

MOTOR SURVEY ASSIGNMENT

**Date** 14/06/2024 **Our Ref No.** D24005280MFCT

Accident Date 12-06-2024 Claim Type Third Party

Insured Vehicle SHA4285T Third Party Vehicle SLC4188H

Survey Location WE GARAGE Contact Person LAWRENZ SOH

1 KAKI BUKIT AVENUE 6, #02-11 AUTOBAY @ KAKI BUKIT (S)

417883

**Contact No.** 90096622 **Fax No.** 

Survey Type Without Prejudice

Appointed LKK AUTO CONSULTANTS PTE LTD

Surveyor

Contact Person Fax No. 68416315

Contact Number 62563561

## 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.

Cc: Workshop WE GARAGE Attention LAWRENZ SOH

Cc: TP Solicitor JUSEQUITY LAW CORPORATION TP Solicitor Fax No 65365368

Officer Incharge KARENT

## **IMPORTANT NOTE**

Kindly submit the survey report by **email only** to <u>surveyor@msfirstcapital.com.sg</u> within 14 days for survey assignment and 7 days for re-inspection.

This is a computer generated letter, no signature required.