Date In: 30/1/18-17:04	Jeb description	Date & Time Completed	Done by	
Res No: NA INC POO 1847 24	SAS e-filing			
Veh No: SERPTTYK	E-mail (within Shrs, AIC 2hrs)			
D.O.A: 30/1/18-13:40	i-Motor Claim Form	MT/ 0980202	30/1/18 18:	90
D.O.A : 20/1/10-15-75	i-Motor W/O (Within: OD 2	thrs, TP 4hrs)		
OD . TP . Reporting Only	i-Photo Uploaded		14	
	Assessment/Survey Report			
TP Insurer:	Ass't Report by Fax / Han			
			Fax:	San His
Preferred Wksp / INC Assign Wksp / QW: (				
TP Particulars: Veh No:	SCP 18765	Tel:	)	
Owner / Driver: (	Period: (	) Cover Type: (		
Policy No: ( )	Date:	Time:	)	-
Confirmed by : (	b) [Note-Est. Status (WO): N: 0		100%]	-
		2076, 1. 21-1776. 1. 55		
Year of Registration: ( )	Warranty: YES ( )/NO (			
Excess: (\$ ) Loading: \$		A STATE OF THE STA	म्बद्धाः भूतः गुल्या	-
General Remarks		Herman San		
( ) Walk-In Customer: Customer's	information strictly Confidential &	Strictly NO refer of repairer		
( ) Total Loss Case : to e-mail Ins	surer URGENTLY.		<u> </u>	
Drive-In ( )/Towed-In ( ); Inve	oice: YES( ) / NO( )	Towing Co: (		)
Remarks: (INC hotline: 6788 6616	(i) Courtesy Car ( )	Date&Time Completed	Done	у .
Apply for Transport Allowance (     QC Check / Post Repair Inspection	) / Courtesy Car ( )	Date&Tirrie Complet 54	Done	У
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost 2]	) / Courtesy Car ( )	Date&Tirrie Complet 54	Done	У
Apply for Transport Allowance (     QC Check / Post Repair Inspection	) / Courtesy Car ( )	Date&Tirrie Complet 34	Done	y ·
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost 2]	) / Courtesy Car ( )	Date&Tirrie Complet 54	Done	y -
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost 2]  Injury:	) / Courtesy Car ( )	Date&Tirrie Complet 34	Done	y -
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost 2]  Injury:	) / Courtesy Car ( )	Date&Tirrie Complet 34	Done	У -
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost 2]  Injury:	) / Courtesy Car ( )	Date&Tirrie Complet 54	Done	у -
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost 2]  Injury:	) / Courtesy Car ( )	Date&Tirrie Complet 34	Done	y
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost:  Injury:  Date Time Actions	)/Courtesy Car ( )		Ant (S)	
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost:  Injury:	)/Courtesy Car ( )	reparation Checklist		Am
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost:  Injury:  Date Time Actions  NAIRO6659		reparation Checklist	Anet (S)	Am
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost:  Injury:  Date/Time Actions  NA[206659  Inimant's Particulars:		reparation Checklist:  dent Reporting (\$30); age Assessment (\$100); INC	Ant (5) fit Bill (580) 40/545	Am
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost:  Injury:  Date Time Actions  NA[806659]  Claimant's Particulars:		reparation Checklist  dent Reporting (\$30); age Assessment (\$100); INC ing Fee w-Through Survey w-Through Survey (Resurvey)	S80) 40/545 5120 530	Am
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost:  Injury:  Date Time Actions  NA[R00659  Claimant's Particulars:-  Driver/Owner:	Invoice F	reparation Checklist:  dent Reporting (\$30);  age Assessment (\$100); INC ( age Fee	S80) 40/545 5120 530	Am
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost:  Injury:  Date Time Actions  NAIRO6659  Claimant's Particulars:  Contact No:		reparation Checklist:  dent Reporting (\$30);  age Assessment (\$100); INC ( age Fee	Ant((5))  Fit Bill  (880) (40/545  5120  530 (95)	Am
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost:  Injury:  Date Time Actions  NAIRO6659  Claimant's Particulars:  Contact No:	Courtesy Car (	reparation Checklist:  dent Reporting (\$30);  sge Assessment (\$100); INC ( ng Fee ( w-Through Survey (Resurvey))  ng against INC Only (wef 10 Jan 20 ( spection)	Ant((5)) 7it Bill (580) 540/545 5120 530 (95) \$75	Am
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost:  Injury:  Date/Time Actions  NA[P06659  Claimant's Particulars:  Oriver/Owner:  Contact No:  Damaged Portion:		reparation Checklist:  dent Reporting (\$30); age Assessment (\$100); INC ( age Fee	Ant((5)) 7it Bill (580) 540/545 5120 530 (95) \$75	Am
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost:  Injury:  Date/Time Actions  NA[P06659  Claimant's Particulars:  Oriver/Owner:  Contact No:  Damaged Portion:		reparation Checklist.  dent Reporting (\$30); age Assessment (\$100); INC ( ang Fes w-Through Survey (Resurvey) age against INC Only (wef 10 Jan 20) aspection DA + SMRT Survey ditional Services:  desy Car / Tpt Allowance air Co-ordination	\$380) \$40/\$45 \$120 \$30 \$95) \$75 \$160	Amu
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost:  Injury:  Date Time Actions  NA[P06659  Chaimant's Particulars:  Oriver/Owner:  Contact No:  Darnaged Portion:  C Checked by (Engr-In-Charge):		reparation Checklist:  dent Reporting (\$30);  age Assessment (\$100); INC ( age Fee Sw-Through Survey (Resurvey)  age against INC Only (wef 10 Jan 20 against I	\$\frac{\fin}\fint{\frac}\frac{\frac{\frac{\frac}\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}\frac{	Amu (
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost >  Injury :  Date Time Actions  NA[P06659  Claimant's Particulars :-  Oriver/Owner:  Contact No:  Damaged Portion:  C Checked by (Engr-In-Charge):  Auditors' Comments :-	Courtesy Car (	reparation Checklist.  Jent Reporting (\$30);  age Assessment (\$100); INC (	\$380) \$40/\$45 \$120 \$30 \$25 \$10 \$25 \$5 \$25 \$5 \$20	Amu
1) Apply for Transport Allowance ( 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost:  Injury:  Date/Time Actions  NA[P06659  Chumant's Particulars:  Oriver/Owner:  Contact No:  Damaged Portion:  C Checked by (Engr-In-Charge):		reparation Checklist  dent Reporting (\$30); age Assessment (\$100); INC ( a	\$380) \$40/\$45 \$120 \$30 \$25 \$10 \$25 \$5 \$20 \$30	Amu

in per at the

# SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- 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.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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.

Any false reporting may be referred to the Police for investigation.

- 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.

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 Date Of Report
 30/01/2018 17:04

 Date Of Accident
 30/01/2018 13:40

Exact Location Of Accident JUNC HAVELOCK RD & EU TONG SEN ST

Country/State of Loss SINGAPORE

## **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SLR8774K

Insured/Policyholder

Name Of Registered Owner RELIABLE RIDES PTE LTD

Co Reg No 201611527N Email Address NÕEMAIL

Mobile Phone No

Alternative Phone No OFFICE-89999999

Vehicle Particulars

Manufacturer TOYOTA

Model PRIUS 1.8E HYBRID CVT

Exact Purpose for which vehicle was being used at

time of accident

COMMERCIAL

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

If No, Please state action to be taken THIRD PARTY

Vehicle Category PRIVATE HIRE

Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 5093843205

Cover Note Number

Driver

Name of Driver MUHAMMAD FARHAN BIN ABDUL GANY

 NRIC No
 \$8836254C

 Date Of Birth
 24/09/1988

 Occupation
 OUTDOOR

 Date Of Driving Pass
 21/10/2009

Driving Experience 8 YEARS AND 3 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92304289

Fax Number

Contact Number OFFICE-92304289

EMail Address NOEMAIL

BLK 415B FERNVALE LINK Address #15-48

Postcode

792415

Was driver an employee of the Insured's Company

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

COLLISION - CHANGE/CROSS LANE Type Of Accident

CLEAR Weather Conditions DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

YES Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

YES Was any other material or property damaged?

I have been approached by unknown person(s) NO soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME:

NO

GENDER: : FEMALE

#### **Details of Police Action**

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

NO

If Yes, against whom?

## Circumstances of Accident

ON STATED DATE AND TIME I WAS TRAVELLING ALONG JUNCTION HAVELOCK ROAD LANE 3. SUDDENLY VEHICLE B TRYING CUT ONTO MY LANE FROM LANE 2 AND HIT ONTO MY VEHICLE REAR RIGHT PORTION.

#### 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 SLP7876S

Vehicle Make/Model/Colour

60

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

ROHANA BINTE MOHAMED

NRIC/Passport Number

S7001875F

Contact Number

92358302

Address Postcode

Insurance Company Name

Nature Of Damage

# **DETAILS OF INJURED PERSON 1**

Name

MÜHAMMAD FARHAN BIN ABDUL GANY

Approximate Age

Injuries Sustain

NECK AND BACK

Injured person in which vehicle?

**SLR8774K** 

Were seat belts worn?

YES

Was this injured conveyed to hospital by

010:20

ambulance?

NO

Address Postcode

### SKETCH PLAN

# IMPORTANT NOTICE

- Please report <u>correctly</u> 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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)

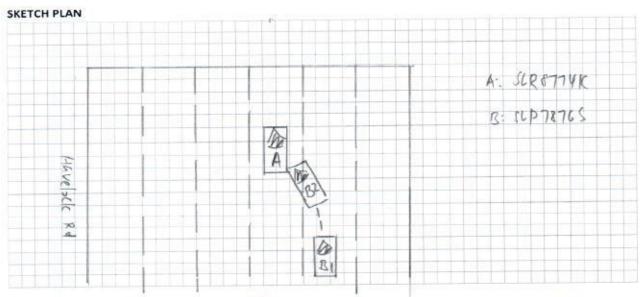
I understand, acknowledge, agree and consent that:

- (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:
  - 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:
  - 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

for popplying 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:

Name: NRIC/FIN No.:



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## DECLARATION

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

Policyholder's Signature

Date & Time:

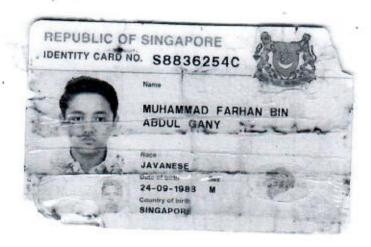
Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No .:









<b>eBao</b> Tech									Gene	ralClaim
Hello, NAC_PAYA_UBI_80060	1	100					Change Lan	guage	· Change Passwo	rd + Log Out
My Desktop	Polic	y Query								٠
Notice of Loss	Policy N	0.				Date of Acc	ident	30/01	1/2018 13:40	3
	Vehicle	No.(For Motor)	SLR8774K							
				é		Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5093843205	RELIABLE RIDES PTE LTD	201611527N	GPC	drivo CLASSIC	SLR8774K	SLR8774K	30/08/2017	29/08/2018
			- 0.000			Continue				

