

NATIONAL Assessment Centre Services

(wef 1 Jan'05) MNA118030182

| | | | |
|---------------------------|--|-----------------------|--------------|
| Date In: 3/3/18-14:41 | Job description | Date & Time Completed | Done by |
| Ref No: NA/14C18004122/24 | SAS e-filing | | |
| Veh No: JLU1826A | E-mail (within 8hrs, AIC 2hrs) | | |
| D.O.A: 3/3/18-11:50 | i-Motor Claim Form | MT/0984555 | 3/3/18 16:56 |
| 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: Ym88177 | 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%. P: 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 |
|-----------|---------|
| | |
| | |
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| | |

| | | | |
|--------------------------|---|-----------------------|-----------------------|
| NA1801381 | Invoice Preparation Checklist | Am't (\$) Inc 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) FT: 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:- | | |
| | QD* | | |
| | *N5: Courtesy Car / Tpt Allowance \$5 | | |
| | *N6: Repair Co-ordination \$10 | | |
| | *N7: Post Repair Inspection \$25 | | |
| | *N8: DV / Collect Excess Coordination \$5 | | |
| | TP (N11): TP (Non INC) against INC \$20 | | |
| | 9) N12: Idac Mobile 30 | | |
| Auditors' Comments:- | Invoice dated | Fee Charged | |
| 2at. 1: | Invoice dated | Fee Charged | |
| 2at. 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 | 03/03/2018 14:41 |
| Date Of Accident | 02/03/2018 11:50 |
| Exact Location Of Accident | ALONG PUNGGOL CENTRAL BEFORE JUNC PUNGGOL WALK |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|--------------------|
| Vehicle Registration Number | SLU1826A |
| Insured/Policyholder | |
| Name Of Registered Owner | KENT AUTO SERVICES |
| Co Reg No | 52974332M |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-67412539 |

Vehicle Particulars

| | |
|--|----------------|
| Manufacturer | TOYOTA |
| Model | WISH 1.8X A |
| 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 | REPORTING ONLY |
| Vehicle Category | PRIVATE HIRE |

Insurance Company

| | |
|---------------------------|--|
| Name of Insurance Company | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | THIRD PARTY |
| Fleet Policy | YES |
| Policy Number | 5083187969-01 |
| Cover Note Number | |

Driver

| | |
|----------------------|--|
| Name of Driver | NG YONG JOO ROBIN ANDREW (HUANG YONGYU ROBIN ANDRE |
| NRIC No | S7400556Z |
| Date Of Birth | 03/01/1974 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 15/09/1994 |
| Driving Experience | 23 YEARS AND 5 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-83860483 |
| Fax Number | |
| Contact Number | OFFICE-83860483 |
| Email Address | NOEMAIL |

| | |
|---|----------------------------------|
| Address | BLK 310C PUNGGOL WALK #04-582 |
| Postcode | 823310 |
| 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 | CHAIN COLLISION |
| Weather Conditions | CLEAR |
| Road Surface | DRY |

Other Information

| | |
|---|-----|
| Was any foreign vehicle involved in this accident? | NO |
| Number of vehicles involved in the accident | 3 |
| Was any body injured in the Accident? | YES |
| