

MOTOR SURVEY ASSIGNMENT

Date	01-09-2021	Our Ref No. D21002459MFCV
Accident Date	31-08-2021	Claim Type. Third Party
Insured Vehicle	YP9353S	Third Party Vehicle. GBK9634E
Survey Location	10 TUAS AVENUE 18	
Contact Person.	KON YIN SIEW	
Contact No.	68610007/ 97396433	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	GOLDBELL ENGINEERING PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	MERINA CHIA SAN SAN	

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.