

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. D21001330MFVS 27-04-2021

Accident Date 24-04-2021 Claim Type. Third Party

Insured Vehicle Third Party Vehicle. YQ353X XE471M

Survey Location 1 KAKI BUKIT AVENUE 6 #01-01AUTOBAY @ KAKI BUKIT

Contact Person. SUSAN LOW

Contact No. 67411730/67411730 Fax No. 67445746

WITHOUT PREJUDICE: INSURED ACCIDENT NOT REPORTED YET **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

LIU'S BROTHER AUTO

ENGINEERING Attention. NIL Cc: Workshop

WORKSHOP

Cc: TP Solicitor TP Solicitor Fax No. NA NA

SANGHILAN VIC ALPEH Officer Incharge

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.