

| Date: | | 25.04.2018 | | Sent via Fax | | | |
|---------------------------|--|---|---|--|-------------------------|-----------------------|--|
| | ference: | SJQ 5343U/SL/pl | - | | | - | |
| Your Reference: | | SLD 9538T | - | or l | | | |
| Your Ri | eterence: | <u> </u> | • | Email | GL . C | | |
| To: | | ETHOZ GROUP LTD | - | | Cnens | in.Lee@ethozgroup.com | |
| Pre-R | Repair Su | rvey (PRS) Acknowledgement | | | | | |
| Vehicle For Inspection: S | | ection: SLD 9538T | | | | | |
| Insured's Vehicle | | SJQ 5343U | - | | | | |
| Date Of Accident | | | - | | | | |
| | | receipt of your request for PRS on: | 25.04.2018 | | | | |
| | | ith "State Courts Practice Directions Ame | endment No.1 of | ~ 2016", do se | lect an ass | essor from | |
| | - | d indicate your selection in the box mar | | , | | k K | |
| | e Delow Di | , | | | 4; | | |
| | AIS | Automobile Inspection Services Pte Ltd | LBS | L.B.S Auto Co | ncultante Ph | a Itd | |
| FTA | | FormTeam Consultancy Pte Ltd | LKK | | uto Consultants Pte Ltd | | |
| IAS | | Infiniti Appraisal Service | PS | | Priority Services | | |
| JPK | | JP Knights Pte Ltd | VAC | Vicom Ltd | | | |
| | | | | | | | |
| v | Your request for inspection does not have your client's cost of repair estimate, kindly forward a copy. Your request for inspection does not have your client's GIA report, kindly forward a copy. We acknowledge your interest for direct settlement, we will assess & revert soon upon receipt of estimate. Our Insured's driver has not reported the accident to us todate. Others: OFFICER-IN-CHARGE - STEVE LIM | | | | | | |
| , | | | • | | | | |
| Prepared by: | | per. | Pei Li | 6829 | 9194 | claims@ergo.com.sg | |
| Signature: | | 1 400. | <u> </u> | | | FAX: 6829 9247 | |
| | | | | | | | |
| Assess | or use only | <u>!</u> | Workshop use of Assessor attende | | n· | | |
| Assign | ment Date: | | Date: | a workshop o | 111 | | |
| Assignment Time: | | | Time | | | | |
| | | | Inspector: | | | **** | |
| Remarks: | | | Vehicle not avail | lable at the ap | pointed date | e and time. | |
| | | | Kindly acknowle | dge our Assess | sor presence | e for the above job . | |
| | | | Workshop Acknowledgement & Stamp. Note: Our Inspection is on a without admission to liability basis. | | | | |