

**MOTOR SURVEY ASSIGNMENT** 

**Date** 17/07/2024 **Our Ref No.** D24006190MFCT

Accident Date 13-07-2024 Claim Type Third Party

Insured Vehicle SHA2511D Third Party Vehicle SMV6229Z

Survey Location DICKSON AUTO CARE CENTRE Contact Person MIRA

PTE LTD

29 UBI ROAD 4, DICKSON AUTO CENTRE SINGAPORE 408619

**Contact No.** 66681111 **Fax No.** 

Survey Type Direct Settlement

(SUBJECT TO QUANTUM TO BE

AGREED)

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.

Encl. Accident Reports & Estimate

Cc: Workshop DICKSON AUTO CARE CENTRE PTE LTD Attention MIRA

Officer Incharge EMILYTAN

## **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.