

11/13/2018

ASS. REC. BY:

REF: CS/FCL18000269 / b

Special Instruction:

Surgeon:

ASSIGNMENT (Office)

From (Person): CWS Joanne Yang of FCL Date/Time: 04/01/2018 2:12pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SLG 1198T Insured: SHC 1977P

nt Workshop m/s: Esteem Performance Tel: 6753 2112

of

Policy No: Claim No: D17 011615MESH

Sum Insured: Excess:

Make of Veh: D.O.A 15-12-2017
(Client's Record)

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

H.O.D. Endorsement:

Date/Time: 04/01/2018 2:49pm Person Contacted: Carmen

Vehicle-IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SLG 1198T - X
	SHC 1977P - CS / FCL18000269 / R1613m2 D.O.A: 11-12-16
11/11/18 @ 12:05pm	Email to FCL temporary close this file

Catherine Chong (LKK Auto)

From: Admin-D (LKKAuto) <admin-d@lkkauto.com>
Sent: Saturday, 24 November, 2018 12:09 PM
To: 'Claim Workflow System'
Cc: JOANNEYONG@FIRST-INSURANCE.COM.SG; assignments
Subject: RE: SURVEY ASSESSMENT - D17011615MFSH/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.

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: Thursday, 4 January, 2018 2:51 PM
To: 'Claim Workflow System' <cwsmotorclaims@first-insurance.com.sg>; ASSIGNMENTS@LKKAUTO.COM
Cc: JOANNEYONG@FIRST-INSURANCE.COM.SG; 'SUR' <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D17011615MFSH/1

Dear Sir / Madam,

Thank you for the assignment.

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

"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: Thursday, 4 January, 2018 2:12 PM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWSMOTORCLAIMS@FIRST-INSURANCE.COM.SG; JOANNEYONG@FIRST-INSURANCE.COM.SG
Subject: PRI: SURVEY ASSESSMENT - D17011615MFSH/1

Dear Sir/Mdm,

First Capital Insurance Limited

A FAIRFAX Company

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

MOTOR SURVEY ASSIGNMENT

Date	18-12-2017	Our Ref No. D17011615MFSH
Accident Date	15-12-2017	Claim Type. Third Party
Insured Vehicle	SHC1977P	Third Party Vehicle. SLG498T
Survey Location	385 SIN MING DRIVE (INSIDE VICOM)	
Contact Person.	CARMEN LIM	
Contact No.	64841221/0	Fax No. 64847829
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	ESTEEM PERFORMANCE 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/232051)  PRI Documents  Close 	
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PRI Header Details

Claim No	D17011615MFSH	Policy No	D-15072701MFSH	Claimant S.No & Name	1 & ES
Workshop Name	ESTEEM PERFORMANCE PTE LTD (Contact Person : CARMEN LIM)	Survey Location & Contact Details	385 SIN MING DRIVE (INSIDE VICOM) Mobile: 0 , Phone: 64841221 , Fax: 6484782 EmailId: CARMEN@ESTEEMPERF.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	Instructions To Surveyor	WITHOUT PREJUDICE:		
Insured Name	COMFORT TRANSPORTATION PTE LTD	Insured Vehicle No	SHC1977P	TP Vehicle No	SLG49I
PRI Recieved Date	04-01-2018 03:03:23 PM	Surveyor Appointed Date	04-01-2018 02:11:56 PM	Surveyor Accept Date	04-01-

Survey Report Upload

Surveyor Inspection Date *:		Surveyor Report Date	04-01-2018	Upload Survey Report *:	
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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