23/03/2007

ASS. REC. BY: | REF: CS/FC2190 080951 d3 | Special Instructions:

Surveyor

(CWS)

ASSIGNMENT (Office)

From (Person): Joanney of FCI Date/Time: 8.5.19 2.29pm

Estimated Cost: Bill to:

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

To Inspect Vehicle No: SLL 6288S Insured: SHC 3247A

at Workshop m/s: Performance Tel:

of 303 Alexandra Road

Policy No: Claim No: D19002983MFSH

Sum Insured: Excess:

Make of Veh: (Client's Record) D.O.A. 5.5.2019

CA / REV / REP. / REV 24 HRS B.O.D. Endorsement:

Date/Time: 8.5.19 235p.m Person Contacted: Caroline Vehicle IN / (OUT)

Date/Time	Action/Instruction (V) Estimate
	SLL 6288S - x
	SHC 3247A - CS/FC1180125391/A, bw2 D.O.A - 06/07/2018
10/9/19	@ 2.08pm Checked with Caroline, the owner convert to OD claim

Celine 11/9/19

MS FirstCapital

MS First Capital Insurance Limited Co.Reg.No. 199900108C GST Reg.No. M2-0001670-9
6 Raffles Quay #21-00 Singapore 048580
Tel: (65) 6222 2311 Fax: (65) 6222 3542
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	07-05-2019	**Our Ref No.**	D19002983MFSH
Accident Date	05-05-2019	**Claim Type.**	Third Party
Insured Vehicle	SHC3247A	**Third Party Vehicle.**	SLL6288S
Survey Location	303 ALEXANDRA ROAD SIME DARBY PERFORMANCE CENTRE		
Contact Person.	CAROLINE		
Contact No.	63190174/ 0	**Fax No.**	64794601
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	PERFORMANCE MOTORS LIMITED	**Attention.**	NIL
Cc : TP Solicitor	NA	**TP Solicitor Fax No.**	NA
Officer Incharge	JOANNEY		

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.

Celine Fong (LKKAuto)

From: Celine Fong (LKKAuto)
Sent: Wednesday, 11 September 2019 12:39 PM
To: CWS Motor Claims; assignments
Cc: Joanne Yong Lai fong
Subject: RE: PRI: SURVEY ASSESSMENT - D19002983MFSH/1

Dear Sir/Mdm,

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

No survey was done for this case.

We will close this file at our end without billing.

Best Regards,
Celine Fong
LKK Auto Consultants Pte Ltd
phone: 6256-3561 | email: celinefong@lkkauto.com | fax: 6256-4315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>
Sent: Wednesday, 8 May 2019 2:29 PM
To: assignments <assignments@lkkauto.com>
Cc: CWS Motor Claims <cwsmotorclaims@msfirstcapital.com.sg>; Joanne Yong Lai fong <Joanneyong@msfirstcapital.com.sg>
Subject: PRI: SURVEY ASSESSMENT - D19002983MFSH/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.