

MOTOR SURVEY ASSIGNMENT

Date 17-05-2021 **Our Ref No.** D21001517MFZH

Accident Date 12-05-2021 **Claim Type.** Third Party

Insured Vehicle SKW9355R **Third Party Vehicle.** SLF4865X

Survey Location 1 KAKI BUKIT AVE 6 #02-47 AUTOBAY

Contact Person. SEBASTIAN

Contact No. 65095521/ 65095521 **Fax No.** 65095523

Survey Type WITHOUT PREJUDICE: ACCIDENT NOT REPORTED. VERIFY TP 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 T K LEE AUTOMOTIVE **Attention.** NIL
PTE LTD

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.