

MOTOR SURVEY ASSIGNMENT

Date 25/11/2024 **Our Ref No.** D24010275MFCT

Accident Date 21-11-2024 Claim Type Third Party

Insured Vehicle SHC2403Y Third Party Vehicle SNP8686T

Survey Location EUROKARS GROUP Contact Person 8121 2923 - OH HUI \

11 Kung Chong Road, Singapore

159147

Contact No. 63602484 Fax No.

Survey Type Direct Settlement

(SUBJECTED TO QUANTUM TO BE

AGREED)

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. Estimate & GIA REPORT

Cc: Workshop EUROKARS GROUP Attention 8121 2923 - OH HUI W

Officer Incharge EMILYTAN

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.