

ASS REC BY:

REF: CS/7CL17016659/ b

Special Instruction:

Survivor:

ASSIGNMENT (Office)

From (Person): OWB Eileen Lee of FCLDate/Time: 28082017 219pm

Estimated Cost: _____ Bill to: _____

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

To Inspect Vehicle No:

SJZ 405Z

Insured:

SHA 442SZ

at Workshop m/s

K-K Win Auto

Tel:

6452 7018

of

160 Sin Ming Dr 402-20

Policy No:

Claim No:

D17007522MT64

Sum Insured:

Excess:

Make of Veh:

D.O.A

28072017

(Client's Record)

CA / REV / REP. / REV 24 HRS 'wp'

H.O.D. Endorsement:

Date/Time:

28082017 2145pm

Person Contacted:

Shuman

Vehicle IN / OUT

Date/Time

Action/Instruction (✓) Estimate

SN 405Z-XCHA 442SZ - NS/INC12021078 / H/ignDOT: 29-10-12120518 356pmEmail to FCL will temporary close file6/8

Catherine Chong (LKK Auto)

From: Catherine Chong (LKK Auto) <admin-d@lkkauto.com>
Sent: Saturday, 12 May, 2018 3:51 PM
To: 'Claim Workflow System'; ASSIGNMENTS@LKKAUTO.COM
Cc: EileenLee@first-insurance.com.sg
Subject: RE: Request of Survey report-your ref no: SJN405Z/ our Ref: D17007522MFSH;accident involving SHA4428Z and SJN405Z on 28-07-2017

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.

Best Regards,

Catherine Chong | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315

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

From: Catherine Chong (LKK Auto) [mailto:admin-d@lkkauto.com]
Sent: Wednesday, 27 December, 2017 2:52 PM
To: 'Claim Workflow System' <cwsmotorclaims@first-insurance.com.sg>; ASSIGNMENTS@LKKAUTO.COM
Cc: EileenLee@first-insurance.com.sg
Subject: RE: Request of Survey report-your ref no: SJN405Z/ our Ref: D17007522MFSH;accident involving SHA4428Z and SJN405Z on 28-07-2017

Dear Sir / Madam,

Thank you for your email.

Please be informed that no survey done for this vehicle.

"Wishes you a Happy New Year 2018"

Best Regards,

Catherine Chong | Admin

LKK Auto Consultants Pte Ltd

Phone: 6741-8434 | email: assignments@lkkauto.com | fax: 6256-4315

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

From: Claim Workflow System [mailto:cwsmotorclaims@first-insurance.com.sg]
Sent: Tuesday, 26 December, 2017 4:14 PM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: EileenLee@first-insurance.com.sg; cwsmotorclaims@first-insurance.com.sg
Subject: FW: Request of Survey report-your ref no: SJN405Z/ our Ref: D17007522MFSH;accident involving SHA4428Z and SJN405Z on 28-07-2017

First Capital Insurance Limited

A FAIRFAX Company

Company Reg. No. 195000106C
GST Reg. No. M2-0001676-9

MOTOR SURVEY ASSIGNMENT

Date	01-08-2017	Our Ref No.	D17007522MFSH
Accident Date	28-07-2017	Claim Type.	Third Party
Insured Vehicle	SHA4428Z	Third Party Vehicle.	SJN405Z
Survey Location	160 Sin Ming Drive #02-20SIN MING AUTOCITY		
Contact Person.	SANDRA		
Contact No.	64527018/ 96222116	Fax No.	64583895
Survey Type	WITHOUT PREJUDICE: LIABILITY UNCLEAR:		
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	K. KIM HIN AUTO PTE LTD	Attention.	NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No.	NA
Officer Incharge	EILEEN LEE		

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/226463)



PRI Documents



Close



PRI Header Details

Claim No	D17007522MFSH	Policy No	D-15072701MFSH	Claimant S.No & Name	1 & K.K
Workshop Name	K. KIM HIN AUTO PTE LTD (Contact Person : SANDRA)	Survey Location & Contact Details	160 Sin Ming Drive #02-20SIN MING AUTOCIT Mobile: 96222116 , Phone: 64527018 , Fax: EmailId: SERVICE@KKIMHIN.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE: LIABILITY UNCLEAR:		
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SHA4428Z	TP Vehicle No	SJN405
PRI Recieved Date	25-08-2017 08:59:41 PM	Surveyor Appointed Date	28-08-2017 02:20:02 PM	Surveyor Accept Date	28-08-

Survey Report Upload

Surveyor Inspection Date *:		Surveyor Report Date	28-08-2017	Upload Survey Report *:	
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Vehicle Particulars

Make	Please Select Make	Model	Please Select Model	Year	Select
Chasis No		Engine No		Mileage	
Color		Cubic Capacity			

Multiple Documents Upload

File Name

Action

Surveyor Job Remarks