**RONALD YAP** 



MOTOR SURVEY ASSIGNMENT

**Date** 08/04/2021 **Our Ref No.** D21000069MFSH

Accident Date 29-12-2020 Claim Type Third Party

Insured Vehicle SHB4726H Third Party Vehicle SLJ3600D

Survey Location TRANS EUROKARS PTE LTD Contact Person

5 UBI CLOSE, S(408605)

Contact No. 63957875 Fax No.

Survey Type Direct Settlement

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. Estimate

Cc: Workshop TRANS EUROKARS PTE LTD Attention RONALD YAP

Officer Incharge ERICWOO

## **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.