

MOTOR SURVEY ASSIGNMENT

Date 11/06/2024 **Our Ref No.** D24004995MFCT

Accident Date 03-06-2024 Claim Type Third Party

Insured Vehicle SH9292Y Third Party Vehicle SNQ912M

Survey Location JL PERFECT AUTOWORK PTE Contact Person IRENE

LTD

8 KAKI BUKIT AVENUE 4 #08-09 PREMIER @ KAKI BUKIT (S)

415875

Contact No. 82979787 **Fax No.**

Survey Type Without Prejudice

(No estimate)

Appointed
Surveyor

LKK AUTO CONSULTANTS PTE LTD

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 JL PERFECT AUTOWORK PTE LTD Attention IRENE

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.