

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. D20000931MFSH 11-02-2020

Accident Date 09-02-2020 Claim Type. Third Party

Insured Vehicle Third Party Vehicle. SKX7318G SHC3240T

Survey Location 209 PANDAN GARDENS

Contact Person. DON BONG

Contact No. 65684555/0 Fax No. 65691056

WITHOUT PREJUDICE: WE ADMIT LIABILITY QUANTUM TO BE AGREED: **Survey Type**

Appointed

LKK AUTO CONSULTANTS PTE LTD Surveyor

Contact Person NA **Fax No.** 68416315

NA **Contact Number.**

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

CYCLE & CARRIAGE Attention. NIL Cc: Workshop

AUTOMOTIVE PTE LTD

Cc: TP Solicitor NA TP Solicitor Fax No. NA

Officer Incharge **MAY CHUA**

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.