

NATIONAL Assessment Centre Services. [wef 1 Jan'05] MNA117161863

Date In: 8/12/17-16:41	Job description	Date & Time Completed	Done by
Ref No: NA/INC17023391/24	SAS e-filing		
Veh No: SK 287E	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 7/12/17-17:50	i-Motor Claim Form	M710972906	8/12/17 17:17
OD: TP / Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: WC 4583V	INC () / Non-INC ()
Owner / Driver: (Tel:	
Policy No: ()	Period: ()	Cover Type: ()
Confirmed by: (Date:	Time: ()
Insured/Driver Liability: () %	[Note-Est. Status (WO): N: 0-20%; P: 21-79%; F: 80-100%]	
Year of Registration: ()	Warranty: YES () / NO ()	
Excess: (\$)	Loading: \$1,000 () / \$2,000 ()	

General Remarks:-

() Walk-In Customer : Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case : to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Remarks:- (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury : _____

Date/Time	Actions

NA1707596	Invoice Preparation Checklist	Amt (\$)	Amt (\$)
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);	In Bill	Add Bill
Driver/Owner:	2) DA : Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF : Towing Fee \$40/\$45		
Damaged Portion:	4) FT : Follow-Through Survey \$120		
	5) RT : Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR : Re-inspection \$75		
	7) N1 : Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
QC Checked by (Engr-In-Charge):	QD*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
Auditors' Comments :-	TP (N11) : TP (Non INC) against INC \$20		
Dat 1:	9) N12: Idac Mobile 30		
Dat 2 / 3:	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore(GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	08/12/2017 16:41
Date Of Accident	07/12/2017 17:50
Exact Location Of Accident	CENTRAL BLVD TWDS CROSS ST
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJK2187E
Insured/Policyholder	
Name Of Registered Owner	YES CAR LEASING PTE. LTD
Co Reg No	201426231K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64635155

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS E AUTO
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5072644775-03
Cover Note Number	

Driver

Name of Driver	KOH TECK SOON (XU DESHUN)
NRIC No	S7831332C
Date Of Birth	20/10/1978
Occupation	OUTDOOR
Date Of Driving Pass	30/10/1996
Driving Experience	21 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-83489983
Fax Number	
Contact Number	OFFICE-83489983
Email Address	NOEMAIL

Address	BLK 326A SUMANG WALK #12-996
Postcode	821326
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	YES
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO STATEMENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	WC4583U
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

DETAILS OF INJURED PERSON 1

Name	KOH TECK SOON (XU DESHUN)
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Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

SJK2187E

Were seat belts worn?

YES

Was injured conveyed to hospital by ambulance?

NO

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

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2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



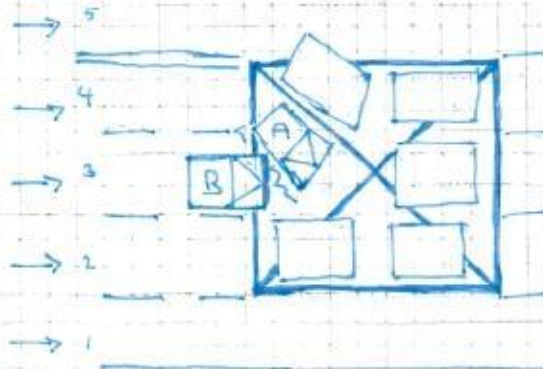
Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

VEHICLE A - SK 2187E
VEHICLE B - WC 4583U



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS DRIVING ALONG CENTRAL BLVD TOWARDS CROSS ST, I WAS ON THE FIFTH LANE.
WHEN I NOTICE ALL THE VEHICLE HAD STOPPED BEFORE THE YELLOW BOX, AND SO I PROCEED INTO THE YELLOW BOX ALONG TOGETHER WITH ANOTHER VEHICLE AND STATIONARY STOPPED INSIDE THE YELLOW BOX TO WAIT FOR THE TRAFFIC LIGHT.

WHEN THE TRAFFIC LIGHT TURN GREEN, BEFORE I START TO MOVE OFF FROM THE STATIONARY POSITION SUDDENLY I FELT A GREAT IMPACT FROM THE RIGHT SIDE OF MY VEHICLE.

ALIGHTED FROM MY VEHICLE AND REALIZED, A VEHICLE BEARING (WC 4583U) HAD COLLIDED TO THE RIGHT SIDE OF MY VEHICLE WHILE I WAS IN STATIONARY POSITION INSIDE OF THE YELLOW BOX.

