

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 Our Ref No. D20000561MFSH 22-01-2020

Accident Date 18-01-2020 Claim Type. Third Party

Insured Vehicle Third Party Vehicle. SLE5616Y SHC3819A

Survey Location 19 UBI ROAD 4 **Contact Person.** HAMZAH SA'AD

Contact No. 67038680/96450079 Fax No. 68467483

WITHOUT PREJUDICE: LIABILITY NOT CLEAR, SIDE SWIPE COLLISION **Survey Type**

Appointed

LKK AUTO CONSULTANTS PTE LTD Surveyor

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

AUTOLUTION Attention. NIL Cc: Workshop

INDUSTRIAL PTE LTD

Cc: TP Solicitor TP Solicitor Fax No. NA NA

JASON TEA CHEE KIAT Officer Incharge

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.