

NATIONAL Assessment Centre Services. [wef 1 Jan'05] **MHA118010355**

Date In: 22/1/18 - 11:17	Job description	Date & Time Completed	Done by
Ref No: NA/INC18001322/C24	SAS e-filing		
Veh No: 5G 93390	E-mail (within 5hrs, AIC 2hrs)		
D.O.A : 21/1/18-13:40	i-Motor Claim Form	MT/0978946	22/1/18 19:45
☒ 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: 5M4579J	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

NA1800524	Invoice Preparation Checklist	Am't (\$) Est Bill	Am't (\$) Add Bill
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);		
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):	ON*		
	*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 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	22/01/2018 11:17
Date Of Accident	21/01/2018 13:40
Exact Location Of Accident	JUNC LOR SARINA & SIMS AVE E
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ9339U
Insured/Policyholder	
Name Of Registered Owner	LEONG FOOK SENG
NRIC No	S0166858G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96323438
Alternative Phone No	OFFICE-96323438

Vehicle Particulars

Manufacturer	NISSAN
Model	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5095128658
Cover Note Number	

Driver

Name of Driver	LEONG FOOK SENG
NRIC No	S0166858G
Date Of Birth	03/11/1936
Occupation	INDOOR
Date Of Driving Pass	04/09/1958
Driving Experience	59 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96323438
Fax Number	
Contact Number	OFFICE-96323438
EEmail Address	NOEMAIL

Address	9 JALAN KRIAN
Postcode	419072
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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)	2
Passenger 1	NAME: : -
	GENDER: : MALE

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	SJM4579J
Vehicle Make/Model/Colour	NISSAN SYLPHY
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passengers (Including Driver)	2

SKETCH PLAN

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 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:

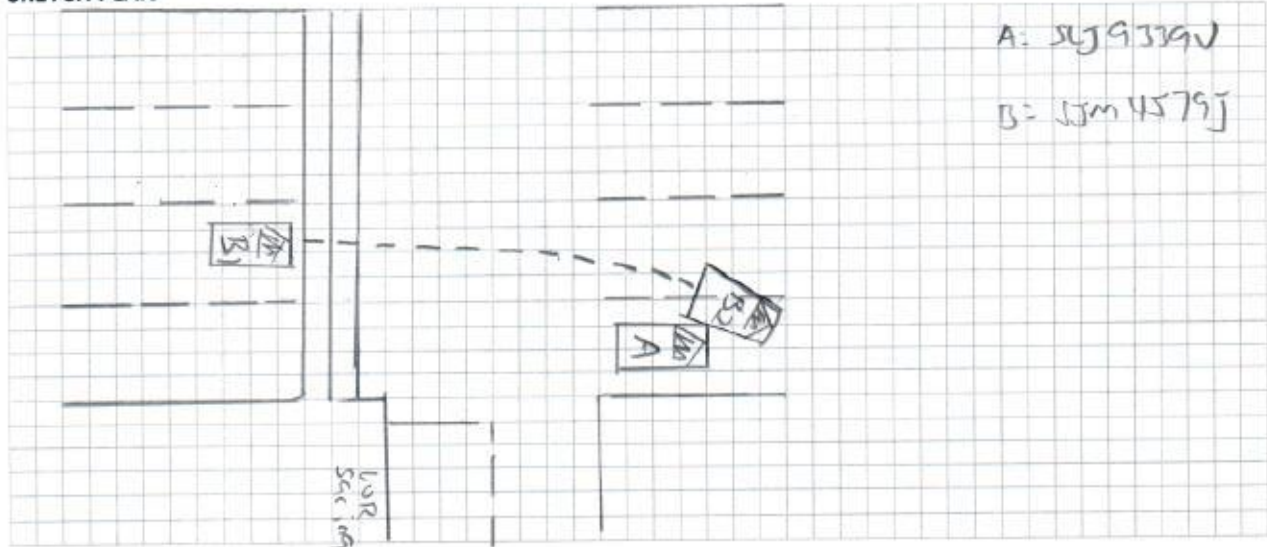
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 21/1/18 13:40 I have turned from Lor Sarim merging
towards Sims Ave E. Suddenly vehicle B travelling ~~from~~ junction Sims
Ave E and cut onto my lane. In a result, vehicle B hit onto
my vehicle front left portion.

