

MOTOR SURVEY ASSIGNMENT

Date	13/09/2024	Our Ref No.	D24007937MFCT
Accident Date	09-09-2024	Claim Type	Third Party
Insured Vehicle	SHC0619E	Third Party Vehicle	SNL8688J
Survey Location	WE GARAGE 1 KAKI BUKIT AVE 6 #02--11 AUTOBAY @ KAKI BUKIT S(417883)	Contact Person	LAWRENZ SOH
Contact No.	90096622	Fax No.	

Survey Type Without Prejudice

Appointed Surveyor	LKK AUTO CONSULTANTS PTE LTD		
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.

Encl. Accident Reports

Cc : Workshop WE GARAGE

Attention LAWRENZ SOH

Cc : TP Solicitor SERENE

Officer Incharge

IMPORTANT NOTE

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

This is a computer generated letter, no signature required.