

**SERVICE REQUEST FORM (SRF)**

**Pls. return by FAX / EMAIL**

**M/s LKK AUTO CONSULTANTS PTE LTD**  
51 Ubi Avenue 1 #01-25  
Paya Ubi Industrial Park  
Singapore 408933  
Tel: 6256 3561 Fax: 6256 4315

Dear Sir/Madam,

**Vehicle No(s).** : SJP 5354T

**Accident Date** : 16/03/2018

We refer to the above matter.

We/I confirmed to appoint your company to conduct RECONSTRUCTION FOR A PROPERTY DAMAGE CLAIM as details mentioned above and agreed to pay the professional fees upon received of the stated report.

**Professional Fees** : \$1,605.00

**Company Name** : JD MOTORSPORT PTE LTD

**Company Stamp & Authorized Signature** : 

**Date** : 7/12/18



**Witness: (for LKK Auto Consultants Pte Ltd)**

**Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_