

MOTOR SURVEY ASSIGNMENT

Date 18/10/2024 **Our Ref No.** D24009201MFCT

Accident Date 17-10-2024 Claim Type Third Party

Insured Vehicle SH9877K Third Party Vehicle SNH8664Z

Survey Location SPECIALISTS MOTOR PTE LTD Contact Person IRENE

BLK 3018A UBI ROAD 1 #01-24-

26 (S) 408711

Contact No. 67472112 **Fax No.** 67438032

Survey Type Without Prejudice - No Estimate, No Video

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 SPECIALISTS MOTOR PTE LTD Attention IRENE

Officer Incharge JASONTEA

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.