MS FirstCapital
A Member of MS&AD INSURANCE GROUP

MS First Capital Insurance Limited
www.msfirstcapital.com.sg
(UEN 195000106C GST Reg. No. M2-0001676-9)

## MOTOR SURVEY ASSIGNMENT

| | | | |
|---|---|---|---|
| **Date** | 31/12/2024 | **Our Ref No.** | D25000116MFCT |
| **Accident Date** | 28-12-2024 | **Claim Type** | Third Party |
| **Insured Vehicle** | SHC1727U | **Third Party Vehicle** | SHD2384M |
| **Survey Location** | PRIME AUTO CLAIMS SERVICE PTE. LTD.<br>NO. 6 BENOI PLACE (S) 629927 | **Contact Person** | MAY LIM |
| **Contact No.** | 62680209 | **Fax No.** | 65152948 |

**Survey Type** Without Prejudice - No Estimate, no video

| | | | |
|---|---|---|---|
| **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.**

Encl. Accident Reports

| | | | |
|---|---|---|---|
| **Cc : Workshop** | PRIME AUTO CLAIMS SERVICE PTE. LTD. | **Attention** | MAY LIM |
| **Officer Incharge** | JASONTEA | | |

**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.**