Policy No.	5093843205	Policyholder Name	RELIABLE RID	ES PTE LTD	Policyholder NRIC	201611527N
Address	8 KAKI BUKIT AVENUE 4 #05-50		KAKI BUKIT SII	NGAPORE 415875		
Product Name	PRIVATE CAR INSURANCE	Plan			Group Policy Flag	N
Policy ssue Date	29/08/2017	Effective Date	30/08/2017 0	0:00	Expiry Date	29/08/2018 23:59
Third Party Excess	1500	Own damage Excess	1000		Windscreen Excess	100
Additional Excess	0	OS Premium	0			
Outside Singapore OD Excess	3000	Outside Singapore TP Excess	3000			
Agent	TAN INSURANCE BROKERS PTE	Agent Tel.	NIL		GST Flag	Y
Flag Open Policy Info Certificate Info	No older Mailing Address		a.			
	8 KAKI BUKIT AVENUE 4	Address 2	#05-50 PREM	MIER @ KAKI BUK	II Address 3	SINGAPORE 415875
Address 1 Address 4	S KAKI BUKIT AVENUE 4	Address Type	Singapore ad		Post Code	415875
Unit No.	05-50	Related Policy Number	5097501986			
<b>▶</b> Insure	d Object: SLR8774K					
<b>▽</b> Endors	ements					
Sequenc	e Date of Endorsement	Endors	ement Type	Endorsem	ent Status	Endorsement Content  Thank you for giving us the opportunity to serve you. We confirm that the Period of
1	30/08/2017 00:00	POI Move	ž.	Endorsement Ta	ke Effective	Insurance of this policy is amended as follows: PERIOD OF INSURANCE: 30 Aug 2017 TO 29 Aug 2018
2	30/08/2017 00:00	Basic Infor Endorseme		Endorsement Ta	ake Effective	Thank you for giving us the opportunity to serve you. We confirm that from 30 Aug 2017, the following amendment(s) is/are made t this policy: VEHICLE REGISTRATION NUMBER: SLR8774K

6093843205	Vehicle No.	SUR8774K	GST Registration No.		
RELIABLE RIDES PTE LTD			Policyholder NRIC		527N
PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading		
0	Contact No.(Office)	0	Contact No. (Home)		
	Special Remark			THE C	
No ○ Yes	TCA	® No ○Yes		100	
No	NCD Entitlement(%)	0	Private Hire	Yes	
30/01/2016 18:06	Accident Report Within 24 hrs.	Yes	Accident Type		- Change / Cross lane
30/01/2018	Time of Accident Nh:mm	13:40	Country of Accident	Singapo	re -
	Orange Force		ICM No.		
JUNC HAVELOCK RD & EU TONG SEN ST					
1,000.00	Additional Excess	0.00	Windscreen Excess		100,00
	Outside Singapore OD Excess	3,000.00			
1,500.00	Outside Singapore TP Excess	3,000.00			
ation					
No		GST Registration Date			
	1.2	GST Status Verified	No		- 2
dress					
	Address 2	#05-50 PREMIER @ KAKI BUKTI	Address 3	SINGA	ORE 415875
A SECRETARY STREET, S.	Address Type	Singapore address	Post Code	415875	
05-50	Related Policy Number	5097501986			
Urnamed Driver	Driver Type	Unnamed Driver			
MUHAMMAD FARHAN BIN ABOU	Driver NRIC	58836254C	Driver DOB	24/09/	1988
21/10/2009	Driver Age	29	Driving Experience	0	
92304289	Contact No.(Office)	0	Contact No.(Home)	0	
BLK 4158	Address 2	FERNVALE LINK	Address 3	FERNV	ALE RIVERSOW
		(4)	Secret Section	0.0000000	
SINGAPORE 792415	Address Type	Singapore address	Post Code	792419	
SINGAPORE 792415 15-45	Address Type	Singapore address	wost Code	792415	
	Address Type Driver Vehicle No.	Singapore address	Driver Insurer Comp		
15-48		Singapore address			
15-48		Singapore address			
15-45 ○ Yes <b>®</b> No	Driver Vehicle No.	2000			
15-45 ○ Yes <b>®</b> No	Driver Vehicle No.	2000			
15-45 ○ Yes <b>®</b> No	Driver Vehicle No.  Any injury?	2000			
15-45 ○ Yes <b>®</b> No	Driver Vehicle No.  Any injury?	2000	Driver Insurer Comp	20161)	1527N
15-45 ○ Yes	Driver Vehicle No.  Any Injury?	Tei ○ No	Driver Insurer Comp Insured NRIC Contact No. (Office)	20161: 66351	1527N 1920
15-45 ○ Yes	Driver Vehicle No.  Any injury?	Tei ○ No	Insured NRIC Contact No. (Office) TP Venicle Number	20161 66351 SLP78	1527N 1920
15-45 ○ Yes	Driver Vehicle No.  Any injury?  Insured Name Contact No. (Home)	® Yes ○ NO  RELIABLE RIDES PTE LTD	Driver Insurer Comp Insured NRIC Contact No. (Office)	20161 66351 SLP78	1527N 1920
15-45 ○ Yes  No  0 mg	Driver Vehicle No.  Any injury?  Insured Name Contact No. (Home)	RELIABLE RIDES PTE LTD  SUR8774K  Not at Fault	Insured NRIC Contact No. (Office) TP Vehicle Number	20161 66351 SLP76:	1527N 1320 1565
15-45 ○ Yes  No  0 mg	Driver Vehicle No.  Any injury?  Incured Name Contact No. (Home) Of Vehicle Number	RELIABLE RIDES PTE LTD  SUR8774K  Not at Fault	Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred I	20161 65351 Workshop	1527N 120 120
15-48  ① Yes ® No  0 mg  SLR8774K / SLP78765 ON 30 Jan 2018	Driver Vehicle No.  Any mjury?  Insured Name Contact No. (Home) Of Vehicle Number  Insured Liability *	RELIABLE RIDES PTE LTD  SUR8774K  Not at Fault	Insured NRIC Contact No. (Office) TP Vehicle Number	20161 65351 Workshop	1527N 1320 1565
15-48  ① Yes ② No  0 mg    OO-MX   V     SLR8774K / SLF78765 ON 10 Jan 2018    Yes   V	Driver Vehicle No.  Any mjury?  Insured Name Corract No. (Home) OI Vehicle Number  Insured Liability * Preference Repair Option	RELIABLE RIDES PTE LTD  SUR8774K  Not at Fault	Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred I	20161 65351 Workshop	1527N 120 120
15-45  () Yes (a) No  0 mg    00-404	Driver Vehicle No.  Any mjury?  Insured Name Corract No. (Home) OI Vehicle Number  Insured Liability * Preference Repair Option	RELIABLE RIDES PTE LTD  SUR8774K  Not at Fault	Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred I	20161 65351 Workshop	1527N 120 120
15-45  () Yes (a) No  0 mg    00-404	Driver Vehicle No.  Any mjury?  Insured Name Corract No. (Home) OI Vehicle Number  Insured Liability * Preference Repair Option	RELIABLE RIDES PTE LTD  SUR8774K  Not at Fault	Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred I	20161 65351 Workshop	1527N 120 120
15-45  () Yes (a) No  0 mg    00-404	Driver Vehicle No.  Any mjury?  Insured Name Corract No. (Home) OI Vehicle Number  Insured Liability * Preference Repair Option	RELIABLE RIDES PTE LTD  SUR8774K  Not at Fault  Preferred Workshop, Name unknown	Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred I	20161 65351 Workshop	1527N 120 120
15-45  () Yes (a) No  0 mg    00-404	Driver Vehicle No.  Any mjury?  Insured Name Corract No. (Home) OI Vehicle Number  Insured Liability * Preference Repair Option	RELIABLE RIDES PTE LTD  SUR8774K  Not at Fault  Preferred Workshop, Name unknown	Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred I	20161 65351 Workshop	1527N 120 120
15-45 () Yes (a) No  O mg  SLR8774K / SLF78765 ON 30 Jan 2018  Ves (b) 30/01/2018 18:08 [beckson	Driver Vehicle No.  Any injury?  Insured Name Contact No. (Home) Of Vehicle Number  Insured Liability * Preference Repair Option Claim Close Date	RELIABLE RIDES PTE LTD  SUR8774K  Ast at Fault  Preferres Workshop, Name unknown  Save Submit	Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred I	20161 65351 Workshop	1527N 120 120
15-45  ○ Yes	Insured Name Contact No. (Home) Of Venicle Number  Insured Liability * Preference Repair Option Claim Close Date	RELIABLE RIDES PTE LTD  SUR9774K  And at Fault  Preferred Workshop, Name unknown  Save Submit	Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred I	20161 65351 Workshop	1527N 120 120
15-45	Driver Vehicle No.  Any injury?  Insured Name Contact No. (Home) Of Vehicle Number  Insured Liability * Preference Repair Option Claim Close Date	RELIABLE RIDES PTE LTD  SUR8774K  Not at Fault  Preferred Workshoo. Name unknown  Save Submit	Insured NRIC Contact No.(Office) TP Venicle Number Name of Preferred to	20161 66351 51P78 Werkshop	1527N 1320 1468 148
15-45  ○ Yes	Insured Name Contact No. (Home) Of Vehicle Number  Insured Liability # Preference Repair Option Claim Close Date  Claim No. Upload Date	RELIABLE RIDES PTE LTD  SUR87744  Not at Fault  Preferred Workshop, Name unknown  001  30/01/2018 18:09  Category *	Insured NRIC Contact No.(Office) TP Venicle Number Name of Preferred to Date Sacrewed  Confidential	20161 663331 SLP76 Serkshop	1527N 120 120
15-45	Insured Name Contact No. (Home) Of Vehicle Number  Insured Liability # Preference Repair Option Claim Close Date  Claim No. Upload Date	RELIABLE RIDES PTE LTD  SUR8774K  Ast at Fault  Preferres Workshop, Name unknown  5ave Submit  001  30/01/2018 18:59  Category *	Insured NRIC Contact No.(Office) TP Venicle Number Name of Preferred to Date Seceived  Confidential	20161 66331 3LP76: Workshop Receiv 30/01/	1527N 1320 1468 148
15-45	Insured Name Contact No. (Home) Of Vehicle Number  Insured Liability # Preference Repair Option Claim Close Date  Claim No. Upload Date  Brows  Brows	RELIABLE RIDES PTE LTD  SUR9774K  And at Fault  Preferred Workshop, Name unknown  001  30/01/2018 18:59  Category *  Category *	Insured NRIC Contact No.(Office) TP Venicle Number Name of Preferred to Date Seceived  Confidential	20161 663331 3LP76 Workshop Received 30/01/	1527N 1320 1468 148
15-45	Insured Name Contact No. (Home) Of Vehicle Number  Insured Liability # Preference Repair Option Claim Close Date  Claim No. Upload Date  Brows Brows Brows	RELIABLE RIDES PTE LTD  SUR8774K  Ast at Fault  Preferres Workshop, Name unknown  001  30/01/2018 18:59  Category *  Category	Insured NRIC Contact No.(Office) TP Venicle Number Name of Preferred to Date Seceived  Confidential  Confidential  NO. V.	20161: 66351 3LP78: Workshop Receiv 30/01/	1527N 1320 1468 148
15-45	Insured Name Contact No. (Home) Of Vehicle Number  Insured Liability # Preference Repair Option Claim Close Date  Claim No. Upload Date  Brows  Brows	RELIABLE RIDES PTE LTD  SUR8774K  Ast at Fault  Preferred Workshop, Name unknown  001  30/01/2018 18:09  Category *  Category	Insured NRIC Contact No.(Office) TP Venicle Number Name of Preferred to Date Sacetived  Confidential  Confidential  No. V.	20161: 663531 3LP78: Werkshop Receiv 30/01/	1527N 1320 1468 148
15-45	Insured Name Contact No. (Home) Of Vehicle Number  Insured Liability # Preference Repair Option Claim Close Date  Claim No. Upload Date  Brows Brows Brows	RELIABLE RIDES PTE LTD  SUR8774K  Not at Fault  Preferred Workshoo, Name unknown  5ave Submit  001  30/01/2018 18:59  Category *  Category *  Category *  Please Select  Re Clear Please Select  Re Clear Please Select	Insured NRIC Contact No. (Office) Th Venicle Number Name of Preferred 1  V G1A report Date Sacreived  Confidential V NO V IND V IND V	20161: 66351 3LP78: Workshop Receiv 30/01/	1527N 1320 1468 148
ti	RELIABLE RIDES PTE LTD  PRIVATE CAR INSURANCE  0  ® No	RELIABLE RIDES PTE LTD  PRIVATE CAR INSURANCE  Cover Type  Contact No.(Office) Special Remark  TCA  No  No  No  No  No  No  No  No  No  N	RELIABLE RIDES PTE LTD  PRIVATE CAR INSURANCE  Cover Type  Contact No. (Office)  Special Remark  TCA  No. (Office)  No. (Office)  No. (Office)  Special Remark  TCA  No. (Office)  Special Remark  TCA  No. (Office)  Special Remark  TCA  No. (Office)  No. (Office)  Special Remark  TCA  Total Remark  TCA  Special Remark  TCA  Total Remark  TCA  Total Remark  TCA  Tota	RELIABLE RIDES PTE LTD  PRIVATE CAR INSURANCE  Cover Type  Contact No. (Office) Special Remark  Code  Ro No ○ Yes  TCA  No  NCD Entitlement(%)  N	### #################################

