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. Vehicle No(s). Accident Date	: PC/DC 2513/7 : SKL 8723 C : 26 June 2020		
We refer to the above	ve matter.		2
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	: \$267.50 (inclusive o	f 7% GST)	
Company Name Company Stamp & Authorized Signatur	re V	KELVIN CHIA PARTNERSHIP Advocates & Solicitors 6 Temasek Boulevard 29th Floor Suntec Tower Four Singapore 038986 Tel: 62201911 Fex: 6224418	
Date	: 18/8/21.		
Witness: (for LKK Auto Consultants Pte Ltd)			
Name:		Signature:	