

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 18-02-2020 **Our Ref No.** D20001075MFSH

Accident Date 17-02-2020 Claim Type. Third Party

Insured Vehicle SH8118A Third Party Vehicle. GBF8904J

Survey Location 38 TOH GUAN ROAD EAST #01-57 ENTERPRISE HUB

Contact Person. VICTOR SENG

Contact No. 67737377/ 87784848 **Fax No.** 68966321

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

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 & Attention. NIL

CREDIT PTE LTD

Cc : TP Solicitor NA TP Solicitor Fax No. NA

Officer Incharge RACHELWU LIMEI

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.