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.

Surveyor : Adrian

(CWS)

ASSIGNMENT (Office)

From (Person): SIThara of FCI Date/Time: 3.4.19 5.36p.m

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SJE 2148A Insured: SHC 7172E

at Workshop m/s Ace Autolution Tel: 68441184

of 13 Kaki Bukit Road 4 Bartley biz centre #03-29 & # 03-30

Policy No: Claim No: D1900228MFSH

Sum Insured: Excess:

Make of Veh: D.O.A. 01.04.2019
(Client's Record)

CA / REV / REP. / REV 24 HRS "WP"

H.O.D. Endorsement:

Date/Time: 4.4.19 10.40a.m Person Contacted: Anna Vehicle **IN** / **~~OUT~~**

Date/Time	Action/Instruction (✓) Estimate.
	SJE 2148A
	SHC 7172E - CC3/EQ1160150221/41 pa392 DOA - 11/08/2016
5/4/19	Informed FCI pending est from repairer by email
9/7/19	@ 458pm Anna will pass est to Adrian

Adrian

ASSIGNMENT

From: Date:

Estimated Cost:

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

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value:

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SJE2148A · Yr Regn: 2008 / April

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Honda Fit c.c 1339.

Colour White. A/C: Insured / Std / NI / NA

Sp.Reading 195196 T/Radio: Insured / Std / NI / NA

Eng/No:

C/No: GE6105 7884

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi : Nil / S/Rim / STD A/Rim or

Tyre Size: F: 195/55R15

R: 195/55R15.

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front			Rear		
R/Bal.	06	mm	R/Bal.	06	mm
L/Bal.	06	mm	L/Bal.	06	mm
D.O.A.			D.O.I.	04/04/19	

Survey held at Ace Autosolution.

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or

Front N/S.

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	~~TPTH~~ TP FCI COE Expiry: 16/04/23.
	MV : 20K
	PV : 15.6K.
	Nett: 4.4K.

Date/Time, File Pass to?	Date/Time, File Return to?
1)	2)
3)	4)
5)	6)
Preli. Report:	
Final Report:	

Part Prices Check:

IN	OUT

Survey Fee: Date:

Basic & Add.

__ S + RS, __ SI

Photos

Others

TOTAL

MS FirstCapital

MS First Capital Insurance Limited Co.Reg. No. 195000106C GST Reg. No. M2-0001676-9
6 Raffles Quay #21-00 Singapore 048580
Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877
Tel: (65) 6507 3848 Fax: (65) 6507 3849
www.msfirstcapital.com.sg

MOTOR SURVEY ASSIGNMENT

Date	02-04-2019	**Our Ref No.**	D19002218MFSH
Accident Date	01-04-2019	**Claim Type.**	Third Party
Insured Vehicle	SHC7172E	**Third Party Vehicle.**	SJE2148A
Survey Location	13 KAKI BUKIT ROAD 4 BARTLEY BIZ CENTRE#03-29 & #03-30		
Contact Person.	ANNA ✓		
Contact No.	68441184/ 0	**Fax No.**	0
Survey Type	WITHOUT PREJUDICE:		V: in E: ✓
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	ACE AUTOLUTION PTE LTD	**Attention.**	NIL
Cc : TP Solicitor	CHIA S ARUL LLC	**TP Solicitor Fax No.**	NA
Officer Incharge	SITHARA		

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.

Veron Chen (LKKAuto)

From: Veron Chen (LKKAuto)
Sent: Friday, 5 April 2019 10:02 AM
To: 'CWS Motor Claims'
Cc: 'Sithara'; SUR
Subject: RE: SURVEY ASSESSMENT - D19002218MFSH/1, SJE 2148A

Dear Sir/Madam,

Please be informed that we have inspected the vehicle SJE 2148A on 4/4/2018.

We are pending estimate from repairer.

Best Regards,

Veron Chen | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6256-3561 | email :sur@lkkauto.com | fax: 6256-4315

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

From: Admin-D (LKKAuto)
Sent: Thursday, 4 April 2019 10:41 AM
To: 'CWS Motor Claims' <cwsmotorclaims@msfirstcapital.com.sg>; assignments <assignments@lkkauto.com>
Cc: 'Sithara' <Sithara@msfirstcapital.com.sg>; SUR <sur@lkkauto.com>
Subject: RE: SURVEY ASSESSMENT - D19002218MFSH/1

Dear Sir / Mdm,

Thank you for the assignment.

Best Regards,

Summer Lee | 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: CWS Motor Claims [mailto:cwsmotorclaims@msfirstcapital.com.sg]
Sent: Wednesday, 3 April, 2019 5:36 PM
To: ASSIGNMENTS@LKKAUTO.COM
Cc: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>; Sithara <Sithara@msfirstcapital.com.sg>
Subject: PRI: SURVEY ASSESSMENT - D19002218MFSH/1

Dear Sir/Mdm,