

# NATIONAL Assessment Centre Services

(Ref: 12/005)

MMA 118022070 - 01

Date In: 13/12/18 14:13	Job description	Date & Time Completed	Done by
Ref No: NA/IMC18002887164	SAS e-filing		
Veh No: SKT 2929Y	E-mail (within 3hrs, A/C 2hrs)		
D.O.A: 13/12/18 11:45	i-Motor Claim Form	M7/0982298	13/12/18 18:47.
<input checked="" type="checkbox"/> TP / Rep Only	i-Motor W/O (within 24 hrs, 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: 53D 9281 M	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

MMA 1801147	Invoice Preparation Checklist	Am't (\$)	Am't (RM)
Claimant's Particulars:-	1) AR: Accident Reporting (\$30)	30.00	
Driver/Owner:	2) DA: Damage Assessment (\$100) INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$42		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	Q1:		
	*N2: Courtesy Car / Opt Allowance \$8		
	*N3: Repair Co-ordination \$10		
	*N4: Post Repair Inspection \$25		
	*N5: DV / Collect Express Coordination \$5		
	TP (N11): TP (N11) against INC \$20		
	9) N12: Idao Mobile \$30		
QC Checked by (Engr-In-Charge):	Invoice dated:	Fee Charged	
Auditors' Comments:-	Invoice dated:	Fee Charged	
Ref: 1/1			
Ref: 2/3			

## 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	13/02/2018 14:13
Date Of Accident	13/02/2018 11:45
Exact Location Of Accident	PARKWAY PARADE CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT2929Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHUA KIM HENG JOHN
NRIC No	S1185157F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96160128
Alternative Phone No	OFFICE-96160128

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	VELOSTER
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	NO
Policy Number	5073449416-02
Cover Note Number	-

### Driver

Name of Driver	CHUA KIM HENG JOHN
NRIC No	S1185157F
Date Of Birth	11/10/1956
Occupation	INDOOR
Date Of Driving Pass	06/05/1977
Driving Experience	40 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96160128
Fax Number	
Contact Number	OFFICE-96160128
EMail Address	NOEMAIL



Address	24 SIMEI ST 1 #06-07
Postcode	529946
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 - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
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)	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

I WAS TRAVELLING INSIDE PARKWAY PARADE CARPARK WHILE AT THE UP SLOPE RAMP. I ACCIDENTALLY BANG ONTO THE VEH B (BEARING NO SJD8281M) 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	SJD8281M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	WONG YUNG NAM
NRIC/Passport Number	S7518551J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

## 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



A = SKT 2929Y  
B = SJD 8281 M

Parkway Parade Carpark

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to statement

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.:



**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : MMA 118022070 Vehicle Registration No: SKT 2929Y  
Name (as shown in NRIC) : Chua Kim Heng John NRIC/FIN/Passport No : S1185157 F  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : \_\_\_\_\_ Singapore( )  
Contact (Tel) : \_\_\_\_\_ Mobile No. : 96160128  
Email Address : \_\_\_\_\_  
Date of Accident : 13/12/18 Time of Accident : 11:45  
Place of Accident : Parkway Parade Carpark  
Insurance Company : NTUC

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Amend Revert from Reporting to own Damage  
claims.

Policyholder / Driver's Signature  
Date: 14/02/18

Reporting Centre Personnel's Signature  
Name: \_\_\_\_\_  
NRIC/FIN No.: \_\_\_\_\_  
Date: 14/12/18.

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1185157F




Name  
**CHUA KIM HENG JOHN**

Race  
**CHINESE**

Date of Birth  
**11-10-1956**

Sex  
**M**

Country of Birth  
**SINGAPORE**



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **S1185157F**

Name  
**CHUA KIM HENG JOHN**

Birth Date: **11 Oct 1956**

Issue Date: **28 Mar 2003**



1591329



NRIC No: **S1185157F**



Blood Group: **O+** Date of issue: **14-01-1994**

Address  
**10 MEI STREET 1 MELVILLE PARK #007**  
**SINGAPORE 250041**

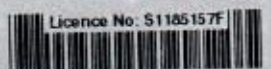
NRIC No: **S1185157F** Date: **13-12-1992** No: **2341703**

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

	PASS DATE
Class 2B Motorcycles not exceeding 200 cc	24 May 1977
Class 2A Motorcycles between 201 cc and 400 cc	24 May 1977
Class 2 Motorcycles exceeding 400 cc	24 May 1977
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	06 May 1977

NP 428A

Licence No: **S1185157F**



24 Simei St 1 #06-07  
S29946.

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"/>	5073449416-02	CHUA KIM HENG JOHN	S1185157F	GPC	drive CLASSIC	SKT2929Y	SKT2929Y	02/09/2017	01/09/2018



