

**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** 18-12-2020 **Our Ref No.** D20005199MFSH

Accident Date 17-12-2020 Claim Type. Third Party

Insured Vehicle SHC2759X Third Party Vehicle. SMP9017E

Survey Location 6 KUNG CHONG ROAD

Contact Person. KAITLYN CHIO (MS.)

**Contact No.** 64811522/0 **Fax No.** 64811011

Survey Type WITHOUT PREJUDICE: NO ESTIMATE. VERIFY TP DAMAGE

CONSISTENCY.REQUEST FOR TP VIDEO

**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 : WorkshopOPTIMA WERKZ PTE LTDAttention. NILCc : TP SolicitorNATP Solicitor Fax No. NA

Officer Incharge SANGHILAN VIC ALPEH

SUMAGANG

## **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.