Your Ref : FBK 179L Fax : 6538 3708 Our Ref : JP/DS/22/SCV 5557B/SHLS Tel : 3152 0985

Date : 28 March 2022 Email : jiapei@kscgp.com

SOMPO INSURANCE SINGAPORE PTE. LTD BY EMAIL ONLY

DATE OF ACCIDENT: 12 AUGUST 2021 NOTICE TO INSURER TO CONDUCT PRE-REPAIR SURVEY / INSPECTIONS

We refer to your email of even date.

Please be informed that our client is not agreeable to your proposed motor surveyors. Instead please find below surveyor from our client as appended below:-

S/No.	Name of Surveyor	Company Name
1.	William Ng	Allied Auto Appraisal

Please be informed that if we do not hear from you within 2 working days from the date hereof, we will assume, as per the Protocol, that you have no objections to our list of motor surveyors. You will be deemed to have agreed to any of the above motor surveyors as a "single joint expert". We will inform you who the "single joint expert" is in due course.

If you object to our client's list of motor surveyors, we will accordingly inform the client to instruct his choice of motor surveyor to conduct the pre-repair survey. Also, please let us know within 2 working days excluding any intervening Saturday, Sunday and/or Public Holiday of your receipt of this notice whether you would like to conduct a pre-repair survey of the vehicle failing which our client will commence repairs thereafter without any further notice or reference to you. Please be informed that the said vehicle can be surveyed / inspected at:

Address : Sin Hup Lee Services Co

Blk 1005 Bukit Merah Lane 2 #01-20

Singapore 159761

Contact Person/Tel : Mr Wong Sau Beng

6278 2482

Yours faithfully,

Ds

(Chinatown Office)

Enc

Your Ref $: FBK \ 179L$

Our Ref : JP/DS/22/SCV 5557B/SHLS

Date

Acknowledgement

Thi	s is to confirm that I		-
	[Su	ırveyor's Company	// have completed as follows:-
(a)	Pre- Repair Survey/Inspection on	[Date] at	[Time].
	Name and signature of Appointed Surveyor Company Stamp	Witnessed by: Date:	
(b)	Pre- Repair Survey/Inspection (during disman	tling) on	[Date] at[Time].
	Name and signature of Appointed Surveyor Company Stamp	Witnessed by: Date:	
(c)	Re-inspection of new replacement part (part b	y part) on [[Date] at[Time].
	Name and signature of Appointed Surveyor Company Stamp	Witnessed by: Date:	
(d)	Post – Repair Survey/Inspection on	[Date] at	[Time].
	Name and signature of Appointed Surveyor Company Stamp	Witnessed by: Date:	