VEHICLE A - SK 2187E
VEHICLE B - WC 4583U

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

The owner and vehicle particulars for Vehicle No. SJK2187E as at 26 Jul 2016 are as follows:

1.	Name	: YES CAR LEASING PTE LTD
2.	Identification No. Type	: Company
3.	Identification No.	: 201426231K
4.	Place Of Passport Issue	: -
5.	Vehicle No.	: SJK2187E
6.	Previous Vehicle No.	: -
7.	Effective Date of Ownership	: 26 Jul 2016
8.	Original Registration Date	: 13 Oct 2008
9.	First Registration Date	: 13 Oct 2008
10.	Vehicle Type	: Z10 - Private Hire (Chauffeur) Motor Car
11.	Vehicle Scheme	: Normal
12.	Attachment 1	: No Attachment
13.	Attachment 2	: -
14.	Attachment 3	: -
15.	Vehicle Make	: TOYOTA
16.	Vehicle Model	: VIOS E AUTO
17.	Year of Manufacture	: 2008
18.	Primary Colour	: Red
19.	Secondary Colour	: -
20.	Passenger Capacity	: 4
21.	Chassis/Trailer Chassis No.	: MR053HY9305085390 / -
22.	Propellant	: Petrol
23.	Engine No./Motor No.	: 1NZX815938 / -
24.	Engine Capacity(cc)/Power Rating(kW)	: 1497 / -
25.	Maximum Power Output(kW/bhp)	: 80.0 / 107
26.	Unladen Weight(kg)	: 1095
27.	Maximum Laden Weight(kg)	: 1505
28.	Open Market Value	: \$11,834.00
29.	PARF Eligibility	: Yes
30.	PARF Eligibility Expiry Date	: 12 Oct 2018
31.	Minimum PARF Benefit	: \$5,917.00
32.	No. of Transfers	: 2
33.	IU Label No.	: 1122520504
34.	COE No.	: 2008090107001263W
35.	COE Expiry Date	: 12 Oct 2018
36.	COE Category	: E - Open Category
37.	Quota Premium/Prevailing Quota Premium	: \$14,001.00
38.	Actual Quota Premium/PQP Paid	: \$14,001.00
39.	Actual ARF Paid	: \$11,834.00
40.	CO2 Emission(g/km)	: -
41.	Actual CEVS Rebate Utilised	: -
42.	CEVS Surcharge Paid	: -
43.	Actual Green Vehicle Rebate Utilised	: -
44.	Vehicle Lifespan Expiry Date	: -
45.	Nett Road Tax Amount	: -
46.	Road Tax Start Date	: -
47.	Road Tax End Date	: -
48.	Remarks	: COE rebate, if applicable, will be based on the QP of \$13,289.00. This is the lower of QP from Category E and the corresponding Category A in the same tender exercise. To renew the COE, the Prevailing Quota Premium payable is that of Category A.

Vehicle No.	SJK 2187E	Model / Make	TOYOTA MOS
Date of Accident	07/12/17		
Time of Accident	1750	HRS	
Location of Accident	CENTRAL BLVD TOWARDS CROSS ST		
Exact purpose use during accident	WORKING HOUR		
Name of Owner	MES CAR LEASING PTE LTD		
Telephone No.	H/P :	Home :	Office : 6463 5155
NRIC	201426231K		
Address	210 THE CLUB ROAD #812 THE GRANDSTAND CARMALL S(287 995)		
Claim type	OD	THIRD PARTY	REPORTING ONLY
Insurance Company	NTUC		
Type of Coverage	Comprehensive	Third Party	Third Party / Fire / Theft
Policy No.	507 26 44 445 - 03		
Name of Driver	As Above If (No)		
NRIC	S 7831332C	Any Passengers :	
Date of birth	20/10/1978		
Occupation	Outdoor / Indoor		
Driving License Pass Date	30 OCT 1996		
Gender	Male / Female		
Contact No.	H/P : 83489983	Home :	Office :
Address	BLK 326A SUMANH WALK #12-996 S(821326)		
Driver have any own vehicle	No, If yes, Reg No.		
Relationship	Employee, If no, state	RENTAL	
Weather condition	Clear Raining Other		
Road Surface	Dry Wet Other		
Any Injuries	No, If Yes, Who?		
Name And Contact No.	KOH TECK SOON		
Name And Contact No.			
Police Report	No, If Yes, Where?		
Vehicle B No.	WC 4583 LA	Any Passengers :	
Name of Driver		Contact No. :	
Vehicle C No.		Any Passengers :	
Vehicle D No.		Any Passengers :	
Vehicle E no.		Any Passengers :	
Vehicle F No.		Any Passengers :	
Vehicle G No.		Any Passengers :	
Witness Name		Witness Contact :	
Accident Portion	RH SIDE OF VEHICLE.		
Camera Recorder	Yes / No		
Email Address			
PARTICULAR WORKSHOP	N-51 AUTOMOTIVE PTE LTD		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	IAN		
FAX NO	6741 0510		
WORKSHOP Email ADDRESS	SALES@N51.COM.SG		

