

MOTOR SURVEY ASSIGNMENT

Date 11/12/2024 **Our Ref No.** D24010797MFCT

Accident Date 09-12-2024 Claim Type Third Party

Insured Vehicle SHD3689C Third Party Vehicle SJA7370L

Survey Location WEARNES AUTOMOTIVE PTE Contact Person PAULO

LTD

45 LENG KEE ROAD (S) 159103

Contact No. 98270463 **Fax No.**

Survey Type Without Prejudice - No est. provided

Appointed LKK AUTO CONSULTANTS PTE LTD

Surveyor LKK AUTO CONSULTANTS PTE LTL

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. Accident Reports

Cc: Workshop WEARNES AUTOMOTIVE PTE LTD Attention PAULO

Officer Incharge SERENE

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.