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.:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0166858G



Name

LEONG FOOK SENG

梁福胜

Race

CHINESE

Date of Birth

03-11-1936

Sex

M

Country of Birth

JOHORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S0166858G

Name

LEONG FOOK SENG

Birth Date 03 Nov 1936

Issue Date 10 Jul 2003



0359323



NRIC No. S0166858G



Blood Group

B+

Date of issue

27-05-1992

Address

9 JALAN KRIAN
SINGAPORE 1441

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

PASS DATE

Class 2B	Motorcycles not exceeding 200 cc	13 Jul 1967
Class 2A	Motorcycles between 201 cc and 400 cc	13 Jul 1967
Class 2	Motorcycles exceeding 400 cc	13 Jul 1967
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	04 Sep 1958



NP 428A

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
☐	5095128658	LEONG POOK SENG	S0166858G	GPC	drive CLASSIC	SLJ9339U	SLJ9339U	21/11/2017	20/11/2018

 Policy Information

Policy No.	5095128658	Policyholder Name	LEONG FOOK SENG	Policyholder NRIC	S0166858G
Address	9 JALAN KRIAN SINGAPORE 419072				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	16/10/2017	Effective Date	21/11/2017 00:00	Expiry Date	20/11/2018 23:59
Third Party Excess	0	Own damage Excess	600	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	600	Outside Singapore TP Excess	0		
Agent	TELESALES-DIRECT MARKETINC	Agent Tel.		GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

 Policyholder Mailing Address

Address 1	9 JALAN KRIAN	Address 2	SINGAPORE 419072	Address 3	
Address 4		Address Type	Singapore address	Post Code	419072
Unit No.		Related Policy Number	5095128658		

 **Insured Object: SLJ9339U**

 Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
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Claim Handling

[Exit](#)

Accident MT/0978946

Policy No.	5095128658	Vehicle No.	SLJ9339U	GST Registration No.	
Policyholder Name	LEONG POOK SENG			Policyholder NRIC	S0166858G
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	96323438	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	
KPK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	No

Accident Details

Report Date	22/01/2018 19:42	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Change / Cross lane
Date of Accident	21/01/2018	Time of Accident hh:mm	13:40	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	JUNC LOR SARINA & SIMS AVE E				

Benefits

Excess

Own damage Excess	600.00	Additional Excess	0.00	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

GST Registered Information

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

Policyholder Mailing Address

Address 1	9 JALAN KRIAN	Address 2	SINGAPORE 419072	Address 3	
Address 4		Address Type	Singapore address	Post Code	419072
Unit No.		Related Policy Number	5095128658		

DI Driver Info

Driver Name	LEONG POOK SENG	Driver Type	Main Driver	Driver DOB	03/11/1936
Unnamed driver Name		Driver NRIC	S0166858G	Driving Experience	59
Register Date of Driver License	04/09/1958	Driver Age	81	Contact No.(Home)	0
Contact No.(Mobile)	96323438	Contact No.(Office)	0	Address 3	
Address 1	9 JALAN KRIAN	Address 2	SINGAPORE 419072	Post Code	419072
Address 4		Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any Injury?	☐ Yes ☒ No
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Modification History

Claim 001 **New**

Claim Type *	OD-MD	Insured Name	LEONG POOK SENG	Insured NRIC	S0166858G
Contact No.(Mobile)	97265465	Contact No.(Home)	64490945	Contact No.(Office)	NIL
Email Address		DI Vehicle Number	SLJ9339U	TP Vehicle Number	SJM4579J
Claim Description	SLJ9339U / SJM4579J ON 21 Jan 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Income to assign workshop	Date Received	22/01/2018 00:00
Date Registered	22/01/2018 19:45	Claim Close Date			
Report Taken By	Jackson				

