

MOTOR SURVEY ASSIGNMENT

**Date** 05/07/2024 **Our Ref No.** D24005913MFCT

Accident Date 05-07-2024 Claim Type Third Party

Insured Vehicle SHA7186B Third Party Vehicle SNP9768J

Survey Location KOMOCO MOTORS PTE LTD Contact Person ROBYN CHIN ZHI SH

253 ALEXANDRA ROAD #01-01

(S) 159936

**Contact No.** 90700157 **Fax No.** 

Survey Type Direct Settlement

(Subject to quantum to be agreed)

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 & Estimate

Cc: Workshop KOMOCO MOTORS PTE LTD Attention ROBYN CHIN ZHI SHE

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.