

## **SERVICE REQUEST FORM (SRF)**

Pls. return by FAX / EMAIL

**M/s LKK AUTO CONSULTANTS PTE LTD**

51 Ubi Avenue 1 #01-25  
Paya Ubi Industrial Park  
Singapore 408933  
Tel: 6256 3561 Fax: 6256 4315

Dear Sir/Madam,

**MC/DC Suit No.** : N.A.  
**Vehicle No(s).** : YP 2482 Z  
**Accident Date** : 16 March 2023

We refer to the above matter.

We/I confirmed to appoint your company to conduct **Inspection** as details mentioned above and agreed to pay the professional fees within 60 days upon received of the stated report.

Professional Fees : \$ 702.00 (inclusive of 8% GST)

Company Name : Holman Fenwick Willian (Singapore) LLP

Company Stamp & :  
Authorized Signature

*HFw*



Date : 12.05.2023

.....  
**Witness: (for LKK Auto Consultants Pte Ltd)**

Name: \_\_\_\_\_

Signature: \_\_\_\_\_