☒ Print AK letter

Save **Submit****Attachment**

Accident No.	MT/0978946	Claim No.	001
Last Doc. Received	☒ Yes ☐ No	Upload Date	22/01/2018 19:46

Path *	Category *	Confidential	Urgency *	Description *

☐ Send Message **Upload**

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Meg Sent? Action (CO)
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:46	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-1-22	Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:46	SAS	Normal	SAS 2018-1-22	Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:45	Photos	Normal	Photos 2018-1-22	Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:45	Photos	Normal	Photos 2018-1-22	Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:45	Photos	Normal	Photos 2018-1-22	Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:45	Photos	Normal	Photos 2018-1-22	Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:45	Photos	Normal	Photos 2018-1-22	Edit
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:45	Photos	Normal	Photos 2018-1-22	Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2018 19:45	Photos	Normal	Photos 2018-1-22	Edit

Video List

Display in New Window

Scan and uploading

ASSIGNMENT (IDAC)

By CSO- Nature of Accident:

- 1) Vehicle hit Vehicle: 2) Vehicle hit ??
- a) Motorcar () a) Pedestrian ()
- b) M/cycle () b) Animal ()
- c) Bicycle ()
- 3) Vehicle hit Road Side Objects:
- a) Govm. Property () b) Road Work Object ()
- (Eg: signboard, barrier, tree etc) c) Private Property ()
- 4) Vehicle drop into drain ()
- 5) Damage due to Act of God:
- a) Fallen Object () b) Flood ()
- c) Other, _____
- 6) Parked & Found Damaged:
- a) Vandalism () b) Hit by Moving Object ()
- 7) Theft Case
- a) Stolen () b) Damage found ()
- when recovered.
- 8) Fire
- a) Whilst driving () b) Parked ()
- 9) Accident date more than 24hrs ()

Remarks for internal information

Remarks to appear in Works Order & Assessment report

- 1) Potential Total Loss ()
- 2) SRS Light on ()
- 3) ABS Light on ()

By Assessor- 1) Vehicle Information

Veh No: SLJ 93394 Yr Regn: 21 Nov 2016

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / MPV

/ Truck / Trailer or _____

Make & Model: Nissan Qashqair 1.2 c.c. 1197

Colour: Silver Transmission Type: Auto / Manual

Eng/No: _____ Sp. Reading: 3106

C/No: SJNFEAJ 114 17118063

Gen. Cond: Good / Fair / Poor / Burnt or _____

Steering: Order / Jammed / Leaked / Burnt or _____

Brake: Order / Jammed / Leaked / Burnt or _____

Modi: Nil / S/Rim / STD A/Rim or _____

Tyre Size: F: 215/60R17

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or _____

Front

R/Bal.

L/Bal.

7 mm

7 mm

Rear

R/Bal.

L/Bal.

7 mm

7 mm

Parallel Import: Yes No

Towed-In: Yes / No

Repair Type: LS / I.B.ITowing Required: Yes / NoNo of Repair Days: 5Vehicle in Idac: Yes / NoD.O.I. 23/1/2018Time: 9.05am

By Assessor- 2) Comments

- 1) Damages not due to recent accident.
- 2) Damages do not seem hit onto:
- a. Vehicle () b. Motorcycle () c. Bicycle () d. Pedestrian ()
- e. Animal () f. Govm Object () g. Road Work Object ()
- h. Private Property () i. Drain () j. Road Kerb/Grass Verge ()
- 3) Vehicle does not seem damaged as a result of:
- a. Fallen Object () b. Flood () c. Vandalism () d. Fire ()
- e. Moving Object () f. Stolen () g. Stolen & Recovered ()

Time Started:

Time completed:

1) CSO

2) ASS

3) Entire Operation Completed Time:

MOTOR CAR (Frt)

