SUSAN LOW

**Contact Person** 



MOTOR SURVEY ASSIGNMENT

**Date** 30/07/2024 **Our Ref No.** D24006097MFCT

Accident Date 10-07-2024 Claim Type Third Party

Insured Vehicle SH7163A Third Party Vehicle GBE7555U

Survey Location LIU'S BROTHER AUTO

ENGINEERING WORKSHOP 1 KAKI BUKIT AVENUE 6 #01-01 AUTOBAY @ KAKI BUKIT(S)

417883

**Contact No.** 67411730 **Fax No.** 67445746

Survey Type Without Prejudice

(No estimate)

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

Cc: Workshop LIU'S BROTHER AUTO ENGINEERING WORKS Attention SUSAN LOW

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.