

MOTOR SURVEY ASSIGNMENT

**Date** 23/07/2024 **Our Ref No.** D24006002MFCT

Accident Date 05-07-2024 Claim Type Third Party

Insured Vehicle SHC1214H Third Party Vehicle GBG8234D

Survey Location XIN HUA WORKSHOP PTE LTD Contact Person ALLAN

NO. 23 KAKI BUKIT AVE 4, #04-

01 (S) 415933

Contact No. 88983739 Fax No.

Survey Type Without Prejudice

(NO ESTIMATE)

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 XIN HUA WORKSHOP PTE LTD Attention ALLAN

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.