WONG CHUN WEI



MOTOR SURVEY ASSIGNMENT

**Contact Person** 

**Date** 23/05/2023 **Our Ref No.** D23001715MFBP

Accident Date 15-05-2023 Claim Type Third Party

Insured Vehicle SMB3024Y Third Party Vehicle SBB110G

**Survey Location** EUROKARS AUTO PTE LTD

27A TANJONG PENJURU (S)

609042

**Contact No.** 63310680 **Fax No.** 

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.

WP

Cc: Workshop EUROKARS AUTO PTE LTD Attention WONG CHUN WEI

Officer Incharge RACHELWU

## **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.