

MOTOR SURVEY ASSIGNMENT

Date	13/11/2024	Our Ref No.	D24009866MFCT
Accident Date	07-11-2024	Claim Type	Third Party
Insured Vehicle	SHC0431D	Third Party Vehicle	GBM3719Z
Survey Location	R & S AUTOCLAIM PTE. LTD. 13 PIONEER SECTOR 1 SINGAPORE 628424	Contact Person	SUSAN TAN
Contact No.	80966413	Fax No.	

Survey Type Without Prejudice
(No estimate)

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	R & S AUTOCLAIM PTE. LTD.	Attention	SUSAN TAN
Officer Incharge	CHRISLIM		

IMPORTANT NOTE

Kindly submit the survey report by **email only** to 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.