

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. D20003750MFSH 15-09-2020

**Accident Date** 13-09-2020 Claim Type. Third Party

**Insured Vehicle** Third Party Vehicle. SLG2939A SHC1977P

**Survey Location** NO. 10 ANG MO KIO IND PARK 2A #01-09 AMK AUTOPOINT

**Contact Person. ZILA** 

Contact No. Fax No. 64836170 64831244/0

**DIRECT SETTLEMENT: 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

AH LIM MOTOR Cc: Workshop

Attention. NIL **COMPANY** 

Cc: TP Solicitor TP Solicitor Fax No. NA NA

Officer Incharge **CHRIS LIM** 

## **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.