

MOTOR SURVEY ASSIGNMENT

**Date** 22/10/2024 **Our Ref No.** D24009279MFCT

Accident Date 18-10-2024 Claim Type Third Party

Insured Vehicle SHB2978K Third Party Vehicle SLT3936H

Survey Location FOCUS AUTO PTE LTD Contact Person TIMOTHY

NO 1 KAKI BUKIT AVE 6

AUTOBAY #02-50 (S) 417883

**Contact No.** 68869097 **Fax No.** 

Survey Type Without Prejudice

No est

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 FOCUS AUTO PTE LTD Attention TIMOTHY

Officer Incharge JOANNEYO

## **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.