Front Portion

NAC	INC	Item	CON	AC	Qty
1001	991880	Frt Number Plate			
1002	991887	Frt Number Plate Base			
1003	991889	Frt Number Plate Garnish			
1004	991300	Frt Bumper	BR		
1005	992341	Frt Bumper Clips	NEC	6	
1006	991325	Frt Bumper Bracket LH			
1007	991462	Frt Bumper Side Retainer	DIS	2	
1008	991433	Frt Bumper Reinforcement			
1009	991318	Frt Bumper Beam			
1010	991468	Frt Bumper Sponge	CRA		
1011	991427	Frt Bumper Protector			
1012	991420	Frt Bumper Low Hook Cover	CUT		
1013	991363	Frt Bumper Grille	CRA		
1014	991301	Frt Bumper Moulding			
1015	991407	Frt Bumper Lower Spoiler			
1016	991438	Frt Bumper Sensor			
1017	995100	Frt LH Bumper Fog Lamp Cover	CUT		
1018	991355	Frt RH Bumper Fog Lamp Cover			
1019	995079	Frt LH Bumper Fog Lamp	CRA		
1020	995080	Frt RH Bumper Fog Lamp			
1021	991793	Frt Grille			
1022	991328	Frt Grille Emblem			
1023	991799	Frt Grille Chrome Moulding			
1024	991222	Frt Apron Panel			
1025	992013	Frt Support Panel			
1026	992025	Frt Support Panel Top Garnish Cover			
1027	992416	Horn			
1028	991277	Frt Brace Panel			
1029	995153	Frt LH Headlamp Assy	CUT		
1030	991821	Frt RH Headlamp Assy			
1031	995088	Frt LH Side Lamp			
1032	995089	Frt RH Side Lamp			
1033	990248	Bonnet			
1034	991328	Bonnet Emblem			
1035	990287	Bonnet Lock			
1036	990285	Bonnet Insulator			
1037	990273	Bonnet Hinge			
1038	990261	Bonnet Damper			
1039	990305	Bonnet Rubber			
1040	990252	Bonnet Cable			
1041	990311	Bonnet Stand			
1042	990119	Air Con Condenser			
1043	990122	Air Con Fan Assy			
1044	990134	Air Con Suction Pipe (Low Pressure)			
1045	990118	Air Con Suction Hose			
1046	990133	Air Con Discharge Pipe (High Pressure)			
1047	990114	Air Con Discharge Hose			
1048	990149	Air Con Liquid Pipe			
1049	995066	Air Con Receiver Drier			
1050	990111	Air Con Compressor Assy			
1051	995294	Air Con Belt			
1052	995074	Radiator			
1053	992738	Radiator Cowling			
1054	992742	Radiator Fan Assy			
1055	992745	Radiator Fan Clutch			
1056	992758	Radiator Hose Top			
1057	992757	Radiator Hose Bottom			
1058	992741	Radiator Expansion Tank			
1059	990151	Air Duct			
1060	990070	Air Cleaner Assy			
1061	990056	Air Cleaner Hose			
1062	990089	Air Cleaner Resonator			
1063	991712	Frt Exhaust Manifold			
1064	991713	Frt Exhaust Manifold Cover			
1065	991054	Frt Exhaust Manifold Sensor (Oxygen)			
1066	991714	Front Exhaust Pipe			
1067	990219	Battery			
1068	990224	Battery Cover			
1069	990223	Battery Bracket			
1070	990229	Battery Tray			

