

MOTOR SURVEY ASSIGNMENT

**Date** 07/08/2024 **Our Ref No.** D24006835MFCT

Accident Date 03-08-2024 Claim Type Third Party

Insured Vehicle SHD8574S Third Party Vehicle SMG9565L

Survey Location KOMOCO MOTORS PTE LTD Contact Person ROBYN CHIN ZHI SH

253 ALEXANDRA ROAD, #01-01

(S) 159936

**Contact No.** 90700157 **Fax No.** 

Survey Type Without Prejudice

Pend for surveyor revert on quantum

Appointed LKK AUTO CONSULTANTS PTE LTD

Surveyor LKK AUTO CONSULTANTS PTE LTL

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 KOMOCO MOTORS PTE LTD Attention ROBYN CHIN ZHI SHE

Officer Incharge JOANNEYO

## **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.