	uploaded By/Dete	Folder Date	File Name		9	Source	Action
♥ Video List							17.7373
E-5	NAC_PAYA_UBI_800601( NATIONAL n.2	ASSESSMENT CENTRE SERVICES) on 30 la 018 18:08	Photos		Normal	Photos 2018-1-30	
	NAC_PAYA_UBI_800601( NATIONAL n.2	ASSESSMENT CENTRE SERVICES) on 30 Ja 016 18:08	Photos		Normal	Photos 2018-1-30	£
1	NAC_PAYA_UBI_BOOKO1{ NATIONAL n 3	ASSESSMENT CENTRE SERVICES) on 30 la 018 18:08	Photos		Normal	Photos 2018-1-30	E
	NAC_PAYA_UBI_800601  NATIONAL n 2	ASSESSMENT CENTRE SERVICES) on 30 3a 018 18:08	Photos		Normal	Photos 2018-1-30	E
	h 2	ASSESSMENT CENTRE SERVICES) on 30 Ja 018 18:06	Photos		Normal	Photos 2018-1-30	E-
	NAC_PAYA_UBI_800601( NATIONAL of 2	ASSESSMENT CENTRE SERVICES) on 30 Ja 018 18:08	Photos		Normal	Photos 2018-1-30	E
	NAC_PAYA_UBI_800601( NATIONAL n 2	ASSESSMENT CENTRE SERVICES) on 30 Ja 518 18:08	Photos		Normal	Photos 2018-1-30	Es
1	NAC_PAYA_UBI_800601( NATIONAL n 2	ASSESSMENT CENTRE SERVICES) on 30 Ja 018 18:08	Photos		Normal	Photos 2018-1-30	E
1	NAC_PAVA_URI_800601( NATIONAL n 2	ASSESSMENT CENTRE SERVICES) on 30 Ja 018 18:05	Photos		Normal	Photos 2018-1-30	Es
1	NAC_PAYA_UBI_800601( NATIONAL n.2	ASSESSMENT CENTRE SERVICES) on 30 Ja 018 18:08	Photos		Normal	Photos 2018-1-30	Ed
-	NAC_PAYA_UBI_B00001[ NATIONAL n.2	ASSESSMENT CENTRE SERVICES) on 30 Ja 28 18:06	Photos		Normal	Photos 2018-1-30	Ed
2	NAC_PAYA_UBI_BOOSOI( NATIONAL in 2)	ASSESSMENT CENTRE SERVICES) on 30 Ja 118 18:06	Photos	,	Normal	Photos 2018-1-30	Ed
mail.		ASSESSMENT CENTRE SERVICES) on 30 Ja 138 18:09	Photos	10	Normal	Photos 2018-1-30	Ed
/ trie	NAC_PAYA_UBI_800601( NATIONAL n 3	ASSESSMENT CENTRE SERVICES) on 30 Ja 18 18:09	Photos	100	Normal	Photos 2018-1-30	Ed
1	NAC_PAYA_UBI_800601( NATIONAL n.20	ASSESSMENT CENTRE SERVICES) on 30 la 18 18:09	SAS		yormal	SAS 2018-1-30	te
100 to 1	NAC_PAVA_LIBI_800601( NATIONAL n 20	ASSESSMENT CENTRE SERVICES) on 30 Ja 18 18:09	NRIC/ Driving Licente	9	Normal	NRIC/ Driving License 2018-1-30	Ed
Attachment	Uploas	led By/Date	Category	7 "	rgency	Description	Sent? acti (CO)