

# REQUEST FOR SUPPLEMENTS PARTS

Contractor:	STRIDES AUTOMOTIVE		
Accident Case Number	TAX/08/24/2040	Date of Collection	/ /
Vehicle No	SHB1915Z	Date of Request	15/8/2024
Vehicle Model	MG5	Number of Days to Extend (If any)	

S/N	Part Number	Part Description	Quantity	Total Price
1	10359002	FINISHER-RR BPR - LH	1	\$47.42 / BR
2	10327894	BAR ASM-RR BPR IMP	1	\$339.77 / DD
3				
4				
5				
6				
7				
8				
9				
10				

<<< Please submit photographs for damaged parts >>>

I, (Name) \_\_\_\_\_

(Position) \_\_\_\_\_

do solemnly and sincerely declare that:- Supplementary Parts are raised for replacement for the aforesaid vehicle.

Steve (LKK) 15/08/24, 2.30 pm

Signature of person making this declaration  
(to be signed in front of an authorised witness)

**I acknowledge that this declaration is true and correct, and I make it with the understanding and belief that a person who makes a false declaration is liable to the damages of perjury.**

For SMRT Staff

Acknowledge By	ARC Executive / Supervisor / SA	
Approval By	Surveyor / In-house Staff	
Parts Ordering	SMRT Store / Contractor Supply / Form 22 / WOC	Form22 / PO / WOC/ Reservation / Number
Photo Submitted	YES / NO	#NAME?