

## MOTOR SURVEY ASSIGNMENT

**Date** 22/11/2021 **Our Ref No.** D21003218MFCE

Accident Date 15-11-2021 Claim Type Own Damage

Insured Vehicle FBS4159B Third Party Vehicle

Survey Location BAN HOCK HIN CO PTE LTD Contact Person RAYMOND

NO. 6 DEFU LANE 4 (S) 539410

**Contact No.** 62816520 **Fax No.** 62812830

**Survey Type** Authorise if in order

Appointed Surveyor LKK AUTO CONSULTANTS PTE LTD

Contact Person Fax No. 68416315

Contact Number 62563561

## EXCESS APPLICATION FOR OWN DAMAGE CLAIM ADDITIONAL \$500.00 FOR INSURED VEHICLE INSTALLED WITH CNG TANKER

Basic	Y/I Driver	Total
\$0	\$0	\$0

Encl. Accident Reports & est

Cc: Workshop BAN HOCK HIN CO PTE LTD Attention RAYMOND

Officer Incharge ERICWOO

## **IMPORTANT NOTE**

Kindly submit the survey report by **email only** to <u>surveyor@msfirstcapital.com.sg</u> within 14 days for survey assignment and 7 days for re-inspection.