

**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,

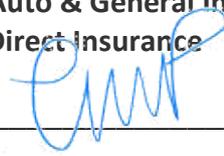
**MC/DC Suit No.** : DC 3491/2018  
**Vehicle No(s).** : FU 353A  
**Accident Date** : 17 July 2018

We refer to the above matter.

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

Professional Fees : \$321.00 (inclusive of 7% GST)

Company Name : **Auto & General Insurance (Singapore) Pte Limited t/a Budget Direct Insurance**

Company Stamp & :  (for and on behalf of Budget Direct Insurance)  
Authorized Signature :

Date : 19 July 2021

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

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

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