

MOTOR SURVEY ASSIGNMENT

Date 13/10/2021 **Our Ref No.** D21002859MFCV

Accident Date 12-10-2021 Claim Type Third Party

Insured Vehicle GBD4004T Third Party Vehicle SMJ5154A

Survey Location ADVANCE AUTO GARAGE Contact Person XAVIER LIM

10 KAKI BUKIT ROAD 2 #03-01

FIRST EAST CENTRE (S) 417868

Contact No. 90079247 **Fax No.** 0

Survey Type Without Prejudice

Appointed LKK AUTO CONSULTANTS PTE LTD

Surveyor

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. Accident Reports

Cc: Workshop ADVANCE AUTO GARAGE Attention XAVIER LIM

Officer Incharge CHRISLIM

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.