

**MOTOR SURVEY ASSIGNMENT** 

**Date** 02/11/2022 **Our Ref No.** D22003437MFBP

Accident Date 26-10-2022 Claim Type Third Party

Insured Vehicle SG1818P Third Party Vehicle SLL5486T

Survey Location WEARNES AUTOMOTIVE PTE Contact Person MICHELLE ONG

LTD

BODY AND PAINT DEPT 249 ALEXANDRA ROAD (S) 159103

**Contact No.** 91294556 **Fax No.** 

Survey Type Without Prejudice

Appointed LKK AUTO CONSULTANTS PTE LTD

Surveyor

**Contact Person** 

Contact Number 62563561

## FOR DIRECT SETTLEMENT

Fax No.

68416315

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 & Estimate

Cc: Workshop WEARNES AUTOMOTIVE PTE LTD Attention MICHELLE ONG

Officer Incharge VICALPEH

## **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.