POH KIN CHONG



MOTOR SURVEY ASSIGNMENT

**Date** 03/12/2024 **Our Ref No.** D24010568MFCT

Accident Date 01-12-2024 Claim Type Third Party

Insured Vehicle SHC8225E Third Party Vehicle SJL584A

Survey Location KGC WORKSHOP PTE LTD Contact Person

1 CORPORATE DRIVE, #04-05/12 REVV @CORPORATION

DRIVE (S) 619775

**Contact No.** 81892986 **Fax No.** 

Survey Type Direct Settlement (Subject to quantum to be

agreed)

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 KGC WORKSHOP PTE LTD Attention POH KIN CHONG

Officer Incharge KARENT

## **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.