

MOTOR SURVEY ASSIGNMENT

Date 08/07/2024 **Our Ref No.** D24005855MFCT

Accident Date 03-07-2024 Claim Type Third Party

Insured Vehicle SH9795M Third Party Vehicle SND8986R

Survey Location EUROKARS GROUP Contact Person MR JOSEPH TEE

27A TANJONG PENJURU (S)

609042

Contact No. 89303879 **Fax No.**

Survey Type Direct Settlement

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.

Cc: Workshop EUROKARS GROUP Attention MR JOSEPH TEE

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.