Accident MT/0982298

#### Modification History

Claim 001 [New](#)

Claim Type *	OD-MX	Insured Name	CHUA KIM HENG JOHN	Insured NRIC	S11
Contact No.(Mobile)	96160128	Contact No.(Home)	64269172	Contact No.(Office)	
Email Address	subaru2225@hotmail.com	OI Vehicle Number	SKT2929Y	TP Vehicle Number	SJD
Claim Description	SKT2929Y / SJD8281M ON 13 Feb 2018			Name of Preferred Workshop	0
Preferred Workshop Contact No.	0	Insured Liability *	Fully at Fault	GIA report	Rec
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	13/0
Date Registered	13/02/2018 18:46	Claim Close Date			
Report Taken By	LIEW SHAN HUI				
<input checked="" type="checkbox"/> Print AK letter					

Save Submit

Attachment

Accident No.	MT/0982298	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	13/02/2018 18:47
Path *		Category *	Confidential
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Message Read			

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Descr
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Feb 2018 18:47	NRIC/ Driving License	Normal	NRIC/ Driving License
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Feb 2018 18:47	SAS	Normal	SAS 2011
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Feb 2018 18:47	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Feb 2018 18:47	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Feb 2018 18:47	Photos	Normal	Photos 20:
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	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Feb 2018 18:46	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Feb 2018 18:46	Photos	Normal	Photos 20:

## Video List

Uploaded By/Date	Folder Date	File Name	Source
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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) Motorcycle ☐ b) Animal ☐
- c) Bicycle ☐
- 3) Vehicle hit Road Side Objects: ☐
- a) Govt. 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: SKT29294 Yr Regn: 1

Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover / MPV / Truck / Trailer or ☐

Make & Model: Hyundai Veloster C.C. ☐

Colour White Transmission Type: Auto / Manual

Eng/No: 56527 Sp. Reading: 56527

C/No: KMHTC61E VGU 270 605

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

Steering: In order / Jammed / Leaked / Burnt or ☐

Brake: In order / Jammed / Leaked / Burnt or ☐

Modi: Nil / S/Rim / STD A/Rim or ☐

Tyre Size: F: 235/40ZR18

R: 11

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Continental

Front 7 mm Rear 7 mm

R/Bal. 7 mm L/Bal. 7 mm

Parallel Import: Yes / No

Repair Type: LS / I.B.

No of Repair Days: 5

D.O.I. 14/2/18

Towed-In: Yes / No

Towing Required: Yes / No

Vehicle in Idac: Yes / No

Time: 0900

### 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. Govt 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:



Condition Legend:  
 (1) Bent (2) Dented (3) Discolored (4) Cracked (5) Cut (6) Scratched (7) Deformed  
 (8) Stuffed (9) Buckled (10) Broken (11) Necessary (12) Missing (13) Torn  
 (14) Unconfirmed (15) Not Working

# **MOTOR CAR (Frt)**

ACTION IACD  
 (1) Replace (✓) (2) Repair (X) (3) Check (○)  
 (4) Not Consistent (N/C)

Aug 2005

Vehicle No: SKT 29294

## **Front Portion**

NAC	INC	Item	CON	AC	Qty
1001	991886	Frt Number Plate			
1002	991887	Frt Number Plate Base			
1003	991889	Frt Number Plate Garnish			
1004	991300	Frt Bumper	TPK ✓	✓	1
1005	992341	Frt Bumper Clips	NEC ✓	✓	10
1006	991325	Frt Bumper Bracket			
1007	991462	Frt Bumper Side Retainer	NEC ✓	✓	1
1008	991433	Frt Bumper Reinforcement			
1009	991318	Frt Bumper Beam			
1010	991468	Frt Bumper Sponge			
1011	991427	Frt Bumper Protector			
1012	991420	Frt Bumper Pad			
1013	991363	Frt Bumper Grille			
1014	991301	Frt Bumper Moulding			
1015	991407	Frt Bumper Lower Spoiler			
1016	991438	Frt Bumper Sensor			
1017	995100	Frt LH Bumper Fog Lamp Cover			
1018	991355	Frt RH Bumper Fog Lamp Cover			
1019	995079	Frt LH Bumper Fog Lamp			
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			
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			

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			
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	OT ✓	✓	1
1097	995072	Frt LH Fender Inner Panel			
1098	995147	Frt LH Fender Lamp			
1099	995148	Frt LH Fender Protector			
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			

