

**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

Fax No. 68442474

## MOTOR SURVEY ASSIGNMENT

**Date** 31-03-2021 **Our Ref No.** D21001003MFSH

Accident Date 14-12-2020 Claim Type. Third Party

Insured Vehicle SH8340Z Third Party Vehicle. FBJ2573Z

Survey Location 53 UBI AVENUE 1 #01-23 PAYA UBI INDUSTRIAL PARK

Contact Person. DARREN

68445938/68442475/
Contact No.

68442475

Survey Type WITHOUT PREJUDICE: LIABILITY UNCLEAR: TO VERIFY TP DAMAGE

CONSISTENCY

**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 : WorkshopKARZ WORKS PTE LTDAttention. NIL

Cc : TP Solicitor NA TP 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.