

ASS. REC. BY:

REF: CS/FCI/18017844/ d3

Special Instruction:

Surveyor:

CWS

Karen Tan

ASSIGNMENT (Office)

From (Person):

of

FCI

Date/Time: 2/10/18 @ 3:44pm

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SJS 9492K

Insured:

SH 9557J

at Workshop in/s

8ME Motor

Tel:

6747-6106

of

1 Kaki Blt Ave 6 #02-15

Policy No:

Claim No:

D18007166MFSH

Sum Insured:

Excess:

Make of Veh:

(Client's Record)

D.O.A

27/09/18

CA / REV / REP. / REV 24 HRS

up

H.O.D. Endorsement

Date/Time:

5:32pm @ 2/10/18

Person Contacted:

Pui Ying

Vehicle IN/OUT

Date/Time

Action/Instruction (✓) Estimate

SJS 9492K - X

SH 9557J - CC31AIG/16022947/Mob 352

DOA: 29/11/18

3/10/18

VNI RT

9/10/18

VNI

2/11/18

vehicle not in

>: Reverted through email. Ceter 15/11/18

15/11/18

owner change to OD claim.

### MOTOR SURVEY ASSIGNMENT

|                    |                                                               |                               |
|--------------------|---------------------------------------------------------------|-------------------------------|
| Date               | 01-10-2018                                                    | Our Ref No. D18007166MFSH     |
| Accident Date      | 27-09-2018                                                    | Claim Type: Third Party       |
| Insured Vehicle    | SH9557J                                                       | Third Party Vehicle: SJS9492K |
| Survey Location    | 1 KAKI BUKIT AVE 6 BLK D #02-15/16/17/18 AUTOBAY @ KAKI BUKIT |                               |
| Contact Person.    | PEIYING                                                       |                               |
| Contact No.        | 67476106/ 0                                                   | Fax No. 67442368              |
| 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     | SME MOTOR PTE LTD | Attention: NIL          |
| Cc : TP Solicitor | NA                | TP Solicitor Fax No. NA |
| Officer Incharge  | KARENT            |                         |

### 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.

## Nivitha (LKK Auto)

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**From:** Nivitha (LKK Auto) <admin-d@lkkauto.com>  
**Sent:** Thursday, 15 November 2018 3:00 PM  
**To:** 'Claim Workflow System'; 'ASSIGNMENTS@LKKAUTO.COM'  
**Cc:** 'KARENTAN@MSFIRSTCAPITAL.COM.SG'; 'SUR'  
**Subject:** RE: SURVEY ASSESSMENT - D18007166MFSH/1

Dear Sir/Mdm,

Please be informed that according to the repairer, TP owner already reverted to OD claim.

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](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:** Nivitha (LKK Auto) [mailto:admin-d@lkkauto.com]  
**Sent:** Tuesday, 2 October 2018 5:35 PM  
**To:** 'Claim Workflow System' <cwsmotorclaims@msfirstcapital.com.sg>; ASSIGNMENTS@LKKAUTO.COM  
**Cc:** KARENTAN@MSFIRSTCAPITAL.COM.SG; 'SUR' <sur@lkkauto.com>  
**Subject:** RE: SURVEY ASSESSMENT - D18007166MFSH/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](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:** Claim Workflow System [mailto:cwsmotorclaims@msfirstcapital.com.sg]  
**Sent:** Tuesday, 2 October 2018 3:43 PM  
**To:** [ASSIGNMENTS@LKKAUTO.COM](mailto:ASSIGNMENTS@LKKAUTO.COM)  
**Cc:** [CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG](mailto:CWSMOTORCLAIMS@MSFIRSTCAPITAL.COM.SG); [KARENTAN@MSFIRSTCAPITAL.COM.SG](mailto:KARENTAN@MSFIRSTCAPITAL.COM.SG)  
**Subject:** PRI: SURVEY ASSESSMENT - D18007166MFSH/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.

**Note:** All the accident reports are uploaded into CWS for your perusal.

Best Regards,  
Admin Team  
Claim Workflow System  
Motor Claims Department  
MS First Capital Insurance Limited  
Tel : 6507 3848  
Fax : 6507 3849

**PS: This is a system generated mail. Please do not reply to this mail.**



**AVG**

This email has been checked for viruses by AVG antivirus software.  
[www.avg.com](http://www.avg.com)