

### MOTOR SURVEY ASSIGNMENT

<b>Date</b>	10/12/2024	<b>Our Ref No.</b>	D24010777MFCT
<b>Accident Date</b>	09-12-2024	<b>Claim Type</b>	Third Party
<b>Insured Vehicle</b>	SHB6608C	<b>Third Party Vehicle</b>	SMD329C

<b>Survey Location</b>	AUTOMOTIVE REPAIR CENTRE PTE LTD 48 TOH GUAN ROAD EAST #02- 146 ENTERPRISE HUB (S) 608586	<b>Contact Person</b>	JAMES TAN
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<b>Contact No.</b>	80813288	<b>Fax No.</b>	
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**Survey Type** Without Prejudice  
Pls submit est

<b>Appointed Surveyor</b>	LKK AUTO CONSULTANTS PTE LTD
<b>Contact Person</b>	
<b>Contact Number</b>	62563561

**Fax No.** 68416315

### 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

<b>Cc : Workshop</b>	AUTOMOTIVE REPAIR CENTRE PTE LTD	<b>Attention</b>	JAMES TAN
<b>Officer Incharge</b>	JOANNEYO		

### IMPORTANT NOTE

Kindly submit the survey report by **email only** to [surveyor@msfirstcapital.com.sg](mailto: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.