DARREN

Contact Person



MOTOR SURVEY ASSIGNMENT

Date 20/06/2024 **Our Ref No.** D24005415MFCT

Accident Date 19-06-2024 Claim Type Third Party

Insured Vehicle SHB4967D Third Party Vehicle SLJ2786H

Survey Location TEAMWORK GARAGE PTE LTD

BLK 53 UBI AVE 1 #01-24 PAYA

UBI INDUSTRIAL PARK (S)

408934

Contact No. 68442475 **Fax No.**

Survey Type Without Prejudice

non reporting

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 TEAMWORK GARAGE PTE LTD Attention DARREN

Officer Incharge JOANNEYO

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.