No of Items: \_\_\_\_\_

Assessor: \_\_\_\_\_

ORIGINAL COPY



## Claim Handling

Task Transfer Exit

IDS SAL SUB

### Accident MT/0982298

Policy No.	5073449416-02	Vehicle No.	SKT2929Y	GST Registration No.	
Policyholder Name	CHUA KIM HENG JOHN	Cover Type	drive CLASSIC	Policyholder NRIC	S1185157F
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)		Loading	0
Contact No.(Mobile)	96160128	Special Remark		Contact No.(Home)	
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	20	eCode Reason	
NCD Protection	No			Private Hire	No
<b>Accident Details</b>		Accident Report Within 24 hrs		Accident Type	Collision - Head to Rear
Report Date	13/02/2018 18:44	Time of Accident hh:mm		Country of Accident	Singapore
Date of Accident	13/02/2018	Orange Force		ICM No.	
Reporting Centre	NATIONAL ASSESSMENT CENTR				
Accident Location	PARKWAY PARADE CARPARK				
<b>Benefits</b>		Sum Insured			
Coverage		999999999.99			
Excess Waiver					
<b>Excess</b>					
Own damage Excess	0.00	Additional Excess	0.00	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	0.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		
<b>GST Registered Information</b>		GST Registration Date			
GST Registered	No	GST Status Verified		Yes	
GST Registration No.					
Modification History					

### Policyholder Mailing Address

Address 1	24 SIMEL STREET 1	Address 2	#06-07 MELVILLE PARK	Address 3	SINGAPORE 529946
Address 4		Address Type	Singapore address	Post Code	529946
Unit No.		Related Policy Number	5073449416-02		
<b>Of Driver Info</b>		Driver Type		Main Driver	
Driver Name	CHUA KIM HENG JOHN	Driver NRIC	S1185157F	Driver DOB	11/10/1957
Unnamed driver Name		Driver Age	60	Driving Experience	29
Register Date of Driver License	01/10/1978	Contact No.(Office)		Contact No.(Home)	
Contact No.(Mobile)	9616012	Address 2	#06-07 MELVILLE PARK	Address 3	SINGAPORE 529946
Address 1	24 SIMEL STREET 1	Address Type	Singapore address	Post Code	529946
Address 4					
Unit No.		Driver Vehicle No.		Driver Insurer Company	
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No				

### Declaration

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

### Investigation

<b>Claim 001 OD-MD</b>					
<b>Claim Case Officer Yap Chee Ling</b>					
Claim Type	OD-MD	Insured Name	CHUA KIM HENG JOHN	Insured NRIC	S1185157F
Contact No.(Mobile)	96160128	Contact No.(Home)	64269172	Contact No.(Office)	
Email Address	subaru2225@hotmail.com	01 Vehicle Number	SKT2929Y	TP Vehicle Number	SJ08281M
Claim Description	SKT2929Y / SJ08281M ON 13 Feb 2018	Name of Preferred Workshop	0		
Preferred Workshop Contact No.	0	Insured Liability	Fully at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	14/02/2018 09:56
Date Registered	13/02/2018 18:48	Claim Close Date		Total Loss but Repaired	
Report Taken By	LIEW SHAN HUT	Workshop Repairer			
<input checked="" type="checkbox"/> Print AK letter					
Modification History	14/02/2018 09:56 a069588 Modify Claim Type(OD-MX-->OD-MD)				

### Special Claim Creation Approval

Approval	Reason
Remarks	

### damage assessment Attachment

<b>Vehicle Info</b>					
Vehicle Make	HYUNDAI	Vehicle Model	VELOSTER TURBO	Engine Capacity	
Date of Registration	02/09/2015	Class No.	KMHTC61EVGU270603	Parallel Import *	<input type="radio"/> Yes <input checked="" type="radio"/> No
Towing Required *	<input type="radio"/> Yes <input checked="" type="radio"/> No	Vehicle in IDAC *	<input type="radio"/> Yes <input checked="" type="radio"/> No	Survey Current Status	
Type of Tender *	Own Damage	Assessor Name *	SEBASTIAN		
IDAC/Workshop Name	NATIONAL ASSESSMENT CENTR	IDAC/Workshop Location	51 UBI AVENUE 1 #01-25 PAYA		

Windscreen Parts & Labour  
Cost  
Market Value(\$)

Total Loss \*

☐ Yes ☒ No

Scrap Value(\$)

Economical Repair Value(\$)

REMARK:NO OF REPAIR DAYS:5 DAYS.

