

SAF Vey/OA

ASSIGNMENT (Office)

CWS

From (Person):

Suzanne for

of

FCI

Date/Time:

9:47am @ 8/4/19

Estimated Cost:

Bill by:

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

To inspect Vehicle No:

SJE 8928B

Insured:

SH 6979U

at Workshop no:

Performance

Tel:

63190174

of

303 Alexandria Road

Policy No:

Claim No:

D19002235MFSH

Sum Insured:

Excess:

Make of Vch:
(Client's Record)

D.O.A.

20/03/2019

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

10:13am @ 3/4/19

Person Contacted:

Caroline

Vehicle (IN) OUT

Date/Time

Action/Instruction

(✓)

Estimate

SJE 8928B - X

SH 6979U - X

29/4/19 -

Received email from Suzanne (FCI) TP owner consent for OD claim, we may proceed to close file.

30/4/19 -

Reverted through email. Caroline 2/5/19

MOTOR SURVEY ASSIGNMENT

Date	02-04-2019	Our Ref No.	D19002235MFSH
Accident Date	20-03-2019	Claim Type.	Third Party
Insured Vehicle	SH6979U	Third Party Vehicle.	SJE8928B
Survey Location	303 ALEXANDRA ROAD SIME DARBY PERFORMANCE CENTRE		
Contact Person.	CAROLINE		
Contact No.	63190174/ 0	Fax No.	64794601
Survey Type	WITHOUT PREJUDICE: LIABILITY UNCLEAR (TP SAS STATED OD CLAIM ? / EST. COR \$6,746.02)		
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	PERFORMANCE MOTORS LIMITED	Attention.	NIL
Cc : TP Solicitor	NA	TP Solicitor Fax No.	NA
Officer Incharge	SERENE		

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)

From: Admin-D (LKKAuto) <admin-d@lkkauto.com>
Sent: Tuesday, 30 April 2019 4:26 PM
To: 'Serene Ler'; assignments; 'CWS Motor Claims'
Cc: SUR
Subject: RE: TP revert to OD claim - SURVEYOR APPOINTED; OUR REF : D19002235MFSH ; YOUR REF: SJE8928B

Dear Serene,

Please be informed that no survey was done for SJE 8928B.

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: Serene Ler [mailto:SereneLer@msfirstcapital.com.sg]
Sent: Monday, 29 April 2019 4:46 PM
To: LKK Auto Appraisers (assignments@lkkauto.com) <assignments@lkkauto.com>; CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>
Subject: RE: TP revert to OD claim - SURVEYOR APPOINTED; OUR REF : D19002235MFSH ; YOUR REF: SJE8928B

Dear Veron,

Kindly note TP revert to OD claim and we are in receipt of the BOLA Recovery.

Please check and revert. If there is no PRI conducted, then you may proceed to cancel the assignment and close file at your end.

We await your soon reply.

Regards,
Serene Ler
Motor Claims

MS First Capital Insurance Limited

A Member of **MS&AD** Insurance Group

36 Robinson Road, City House, #16-01 | Singapore 068877 | Tel: 6507 3848 | Fax: 6507 3849 | Reg. No. 195000106C

Motor Claims: motor_claims@msfirstcapital.com.sg | Website: www.msfirstcapital.com.sg

*With effect from 15 January 2018, we will be known as **MS First Capital Insurance Limited**. Our new website will be www.msfirstcapital.com.sg.

Personal Data Protection Act 2012 ("PDPA"):

Under the PDPA, there are various requirements that regulate the processing of your personal data. Please refer to www.first-insurance.com.sg for details of PDPA Personal Data Collection Statement.

Confidentiality Notice: This e-mail is confidential. It may also be legally privileged.

If you are not the addressee or to whom it is intended, you may not copy, forward, disclose or use any part of it.

If you have received this message in error, please delete the message and all copies from your system and notify the sender immediately by return e-mail.

From: CWS Motor Claims

Sent: Wednesday, April 3, 2019 9:47 AM

To: PML-PBSP@SIMEDARBY.COM.SG

Cc: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>; Serene Ler <SereneLer@msfirstcapital.com.sg>

Subject: SURVEYOR APPOINTED; OUR REF : D19002235MFSH ; YOUR REF: SJE8928B

Dear Sir/Madam

PRI Request For **SJE8928B** Accident Involving **SH6979U** On 20-03-2019 AT 22:50:00HRS.

Please find below details for your reference

- Claim number : D19002235MFSH
- Insured vehicle number : SH6979U
- Accident date : 20-03-2019
- Third-party vehicle number : SJE8928B
- Assignment type : WITHOUT PREJUDICE: LIABILITY UNCLEAR
- Surveyor : LKK AUTO CONSULTANTS PTE LTD
- Officer-in-Charge : SERENE

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

Regards,

Admin Team

Claim Workflow System

Motor Claims Department

MS First Capital Insurance Limited

Tel : 6507 3848

Fax : 6507 3849



This email has been checked for viruses by AVG antivirus software.

www.avg.com