

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 26-03-2021 **Our Ref No.** D21000951MCVT

Accident Date 25-03-2021 Claim Type. Third Party

Insured Vehicle XE2242U Third Party Vehicle. SHC5659G

Survey Location NO. 2 ANG MO KIO STREET 63

Contact Person. KEK ZHEWEI

Contact No. 62876666/ 62876666 **Fax No.** 62571330

Survey Type WITHOUT PREJUDICE: ACCIDENT NOT REPORTED:

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

TRANS-CAB AUTO
Cc : Workshop
Attention. NIL

SERVICES 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.