

MOTOR SURVEY ASSIGNMENT

**Date** 31/12/2024 **Our Ref No.** D25000131MFCT

Accident Date 27-12-2024 Claim Type Third Party

Insured Vehicle SHD3420K Third Party Vehicle SNP4908E

Survey Location JACK CARS ENTERPRISE PTE Contact Person MS S.THANALETCHL

LTD

Blk 3007 Ubi Road 1 #01-450 (S)

408701

**Contact No.** 91701900 **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.

PRI REQ COVER LETTER

Cc: Workshop JACK CARS ENTERPRISE PTE LTD Attention MS S.THANALETCHUI

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.