

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,

MC/DC Suit No. : MC/MC 6743/2020
Vehicle No(s). : XD 37 22 A
Accident Date : 15/09/2019

We refer to the above matter.

We/I confirmed to appoint your company to conduct **Re-Inspection** as details mentioned above and agreed to pay the professional fees within 60 days upon received of the stated report.

Professional Fees : \$428.00 (inclusive of 7% GST)

Company Name : Kelvin Chia Partnership

KELVIN CHIA PARTNERSHIP
Advocates & Solicitors
6 Temasek Boulevard
29th Floor
Suntec Tower Four
Singapore 038986
Tel: 62201911 Fax: 62244118

Company Stamp & : 
Authorized Signature

Date : 14/4/2021

Witness: (for LKK Auto Consultants Pte Ltd)

Name: _____

Signature: _____