ASS. REC. BY:	1 (**)	REF:	C83	PCI 1900	DF389	d3	Special Instruction:	
Surveyor		_	ASS	IGNMEN	T (Onic	e)		
	Sithara		of	FG			Date/Time: 26 4 2019.	
Estimated Cost	:		· · · · · · · · · · · · · · · · · · ·		Bill to:			
OD/TT/WS	TP RES / OD R	ES / EV	AINV	/MV/CS				
To Inspect Vel	nicle No: SLN4	6686				Ir	nsured: SHC 7655D.	
at Workshop m/s Wah Hong.							Tel: 65155988	
of 38: Toh	Guan Rd Eas	A.					97880700-	
Policy No:					·Claim No	o;	DI9001SSGMFSH"	
Sum Insured:					Excess	:		
Make of Veh: (Client's Record)							D.O.A 4 4 2019	
CA / REV / REP. / REV 24 HRS					H.O.D. Endorsement:			
Date/Time:		Pe	rson Co	ntacted:		•	Vehicle IN OUT	
Date/Time	Action/Instruction	() Es	timate				
	SLN 4688 G.							
	SHC FLSSS					. ,		
017 3.16m	Please let us	lengo d	to our	you for t	he above	. nund	Koned case Merina Chip.	
F 4.35m	~ 1 . 0		~~~~	/	,		Powner change to op daim.	
-				A		/	/ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	We will close -	tic Kie.	At OUV	roud with	hour bill	jue 1	(also 18120x	

Celine Fong (LKKAuto)

From:

Admin-D (LKKAuto)

Sent:

Monday, 20 July 2020 4:35 PM

To:

'Merina Chia'; assignments; Admin A; Mei Kwan (LKKAuto); SUR

Subject:

RE: Our Ref: D19002556MFSH (SHC7655D), DOA 04-04-2019

Dear Sir/Mdm,

Please be informed According to the repairer, TP owner change to OD CLAIM.

We will close this file at our end without billing.

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: Merina Chia < Merina Chia @msfirstcapital.com.sg>

Sent: Monday, 20 July, 2020 3:16 PM

To: ASSIGNMENTS@LKKAUTO.COM; admin-a@lkkauto.com; Summer Lee (LKK Auto) <admin-d@lkkauto.com>; Mei

Kwan (LKKAuto) < Meikwan@lkkauto.com>

Subject: Our Ref: D19002556MFSH (SHC7655D), DOA 04-04-2019

Dear All,

Please let us know the survey status for the above mentioned case.

Thank you.

Best Regards, Merina Chia (Ms) Motor Claims Department

MS First Capital Insurance Ltd | 36 Robinson Road, City House #16-01 Singapore 068877 | Tel: 6507 3848 | DID: 6507 3856 | Fax No.: 6507 3849 | Email: merinachia@msfirstcapital.com.sg | Company Regn. No. 195000106C

A Member of MS&AD Insurance Group

As a response to the COVID19 outbreak, we are observing staggered working hours and some of us are on Work From Home arrangement. However, we are actively working to support our clients and partners. We have access to e-mails and will work to respond in a timely manner.

We appreciate your kind understanding. Stay safe.

Personal Data Protection Act 2012 ("PDPA"):

Under the PDPA, there are various requirements that regulate the processing of your personal data. Please refer to http://www.msfirstcapital.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.

Celine Fong (LKKAuto)

From:

CWS Motor Claims < cwsmotorclaims@msfirstcapital.com.sg>

Sent:

Tuesday, 16 April 2019 4:42 PM

To:

assignments

Cc:

CWS Motor Claims; Sithara

Subject:

PRI: SURVEY ASSESSMENT - D19002556MFSH/1

Attachments:

Jobsheet_D19002556MFSH_TPD1.pdf

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.



Claims & Hotor 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

16-04-2019

Our Ref No. D19002556MFSH

Accident Date

04-04-2019

Claim Type. Third Party

Insured Vehicle

SHC7655D

Third Party Vehicle. SLN4668G

Survey Location

38 TOH GUAN ROAD EAST #01-57 ENTERPRISE HUB

Contact Person.

SUNNY TEE

Contact No.

67737377/ 97880700

Fax No. 68966321

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

WAH HONG MOTORS &

CREDIT PTE LTD

Attention, NIL

Cc: TP Solicitor

NA

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.