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 1908/2021

Vehicle No(s). :FBH 6966H

Accident Date :5.8.2019

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: \$214.00 (inclusive of 7% GST)

Company Name : Catherine Lim LLC

Company Stamp &
Authorized Signature

Date : ______

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Witness: (for LKK Auto Consultants Pte Ltd)

Name: _____ Signature: ____