

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. D20004257MFSH 20-10-2020

Accident Date 19-10-2020 Claim Type. Third Party

Insured Vehicle Third Party Vehicle. SJL600L SHA9484C

Survey Location BLOCK 25 KAKI BUKIT ROAD 4 #08-26 SYNERGY@KB

Contact Person. CHRIS CHAN

Contact No. Fax No. 69664526 92712214/92712214

WITHOUT PREJUDICE: **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

Cc: Workshop KIANG MOTOR Attention. NIL **Cc: TP Solicitor** NA TP Solicitor Fax No. NA

Officer Incharge MERINA CHIA SAN SAN

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.