

**MOTOR SURVEY ASSIGNMENT** 

**Date** 18/10/2024 **Our Ref No.** D24008975MFCT

Accident Date 09-10-2024 Claim Type Third Party

Insured Vehicle SHC2105H Third Party Vehicle SCF588D

Survey Location PERFORMANCE MOTORS Contact Person WINNIE

LIMITED

303 ALEXANDRA ROAD (S)

159941

**Contact No.** 63190175 **Fax No.** 64794601

Survey Type Direct Settlement (Subject to quantum to be

agreed)

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.

Cc: Workshop PERFORMANCE MOTORS LIMITED Attention WINNIE

Officer Incharge KARENT

## **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.