

MOTOR SURVEY ASSIGNMENT

Date	22/11/2024	Our Ref No.	D24009282MFCT
Accident Date	19-10-2024	Claim Type	Third Party
Insured Vehicle	SHC7413K	Third Party Vehicle	SMZ1623E
Survey Location	DICKSON AUTO CARE CENTRE PTE LTD 29 UBI ROAD 4, DICKSON AUTO CENTRE (S) 408619	Contact Person	XIANG / RANDELL
Contact No.	88849193	Fax No.	66681123

Survey Type Without Prejudice

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	DICKSON AUTO CARE CENTRE PTE LTD	Attention	XIANG / RANDELL
Officer Incharge	EMILYTAN		

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.