Vehicle No: SLJ93394

NAC	INC	Item	CON	AC	Qty
1071	992205	Fuse Box			
1072	994011	Relay Box			
1073	995053	Wiper Washer Tank			
1074	995052	Wiper Washer Tank Motor			
1075	990159	Alternator Assy			
1076	990160	Alternator Belt			
1077	992688	Power Steering Pump			
1078	992669	Power Steering Belt			
1079	994431	Power Steering Cooler Pipe			
1080	992692	Power Steering Hose			
1081	990010	ABS Pump Control Unit			
1082	990427	Brake Master Pump Assy			
1083	990403	Brake Booster Pump Assy			
1084	991005	Engine Top Cover			
1085	991011	Engine Under Cover	DIS		
1086	990946	Engine Mounting			
1087	990949	Engine Mounting Frt			
1088	990950	Engine Mounting LH			
1089	990952	Engine Mounting RH			
1090	990951	Engine Mounting Rear			
1091	992234	Gear Box Mounting			
1092	991520	Frt LH Chassis Member			
1093	991520	Frt RH Chassis Member			
1094	990728	Frt Vertical Cross Member			
1095	991863	Frt Lower Cross Member			
1096	995070	Frt LH Fender	BT R		
1097	995072	Frt LH Fender Inner Panel			
1098	995147	Frt LH Fender Lamp			
1099	995148	Frt LH Fender Protector	DIS		
1100	991740	Frt LH Fender Inner Shield			
1101	995179	Frt LH Mudflap			
1102	995170	Frt LH Wheel Rim			
1103	994025	Frt LH Rim Cover			
1104	995065	Frt LH Tyre			
1105	995071	Frt RH Fender			
1106	991739	Frt RH Fender Inner Panel			
1107	991744	Frt RH Fender Lamp			
1108	991752	Frt RH Fender Protector			
1109	991740	Frt RH Fender Inner Shield			
1110	991884	Frt RH Mudflap			
1111	992087	Frt RH Wheel Rim			
1112	994025	Frt RH Rim Cover			
1113	995065	Frt RH Tyre			
1114	992093	Frt Windscreen Glass			
1115	992117	Frt Windscreen Rubber			
1116	992108	Frt Windscreen Moulding			
1117	992098	Frt Windscreen Sealant			
1118	991019	ERP Bracket			
1119	991020	ERP Unit			
1120	992140	Frt Wiper Arm			
1121	992142	Frt Wiper Blade			
1122	995045	Wiper Panel Garnish			
1123	991126	Firewall Panel			
1124	990753	Dashboard Assy			
1125	992282	Glove Box Cover			
1126	992281	Glove Box Compartment			
1127	994483	Steering Wheel Airbag			
1128	994485	Steering Wheel Airbag Sensor			
1129	990749	Dashboard Airbag			
1130	990750	Dashboard Airbag Sensor			
1131	990029	Airbag Control Unit			
1132	990864	Frt Driver Seat			
1133	991922	Frt RH Seat Belt Assy			
1134	991899	Frt Passenger Seat			
1135	995182	Frt LH Seat Belt Assy			
1136	990247	Sticker			
		Frt LH Door	SCR R		

Claim Handling

[Task Transfer](#) [Exit](#)

Accident MT/0978946

[LOS](#) [SAL](#) [SUB](#)

Policy No.	5095128658	Vehicle No.	SL19339U	GST Registration No.	
Policyholder Name	LEONG FOOK SENG	Cover Type	Drive CLASSIC	Policyholder NRIC	50166858G
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)	0	Loading	0
Contact No.(Mobile)	96323438	Special Remark		Contact No.(Home)	0
Email Address		TCA	☒ No ☐ Yes	eCode	No
KPK	☒ No ☐ Yes	NCD Endorsement(%)	50	eCode Reason	
NCD Protection	Yes			Private Hire	No

Accident Details

Report Date	22/01/2018 19:42	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Change / Cross lane
Date of Accident	21/01/2018	Time of Accident (h:mm)	13:40	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	ICM No.	
Accident Location	JUNG LOR SARJINA & SIMS AVE E				

Benefits

Excess

Own damage Excess	600.00	Additional Excess	0.00	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

GST Registered Information

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

Policyholder Mailing Address

Address 1	9 JALAN KRIAN	Address 2	SINGAPORE 419072	Address 3	
Address 4		Address Type	Singapore address	Post Code	419072
Unit No.		Related Policy Number	5095128658		

OI Driver Info

Driver Name	LEONG FOOK SENG	Driver Type	Main Driver	Driver DOB	03/11/1936
Unnamed driver Name		Driver NRIC	50166858G	Driving Experience	59
Register Date of Driver License	04/09/1958	Driver Age	81	Contact No.(Home)	0
Contact No.(Mobile)	96323438	Contact No.(Office)	0	Address 3	
Address 1	9 JALAN KRIAN	Address 2	SINGAPORE 419072	Post Code	419072
Address 4		Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	☐ Yes ☒ No
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Modification History

