MS KRISTINA



MOTOR SURVEY ASSIGNMENT

**Contact Person** 

**Date** 27/06/2023 **Our Ref No.** D23002212MFBP

Accident Date 22-06-2023 Claim Type Third Party

Insured Vehicle SMB230M Third Party Vehicle SNK2549Y

Survey Location SG AUTO PTE LTD

NO 10 KAKI BUKIT ROAD 2 #01-

18 FIRST EAST CENTRE

S(417868)

**Contact No.** 68484844 **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.

SURVEY REQUEST

Cc: Workshop SG AUTO PTE LTD Attention MS KRISTINA

Cc: TP Solicitor VICALPEH

Officer Incharge

## **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.