

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/~~DE~~ Suit No. : 3203/2021
Vehicle No(s). : SJU 3505 L
Accident Date : 8 October 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 : VISION LAW

Company Stamp & : _____
Authorized Signature

Date : _____

13/9/21

VISION LAW LLC
Advocates & Solicitors
133 New Bridge Road
#18-01/02 Chinatown Point
Singapore 059413
Tel: 6534 2011 (10 Lines)
Fax: 6535 0916, 6535 0905
6535 6002

Witness: (for LKK Auto Consultants Pte Ltd)

Name: _____

Signature: _____