

MOTOR SURVEY ASSIGNMENT

**Date** 25/09/2024 **Our Ref No.** D24008239MFCT

Accident Date 18-09-2024 Claim Type Third Party

Insured Vehicle SH7110C Third Party Vehicle SNM4830K

Survey Location MY CAR CONSULTANT PTE LTD Contact Person JACKSON HO

60 Jalan Lam Huat Carros Centre

#05-21 (S) 737869

**Contact No.** 83447681 **Fax No.** 69255219

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.

Encl. Accident Reports

Cc: Workshop MY CAR CONSULTANT PTE LTD Attention JACKSON HO

Officer Incharge SERENE

## **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.