

MOTOR SURVEY ASSIGNMENT

**Date** 11/06/2024 **Our Ref No.** D24005160MFCT

Accident Date 07-06-2024 Claim Type Third Party

Insured Vehicle SHB3351L Third Party Vehicle SLF4091L

Survey Location KAH MOTOR CO. SDN. BHD. Contact Person NG SIN HAI

255 ALEXANDRA ROAD SINGAPORE 159937

**Contact No.** 90721769 **Fax No.** 63651949

Survey Type Direct Settlement

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 & Estimate

Cc: Workshop KAH MOTOR CO. SDN. BHD. Attention NG SIN HAI

Officer Incharge ERICWOO

## **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.