

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 07-07-2020 **Our Ref No.** D20002699MFSH

Accident Date 30-06-2020 Claim Type. Third Party

Insured Vehicle SHA1746A Third Party Vehicle. YP7989X

Survey Location NO 60.JALAN LAM HUAT CARROS CENTRE #02-32

Contact Person. MICHAEL NG

Contact No. 65553300/0 **Fax No.** 68424988

Survey Type WITHOUT PREJUDICE: LIABILITY UNCLEAR

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 THINK ONE AUTOCARE
Attention. NIL

PTE LTD

Cc: TP Solicitor NA TP Solicitor Fax No. NA

Officer Incharge HENG DING CHAO

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.