

MOTOR SURVEY ASSIGNMENT

Date	25/02/2022	Our Ref No.	D22000557MCVP
Accident Date	24-02-2022	Claim Type	Third Party
Insured Vehicle	GW9431B	Third Party Vehicle	SNB439S
Survey Location	TRANS EUROKARS PTE LTD 5 UBI CLOSE SINGAPORE 408605	Contact Person	RONALD YAP
Contact No.	91277928	Fax No.	0

Survey Type Without Prejudice

Appointed Surveyor	LKK AUTO CONSULTANTS PTE LTD
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	TRANS EUROKARS PTE LTD	Attention	RONALD YAP
Officer Incharge	VICALPEH		

IMPORTANT NOTE

Kindly submit the survey report by **email only** to surveyor@msfirstcapital.com.sg within 14 days for survey assignment and 7 days for re-inspection.

This is a computer generated letter, no signature required.