

MOTOR SURVEY ASSIGNMENT

Date	31/07/2023	Our Ref No.	D23002715MFBP
Accident Date	30-07-2023	Claim Type	Third Party
Insured Vehicle	SMB7S	Third Party Vehicle	SNL836B
Survey Location	KY AUTO PTE. LTD. 25 KAKI BUKIT ROAD 4 #05-23 SYNERGY@KB (S) 417800	Contact Person	Isabella
Contact No.	98073304	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	KY AUTO PTE. LTD.	Attention	Isabella
Officer Incharge	VICALPEH		

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.