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7831332C



Name

KOH TECK SOON
(XU DESHUN)

许德顺

Race

CHINESE

Date of birth

20-10-1978

Sex

M

Country/Place of birth

SINGAPORE



S7831332C

REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number S7831332C

Name

KOH TECK SOON
(XU DESHUN)

Birth Date: 20 Oct 1978

Issue Date: 28 Nov 2009

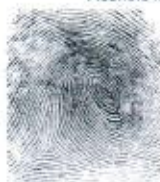


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NRIC No. S7831332C



Date of issue

31-10-2017

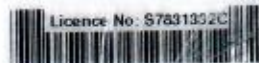
Address

APT BLK 326A SUMANG WALK
#12-996
SINGAPORE 821326

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 30 Oct 1996



Licence No. S7831332C

NF 428

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5072644775-03

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SJK2187E**
 Chassis Number : **MR053HY9305085390**
2. Name of Policyholder : **YES CAR LEASING PTE. LTD.**
3. Effective Date of Insurance : **08 Sep 2017**
4. Expiry Date of Insurance : **07 Sep 2018**
5. Persons or Classes of Persons entitled to drive#
 (a) The Policyholder.
 (b) Any other person who is driving on the Policyholder's order or with his/her permission.
 Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#
 (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
 - (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
 - (c) Use for any purpose in connection with the Motor Trade.
- # Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: SING INVESTMENTS & FINANCE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : LQ INSURANCE AGENCY PTE LTD (00000613125)
 Date of Issue : 05 Sep 2017 18:14 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

LQ INSURANCE AGENCY PTE LTD

18, BEN COOLEN STREET
 #01-01, BEN COOLEN
 SINGAPORE 189648
 TEL: 6-334-0783 FAX: 6-334-0824
 Co. Reg. No: 199005500W

Countersigned By:

Authorised Officer

Chief Executive

eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No. Date of Accident

Vehicle No.(For Motor)

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5072644775-03	YES CAR LEASING PTE. LTD.	201426231K	GFT	drive CLASSIC	SJK2187E	SJK2187E	08/09/2017	

Policy Information

Policy No.	5072644775-03	Policyholder Name	YES CAR LEASING PTE. LTD.	Policyholder NRIC	201426231K
Address	210 TURF CLUB ROAD #LOT-B21 SINGAPORE 287995				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	05/09/2017	Effective Date	08/09/2017 00:00	Expiry Date	07/09/2018 23:59
Third Party Excess	1500.00	Own damage Excess	2000.00	Windscreen Excess	100.00
Additional Excess	0	OS Premium	1475.73		
Outside Singapore OD Excess	2000.00	Outside Singapore TP Excess	1500.00		
Agent	LQ INSURANCE AGENCY PTE LT	Agent Tel.	63340783	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

Policyholder Mailing Address

Address 1	210 TURF CLUB ROAD	Address 2	#LOT-B21	Address 3	SINGAPORE 287995
Address 4		Address Type	Singapore address	Post Code	287995
Unit No.	LOT-B21	Related Policy Number	5072644775-03		

