

MOTOR SURVEY ASSIGNMENT

Date 27/07/2022 **Our Ref No.** D22002283MFCV

Accident Date 26-07-2022 Claim Type Third Party

Insured Vehicle GBD4333T Third Party Vehicle SKG9992K

Survey Location HD PERFECT AUTOWORK PTE Contact Person SHANELLE LIM

LTD

8 KAKI BUKIT AVE 4 #08-09 PREMIER @ KAKI BUKIT(S)

415875

Contact No. 82979787 **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.

EMAIL

Cc: Workshop HD PERFECT AUTOWORK PTE LTD Attention SHANELLE LIM

Officer Incharge ESTHER

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.

This is a computer generated letter, no signature required.