

CS/FCU7002917/ b

Surveyor

ASSIGNMENT (Office)

From (Person): CWS Joanne Yong of FCL Date/Time: 13.02.2017 937am

Estimated Cost: Bill to:

OD / TP / WS / TP RES / OD RES / EVA / INV / MY / CS

To Inspect Vehicle No: 9KQ 3626E Insured: SHC 377K

at Workshop m/s: Wearnes Automotive Tel: 81261237

of 45 Long Kee Road

Policy No: Claim No: D16072462 MFSH

Sum Insured: Excess:

Make of Veh: D.O.A. 10.12.2016  
(Client's Record)

CA / REV / REP. / REV 24 HRS WPI H.O.D. Endorsement:

Date/Time: 13.02.2017 10:37am Person Contacted: Ray Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	9KQ 3626E - X
	SHC 377K - (C3) / 11/11/16 028737 / Hubs D.O.A. 10/12/16
16/02/17 5:09pm	Paul say pending liability
30/12/17 2:07pm	email to FCL temporary close Acc.
	10/7/18

## Catherine Chong (LKK Auto)

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**From:** Catherine Chong (LKK Auto) <admin-d@lkkauto.com>  
**Sent:** Saturday, 30 December, 2017 2:07 PM  
**To:** 'Claim Workflow System'; ASSIGNMENTS@LKKAUTO.COM  
**Cc:** JOANNEYONG@FIRST-INSURANCE.COM.SG  
**Subject:** RE: SURVEY ASSESSMENT - D16012462MFSH/1

Dear Sir / Madam,

Please be informed that we are unable to conduct the inspection after some attempts to inform the workshop to present the vehicle.

This case has been pending for a long time due to the unavailability of the owner, therefore we decided to temporarily close this case.

Kindly advise us if there is any arrangement made and will be glad to re-open the case accordingly.

*"Wishes you a Happy New Year 2018"*

Best Regards,

**Catherine Chong** | Admin

**LKK Auto Consultants Pte Ltd**

Phone: 6741-8434 | email: [assignments@lkkauto.com](mailto:assignments@lkkauto.com) | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

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**From:** Catherine Chong (LKK Auto) [mailto:admin-d@lkkauto.com]  
**Sent:** Monday, 13 February, 2017 10:33 AM  
**To:** 'Claim Workflow System' <cwsmotorclaims@first-insurance.com.sg>; 'ASSIGNMENTS@LKKAUTO.COM' <ASSIGNMENTS@LKKAUTO.COM>  
**Cc:** 'JOANNEYONG@FIRST-INSURANCE.COM.SG' <JOANNEYONG@FIRST-INSURANCE.COM.SG>; 'sur@lkkauto.com' <sur@lkkauto.com>  
**Subject:** RE: SURVEY ASSESSMENT - D16012462MFSH/1

Dear Sir / Madam,

Thank you for the assignment.

Please be informed that vehicle currently not in the workshop, repairer will arrange.

*"Wishing you a Happiness and Prosperity New Year"*

Best Regards,

**Catherine Chong** | Admin

**LKK Auto Consultants Pte Ltd**

Phone: 6741-8434 | email: [assignments@lkkauto.com](mailto:assignments@lkkauto.com) | fax: 6256-4315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

# First Capital Insurance Limited

A FAIRFAX Company

Company Reg. No. 195000108C  
GST Reg. No. M2-0001676-9

## MOTOR SURVEY ASSIGNMENT

Date	13-12-2016	Our Ref No. D16012462MFSH
Accident Date	10-12-2016	Claim Type. Third Party
Insured Vehicle	SHC3717K	Third Party Vehicle. SKQ3626E
Survey Location	45 LENG KEE ROAD	
Contact Person.	WONG YIT LOONG	
Contact No.	64731488/ 81261237	Fax No. 64791067
Survey Type	WITHOUT PREJUDICE:	
Appointed Surveyor	LKK AUTO CONSULTANTS PTE LTD	
Contact Person	NA	Fax No. 68416315
Contact Number.	NA	

## 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.

## THIRD PARTY SURVEY REQUEST

Cc : Workshop	WEARNES AUTOMOTIVE PTE LTD	Attention. NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No. NA
Officer Incharge	JOANNEY	

## IMPORTANT NOTE

Kindly submit the survey report via CWS within 14 days for survey assignment and 7 days for re-inspection.  
This is a computer generated letter, no signature required.

Job Sheet (/ClaimWS/Surveyor/JobSheet/8079)



PRI Documents



Close X

## PRI Header Details

Claim No	D16012462MFSH	Policy No	D-15072701MFSH	Claimant S.No & Name	1 & WE LTD
Workshop Name	WEARNES AUTOMOTIVE PTE LTD (Contact Person : WONG YIT LOONG )	Survey Location & Contact Details	45 LENG KEE ROAD Mobile: 81261237 , Phone: 64731488 , Fax: EmailId: YITLOONG.WONG@WEARNES.COM		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE:		
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SHC3717K	TP Vehicle No	SKQ36
PRI Recieved Date	10-02-2017 09:23:12 PM	Surveyor Appointed Date	13-02-2017 09:37:54 AM	Surveyor Accept Date	13-02-

## Survey Report Upload

Surveyor Inspection Date *	<input type="text"/>	Surveyor Report Date	13-02-2017	Upload Survey Report *	<input type="text"/>
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## Vehicle Particulars

Make	<input type="text" value="Please Select Make"/>	Model	<input type="text" value="Please Select Model"/>	Year	<input type="text" value="Select"/>
Chasis No	<input type="text"/>	Engine No	<input type="text"/>	Mileage	<input type="text"/>
Color	<input type="text"/>	Cubic Capacity	<input type="text"/>		

## Multiple Documents Upload

<input type="button" value="Upload Multiple Documents"/>	
File Name	Action

## Surveyor Job Remarks