

MOTOR SURVEY ASSIGNMENT

Date 12/12/2024 **Our Ref No.** D24010886MFCT

Accident Date 11-12-2024 Claim Type Third Party

Insured Vehicle SHC8411J Third Party Vehicle SME2872G

Survey Location KAH MOTOR CO. SDN. BHD. Contact Person NG SIN HAI - 907217

255 ALEXANDRA ROAD S'PORE

159937

Contact No. 64715419 **Fax No.**

Survey Type Without Prejudice

Appointed LKK AUTO CONSULTANTS PTE LTD

Surveyor

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. Estimate

Cc: Workshop KAH MOTOR CO. SDN. BHD. Attention NG SIN HAI - 9072176

Officer Incharge CHRISLIM

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.