

MOTOR SURVEY ASSIGNMENT

Date 01/07/2024 **Our Ref No.** D24005704MFCT

Accident Date 28-06-2024 Claim Type Third Party

Insured Vehicle SHA9018R Third Party Vehicle SHC2115D

Survey Location BIFROST AUTO PTE LTD Contact Person MR YEE / JANICE

59 LOYANG DRIVE LEVEL 4

ROOM 7 (S) 508969

Contact No. 62436687 Fax No.

Survey Type Without Prejudice

Pls submit Estimate.

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. Accident Reports

Cc: Workshop BIFROST AUTO PTE LTD Attention MR YEE / JANICE

Officer Incharge JOANNEYO

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.