Investigation

Claim 001 OD-MD

Claim Case Officer Tan Siew Choo

[LOS](#) [SAL](#) [SUB](#)

Claim Type	OD-MD	Insured Name	LEONG FOOK SENG	Insured NRIC	50166858G
Contact No.(Mobile)	97289485	Contact No.(Home)	64490945	Contact No.(Office)	NIL
Email Address		OI Vehicle Number	SL19339U	TP Vehicle Number	31M4579J
Claim Description	SL19339U / 31M4579J ON 21 Jan 2018	Name of Preferred Workshop			
Preferred Workshop Contact No.		Insured Liability	Not at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Income to assign workshop	Date Received	23/01/2018 10:41
Date Registered	22/01/2018 19:47	Claim Close Date		Total Loss but Repaired	
Report Taken By	Jackson	Workshop Repairer			

☒ Print AK letter

Modification History

Special Claim Creation Approval

Approval	Reason
Remarks	

damage assessment

Attachment

Vehicle Info

Vehicle Make	NISSAN	Vehicle Model	QASHQAI	Engine Capacity	
Date of Registration	21/11/2016	Class No.	SINPEAJ11U1718063	Parallel Import *	☒ Yes ☐ No
Towing Required *	☒ Yes ☐ No	Vehicle in IDAC *	☒ Yes ☐ No	Survey Current Status	
Type of Tender *	Own Damage	Assessor Name *	SIMON		
IDAC/Workshop Name	NATIONAL ASSESSMENT CENTR	IDAC/Workshop Location	51 UBI AVENUE 1 #01-25 PAYA		
Windscreen Parts & Labour Cost		Total Loss *	☐ Yes ☒ No		
Market Value(\$)		Scrape Value(\$)		Economical Repair Value(\$)	

Remark

REMARK:NO OF REPAIR DAY:5 DAYS. 1 X PRT LH FENDER EDGE PROTECTOR - REPLACE.

Damage Listing

Find a Part	No.	Part No.	Description	Qty *	Repair Code *	
root						
Not Applicable	1	1600C101	BUMPER (FRONT)	1	Replace	X
ABS	2	16002401	BUMPER CLIPS (FRONT)	6	Replace	X
ABSORBER	3	16001301	BUMPER BRACKET (FRONT LEFT)	1	Unconfirm	X
ACCELERATOR	4	16005101	BUMPER RETAINER (FRONT LEFT)	1	Replace	X
ACTUATOR	5	16005102	BUMPER RETAINER (FRONT RIGHT)	1	Replace	X
ADVERTISEMENT STICKER	6	16005001	BUMPER REINFORCEMENT (FRONT)	2	Unconfirm	X
AIR BAG	7	16005901	BUMPER SPONGE (FRONT)	1	Replace	X
AIR BLOWER	8	16006701	BUMPER TOWING COVER (FRONT)	1	Replace	X
AIR BOX	9	16003201	BUMPER GRILLE (FRONT)	1	Replace	X
AIR CHAMBER BOX	10	16002901	BUMPER FOG LAMP COVER (FRONT LEFT)	1	Replace	X
AIR CLEANER	11	16002701	BUMPER FOG LAMP (FRONT LEFT)	1	Replace	X
AIR COMPRESSOR	12	27100101	GRILLE (FRONT)	1	Unconfirm	X
AIR CON	13	27100801	GRILLE EMBLEM (FRONT)	1	Unconfirm	X
AIR CON (VAN)	14	27700101	HEAD LAMP (LEFT)	1	Replace	X
AIR COOLER	15	27700102	HEAD LAMP (RIGHT)	1	Unconfirm	X
AIR DISTRIBUTOR	16	112023	AIR CON CONDENSER	1	Unconfirm	X
AIR FILTER	17	11001302	AIR CLEANER HOSE (CENTRE)	1	Unconfirm	X
AIR FLOW	18	25400102	FENDER (FRONT LEFT)	1	Repair	X
AIR GRILLE	19	243014	ENGINE LOWER COVER	1	Replace	X
AIR HORN	20	25400901	FENDER INNER SHIELD (FRONT LEFT)	1	Unconfirm	X
AIR INTAKE	21	25400902	FENDER INNER SHIELD (FRONT RIGHT)	1	Unconfirm	X
AIR RESONATOR BOX	22	23300201	DOOR (FRONT LEFT)	1	Repair	X
AIR THROTTLE BODY AND SENSOR						
ALARM						
ALTERNATOR						
ALUMINUM PANEL - SIDE						
AMPLIFIER						
ANTENNA						
ANTI ROLL						
APRON						
ARCH						
ARM REST						

