

**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** 10-09-2021 **Our Ref No.** D21002562MFVS

Accident Date 09-09-2021 Claim Type. Third Party

Insured Vehicle XE4710Y Third Party Vehicle. SKN2120U

Survey Location 13 KAKI BUKIT ROAD 4 #01-20 BARTLEY BIZ CENTRE

WITHOUT PREJUDICE:

Contact Person. KEN/ALEX

Contact No. 96195936/ 96195936/90910000 Fax No. 90910000

**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

Cc : Workshop SPEEDWERKZ PRIVATE Attention. NIL

LIMITED

Cc: TP Solicitor ALP LAW CORPORATION TP Solicitor Fax No. 64381211

Officer Incharge ESTHER

## **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.