

MOTOR SURVEY ASSIGNMENT

Date 24/03/2023 **Our Ref No.** D23000877MFCV
Accident Date 10-03-2023 **Claim Type** Own Damage
Insured Vehicle GBH5079A **Third Party Vehicle**

Survey Location CYCLE & CARRIAGE
SINGAPORE
330 UBI ROAD 3 (S) 408650 **Contact Person** REN BAGANG
Contact No. 85523293 **Fax No.**

Survey Type Revert for instructions

Appointed Surveyor LKK AUTO CONSULTANTS PTE LTD
Contact Person **Fax No.** 68416315
Contact Number 62563561

**EXCESS APPLICATION FOR OWN DAMAGE CLAIM
ADDITIONAL \$500.00 FOR INSURED VEHICLE INSTALLED WITH CNG TANKER**

Basic	Y/I Driver	Total
\$600	\$0	\$600

Encl. Accident Reports & est

Cc : Workshop CYCLE & CARRIAGE SINGAPORE **Attention** REN BAGANG
Officer Incharge ESTHER

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.