Remark

#### Damage Listing

Find a Part

Not Applicable

Not Applicable

ABS

ABSORBER

ACCELERATOR

ACTUATOR

ADVERTISEMENT STICKER

AIR BAG

AIR BLOWER

AIR BOX

AIR CHAMBER BOX

AIR CLEANER

AIR COMPRESSOR

AIR CON

AIR CON (VAN)

AIR COOLER

AIR DISTRIBUTOR

AIR FILTER

No.

Part No.

Description

Qty \*

Repair Code \*

1

16000100

BUMPER (FRONT)

1

Replace

X

2

16002401

BUMPER CLIPS (FRONT)

10

Replace

X

3

16005101

BUMPER RETAINER (FRONT LEFT)

1

Replace

X

4

16005901

BUMPER SPONGE (FRONT)

1

Unconfirm

X

5

16002901

BUMPER FOG LAMP COVER (FRONT LEFT)

1

Unconfirm

X

6

16002701

BUMPER FOG LAMP (FRONT LEFT)

1

Unconfirm

X

7

27700101

HEAD LAMP (LEFT)

1

Unconfirm

X

8

149001

BONNET

1

Repair

X

9

14903401

BONNET LOCK (LOWER )

1

unconfirm

X

10

25400102

FENDER (FRONT LEFT)

1

Replace

X

11

25400801

FENDER INNER PANEL (FRONT LEFT)

1

Unconfirm

X

12

25400901

FENDER INNER SHIELD (FRONT LEFT)

1

unconfirm

X

Save

Submit



## Enquire Transfer Fee

Vehicle Details	
Vehicle No. :	SKT2929Y
Vehicle Type :	P10 - Passenger Motor Car
Vehicle Attachment 1 :	With Sun Roof
Vehicle Scheme :	Normal
Vehicle Make :	HYUNDAI
Vehicle Model :	VELOSTER FS 1.6 T-GDI GLS DCT 2WD SR
Chassis No. :	KMHTC61EVGU270603
Propellant :	Petrol
Engine No. :	G4FJFU366368
Engine Capacity :	1591 cc
Maximum Power Output :	137.0 kW ( 183 bhp )
Maximum Laden Weight :	1700 kg
Unladen Weight :	1360 kg
Year Of Manufacture :	2015
Original Registration Date :	02 Sep 2015
Lifespan Expiry Date :	-
COE Category :	B - Car above 1600cc or 97kW (130bhp)
Quota Premium :	\$65,501.00
COE Expiry Date :	01 Sep 2025
Road Tax Expiry Date :	01 Sep 2018
PARF Eligibility Expiry Date :	01 Sep 2025

Inspection Due Date : 01 Sep 2018

Intended Transfer Date : 14 Feb 2018

CO2 Emission : 165.00 (g/km)

CEV/VES Rebate  
Utilised Amount : -

CO Emission : -

HC Emission : -

NOx Emission : -

PM Emission : -

Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use [Enquire Road Tax Payable](#) for fee(s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

**Amount Payable**

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
<b>Total Amount Payable :</b>			<b>25.00</b>

You may print this page for reference.

OK

Print



## LKK Paya Ubi

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**From:** Ng Hak Joo <hakjoo.ng@income.com.sg>  
**Sent:** Tuesday, 20 February 2018 3:47 PM  
**To:** AMKAUTOPOINT  
**Cc:** LKK Paya Ubi  
**Subject:** MT/0982298-001, VEHICLE NUMBER: SKT2929Y

**Importance:** High

Dear Ms Jolle of Autopoint

We spoke, please liaise with owner Mr John Chua at tel: 9616 0128 on the repair as the vehicle is with him, excess waiver.

Our Ref: MT/CA/OD/051/0982298-001/NHJ  
20 Feb 2018

AMK AUTOPOINT PTE LTD  
BLK 10 ANG MO KIO INDUSTRIAL PARK 2A  
#01-22 AMK AUTOPOINT  
SINGAPORE 568047

Dear Sir

**CLAIM NUMBER: MT/0982298-001**

**REPAIR OF VEHICLE NUMBER: SKT2929Y**

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

Award Date: 20 Feb 2018

Make: HYUNDAI

Model: VELOSTER TURBO

Estimated Repair Days: 5

Location: NATIONAL ASSESSMENT CENTRE SERVICES

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

Benefits Applicable: Excess Waiver

Excess Applicable: 0.0

Please note that supplementary items will not be allowed.

If you have any queries, please contact Ng Hak Joo at 64307890 or email us at [motor@income.com.sg](mailto:motor@income.com.sg).

Yours sincerely

Low Choo Mee

Senior Manager

Motor Insurance

**Ng Hak Joo**

Claims Executive, Motor Insurance

T +65 6430 7890

[www.income.com.sg](http://www.income.com.sg)



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