARS PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	RACHELWU LIMEI	

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.