

**MOTOR SURVEY ASSIGNMENT**

|                        |            |                            |               |
|------------------------|------------|----------------------------|---------------|
| <b>Date</b>            | 27/09/2024 | <b>Our Ref No.</b>         | D24008533MFCT |
| <b>Accident Date</b>   | 26-09-2024 | <b>Claim Type</b>          | Third Party   |
| <b>Insured Vehicle</b> | SHD4881G   | <b>Third Party Vehicle</b> | SCZ9218H      |

|                        |  |                       |          |
|------------------------|--|-----------------------|----------|
| <b>Survey Location</b> | SM AUTOMOTIVE<br>BLK C, 1 KAKI BUKIT AVENUE 6<br>#01-43 (S) 417883 | <b>Contact Person</b> | YUN LI   |
| <b>Contact No.</b>     | 67479241   | <b>Fax No.</b>        | 67417276 |

**Survey Type** Without Prejudice  
(No estimate)

|                           |                              |
|---------------------------|------------------------------|
| <b>Appointed Surveyor</b> | LKK AUTO CONSULTANTS PTE LTD |
| <b>Contact Person</b>     | <b>Fax No.</b> 68416315      |
| <b>Contact Number</b>     | 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** SM AUTOMOTIVE  
**Officer Incharge** CHRISLIM

**Attention** YUN LI

**IMPORTANT NOTE**

Kindly submit the survey report by **email only** to [surveyor@msfirstcapital.com.sg](mailto: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.**