Save Submit

LKK Paya Ubi

From: Tan Siew Choo <siewchoo.tan@income.com.sg>
Sent: Tuesday, 23 January 2018 5:33 PM
To: 'Hock Wah Motor Pte Ltd'; NAC
Cc: Clarence Richard Anthony
Subject: SLJ9339U, OD claim no : MT/0978946
Importance: High

Dear IDAC and Hock Wah,

Learnt that veh is in IDAC (IDAC – pls confirm), do assist with the necessary arrangement asap.

Dear Hock Wah,

OD excess of \$600/- is applicable, pls assist to liaise with OI's daughter Ms Leong at tel : 96323438.

Survey required for this parts by parts repairs, you have to arrange personally at mtsurvey@income.com.sg

Regards.

Without Prejudice

Tan Siew Choo
Senior Claims Executive
Motor Insurance
T +65 6430 7882
www.income.com.sg



Our Ref: MT/CA/OD/051/0978946-001/TSC

23 Jan 2018

HOCK WAH MOTOR WORKSHOP PTE LTD

BLK 3011 BEDOK NORTH AVE 4 #01-2008/10/12

BEDOK INDUSTRIAL PARK E

SINGAPORE 489977

Dear Sir

CLAIM NUMBER: MT/0978946-001

REPAIR OF VEHICLE NUMBER: SLJ9339U

We are pleased to inform you that you are successful in your tender to repair the vehicle. The details are as follows:

Award Date: 23 Jan 2018

Make: NISSAN

Model: QASHQAI

Estimated Repair Days: 5

Location: NATIONAL ASSESSMENT CENTRE SERVICES

Address: 51 UBI AVENUE 1 #01-25 PAYA UBI INDUSTRIAL PARK SINGAPORE 408933

Benefits Applicable: N/A

Excess Applicable: 600

Please note that supplementary items will not be allowed.

If you have any queries, please contact Tan Siew Choo at 64307882 or email us at motor@income.com.sg.

Yours sincerely

Low Choo Mee

Senior Manager

Motor Insurance

Disclaimer

This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.



NATIONAL ASSESSMENT CENTRE SERVICES
(LKK GROUP)
51 Ubi Ave 1, #01-25, Paya Ubi Industrial Park,
Singapore 408933, TEL: 6841 0055 FAX: 6841 6315

NAC NATIONAL
ASSESSMENT
CENTRE

Vehicle Movement Form

Vehicle Check-In

Vehicle No: SLJ 9339U Date In: _____ Time In: _____ with Keys: Yes / No

For Office use

Attended by: _____

Workshop Collection of Vehicle

Workshop: HOCK WAH MOTOR

Collection Date: 24/01/18 Time: 0915 with Keys: ☒ Yes / No

Tow Truck No: YH 1388C Tow Man: ONG ENG BENG NRIC: S70K0467A

Signature: _____

For office use

Attended by: ROSLINDA

Approved by: _____

Workshop Return of Vehicle

Workshop: _____

Returned Date: _____ Time: _____ with Key: Yes / No

* Tow In / Drive In
Tow Man / Workshop Representative: _____ NRIC: _____

Signature: _____

For office use

Attended by: _____

Owner Collection of Vehicle

Collection Date: _____ Time: _____ with Key: Yes / No

Owner: _____ NRIC: _____

Signature: _____

For office use

Attended by: _____

Approved by: _____