Insured Object: SJK2187E

Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	08/09/2017 00:00	Basic Information Endorsement	000001286648423	Endorsement Take Effective	<p>Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover 1 additional vehicle as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. SJU8913J 08-09-2017 \$964.00 In view of this amendment, an additional premium of \$964.00 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque in favour of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash or NETS.</p> <p>Thank you for giving us the opportunity to serve you. We confirm that the following 1 vehicle have been deleted from this policy: VEHICLE NUMBER CANCELLATION DATE REFUND PREMIUM (INCL GST) 1. SGY4569K 15-09-2017 \$945.51 In view of this amendment, a refund of \$945.51 (inclusive of GST) will be adjusted against the outstanding premium.</p> <p>Thank you for giving us the opportunity to serve you. We</p>
2	15/09/2017 00:00	Basic Information Endorsement	000001286656285	Endorsement Take Effective	<p>Thank you for giving us the opportunity to serve you. We confirm that the following 1 vehicle have been deleted from this policy: VEHICLE NUMBER CANCELLATION DATE REFUND PREMIUM (INCL GST) 1. SGY4569K 15-09-2017 \$945.51 In view of this amendment, a refund of \$945.51 (inclusive of GST) will be adjusted against the outstanding premium.</p> <p>Thank you for giving us the opportunity to serve you. We</p>

Claim Handling

The premium on this policy has not been collected.

Accident MT/0972906

Policy No.	5072644775-03	Vehicle No.	SJK2187E	GST Registration No.	
Policyholder Name	YES CAR LEASING PTE. LTD.	Cover Type	drive CLASSIC	Policyholder NRIC	
Product Code	FLEET INSURANCE	Contact No.(Office)	64635155	Loading	
Contact No.(Mobile)	0	Special Remark		Contact No.(Home)	
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	
KFK	<input type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No				

Report Date

08/12/2017 17:10

Date of Accident

07/12/2017

Reporting Centre

Accident Location

CENTRAL BLVD TWDS CROSS ST

Accident Report Within 24 hrs

Yes

Time of Accident hh:mm

17:50

Orange Force

Accident Type

Collision - Cham

Country of Accident

Singapore

ICM No.

Benefits

Excess

Own damage Excess	2,000.00	Additional Excess	0.00	Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	No
Modification History			

Policyholder Mailing Address

Address 1	210 TURF CLUB ROAD	Address 2	#LOT-B21	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.	LOT-B21	Related Policy Number	5072644775-03		

OJ Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	
Unnamed driver Name	KOH TECK SOON (XU DESHUN)	Driver NRIC	57831332C	Driving Experience	
Register Date of Driver License	30/10/1996	Driver Age	39	Contact No.(Home)	
Contact No.(Mobile)	83489983	Contact No.(Office)	0	Address 3	
Address 1	BLK 326A	Address 2	SUMANG WALK	Post Code	
Address 4		Address Type	Singapore address		
Unit No.	12-996				
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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Modification History

Claim 001

New

Claim Type *	OD-MX	Insured Name	YES CAR LEASING PTE. LTD.	Insured NRIC	
Contact No.(Mobile)		Contact No.(Home)	64635155	Contact No.(Office)	
Email Address		OJ Vehicle Number	SJK2187E	TP Vehicle Number	
Claim Description	SJK2187E / WC4583U ON 7 Dec 2017				Name of Preferred Workshop
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault	GIA report	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	
Date Registered	08/12/2017 17:17	Claim Close Date			
Report Taken By	Jackson				
<input checked="" type="checkbox"/> Print AK letter					

Save Submit

Attachment

Accident No.	MT/0972906	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	08/12/2017 17:19
Path *		Category *	Confidential Urgency

		Please Select	NO	Normal
		Please Select	NO	Normal
		Please Select	NO	Normal
		Please Select	NO	Normal
		Please Select	NO	Normal
		Please Select	NO	Normal

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	De
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Dec 2017 17:19	NRIC/ Driving License	Normal	NRIC/ Driving
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Dec 2017 17:18	SAS	Normal	SAS
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Dec 2017 17:18	Photos	Normal	Photo:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Dec 2017 17:18	Photos	Normal	Photo:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Dec 2017 17:18	Photos	Normal	Photo:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Dec 2017 17:18	Photos	Normal	Photo:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Dec 2017 17:18	Photos	Normal	Photo:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Dec 2017 17:18	Photos	Normal	Photo:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Dec 2017 17:18	Photos	Normal	Photo:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Dec 2017 17:17	Photos	Normal	Photo:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Dec 2017 17:17	Photos	Normal	Photo:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Dec 2017 17:17	Photos	Normal	Photo:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Dec 2017 17:17	Photos	Normal	Photo:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Dec 2017 17:17	Photos	Normal	Photo:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Dec 2017 17:17	Photos	Normal	Photo:

Video List

Uploaded By/Date	Folder Date	File Name	Source
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