

Your Ref : **C10033091/CY**
SMY4024U

Fax : **6538 3708**

Our Ref : **JP/YS/24/ GBM3405D/BSA**

Tel : **3152 0985**

Date : 25 November 2024

Email : **jiapei@kscgp.com**

**AUTO & GENERAL INSURANCE PTE LTD T/A BUDGET
DIRECT INSURANCE**

BY EMAIL ONLY

DATE OF ACCIDENT: 22 November 2024

NOTICE TO INSURER TO CONDUCT PRE-REPAIR SURVEY / INSPECTIONS

We refer to your email of even date.

Please be informed that our client is agreeable to appointing LKK. as a Single Joint Expert.

The said vehicle can be surveyed / inspected at:

Address : Best Solution Autocare P/L
Add: 53 Ubi Ave 1 #03-01 Paya Ubi Industrial Park S
408934

Contact Person/Tel : Angel
Office: 6744 0777 / Mobile: 83831777

Yours faithfully,

YS

Your Ref : C10033091/CY

SMY4024U

Our Ref : JP/YS/24/ GBM3405D/BSA

Date :

Acknowledgement

This is to confirm that I _____ *[Full Name of Surveyor]* of
_____ *[Surveyor's Company]* have completed as follows:-

(a) Pre- Repair Survey/Inspection on _____ [Date] at _____ [Time].

Name and signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date:

(b) Pre- Repair Survey/Inspection (during dismantling) on _____ [Date] at _____ [Time].

Name and signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date:

(c) Re-inspection of new replacement part (part by part) on _____ [Date] at _____ [Time].

Name and signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date:

(d) Post – Repair Survey/Inspection on _____ [Date] at _____ [Time].

Name and signature of Appointed Surveyor
Company Stamp

Witnessed by:
Date: