

MOTOR SURVEY ASSIGNMENT

Date 13/07/2023 **Our Ref No.** D23002460MFCV

Accident Date 12-07-2023 Claim Type Third Party

Insured Vehicle GBC9411Z Third Party Vehicle GBF3893P

Survey Location RYDER AUTO WORKSHOP LLP Contact Person ORSON

2 KAKI BUKIT AVENUE 2 #02-

19/22/28 SINGAPORE 417921

Contact No. 90908277 **Fax No.** 0

Survey Type Without Prejudice

Appointed LKK AUTO CONSULTANTS PTE LTD

Surveyor

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.

Encl. Accident Reports

Cc: Workshop RYDER AUTO WORKSHOP LLP Attention ORSON

Officer Incharge ESTHER

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.