Ref: cs/FCI1800 1595 / d3

ASSIGNMENT (Office)

CWS Aung Yin Ming FCI 25/1/2018 @ 6.13pm

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

To Inspect Vehicle No: SH 1854D Insured: SHC 0735C

at Workshop no: Tan Lim Motor Tel: 6858 5151

of: 51 Defu Lane 10

Policy No: Claim No: D18 000734 MFS17

Item Insured: Event:

Miles of Veh: (Client's Record) D.O.A: 22/01/2018

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

Date/Time: 8.49am @ 26/1/18 Person Contacted: Caymen Vehicle IN / OUT

Date/Time	Action/Instruction (✓) Estimate
	SH 1854D-NA / FCI/1023693/w1 D.O.A: 17/11/2011
	SHC 0735C-X
13/8/18 -	called caymen she said only reporting not claiming against FCI Called 6/9/18

Nivitha (LKK Auto)

From: Nivitha (LKK Auto) <admin-d@lkkauto.com>
Sent: Wednesday, 15 August 2018 11:52 AM
To: 'Claim Workflow System'; ASSIGNMENTS@LKKAUTO.COM
Cc: AUNGYINMIN@MSFIRSTCAPITAL.COM.SG; 'SUR'
Subject: RE: SURVEY ASSESSMENT - D18000739MFSH/1

Dear Sir/Mdm,

Please be informed According to the repairer, TP owner change to reporting only.

We will close this file at our end without billing.

BEST REGARDS,
G.Nivitha | Admin
LKK Auto Consultants Pte Ltd
Phone: 6841-1972 | email: assignments@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Nivitha (LKK Auto) [mailto:admin-d@lkkauto.com]
Sent: Friday, 26 January 2018 8:52 AM
To: 'Claim Workflow System' <cwsmotorclaims@msfirstcapital.com.sg>; ASSIGNMENTS@LKKAUTO.COM
Cc: AUNGYINMIN@MSFIRSTCAPITAL.COM.SG; 'SUR' <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D18000739MFSH/1

Dear Sir/Mdm,

Thank you for the assignment.

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

BEST REGARDS,
G.Nivitha | Admin
LKK Auto Consultants Pte Ltd
Phone: 6841-1972 | 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@msfirstcapital.com.sg]
Sent: Thursday, 25 January 2018 6:13 PM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG; AUNGYINMIN@MSFIRSTCAPITAL.COM.SG
Subject: PRI: SURVEY ASSESSMENT - D18000739MFSH/1

Dear Sir/Mdm,

We refer to the above reference.
Please find attached the necessary documents for survey.
Kindly submit your report via CWS within the next 14 days.

Best Regards,
Admin Team
Claim Workflow System

First Capital Insurance Limited

A FAIRFAX Company

Company Reg. No. 195000106C
GST Reg. No. M2-0001675-9

MOTOR SURVEY ASSIGNMENT

Date	23-01-2018	**Our Ref No.**	D18000739MFSH
Accident Date	22-01-2018	**Claim Type.**	Third Party
Insured Vehicle	SHC0735C	**Third Party Vehicle.**	SH1854D
Survey Location	51 DEFU LANE 10		
Contact Person.	LAM WEI SHONG WILLIAM		
Contact No.	68585151/ 0	**Fax No.**	68580877
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	TAN LIM MOTOR PTE LTD	**Attention.**	NIL
Cc : TP Solicitor	NA	**TP Solicitor Fax No.**	NA
Officer Incharge	AUNGYM		

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/234243) PRI Documents Close

PRI Header Details

Claim No	D18000739MFSH	**Policy No**	D-18088937MFSH	**Claimant S.No & Name**	1 & TAN LIM M
Workshop Name	TAN LIM MOTOR PTE LTD (Contact Person : LAM WEI SHONG WILLIAM)	**Survey Location & Contact Details**	51 DEFU LANE 10 **Mobile:** 0 , **Phone:** 68585151 , **Fax:** 68580877 **EmailId:** WEI.SHONG@TLMOTOR.COM.SG		
Our Surveyor	LKK AUTO CONSULTANTS PTE LTD	**Instructions To Surveyor**	WITHOUT PREJUDICE:		
Insured Name	CITYCAB PTE LTD	**Insured Vehicle No**	SHC0735C	**TP Vehicle No**	SH1854D
PRI Recieved Date	23-01-2018 09:48:06 PM	**Surveyor Appointed Date**	25-01-2018 06:12:26 PM	**Surveyor Accept Date**	26-01-2018 1

Survey Report Upload

Surveyor Inspection Date *:		**Surveyor Report Date**	26-01-2018	**Upload Survey Report *:**	Choose File

Vehicle Particulars

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

Multiple Documents Upload

Upload Multiple Documents

File Name **Action**

Surveyor Job Remarks

Remarks		Save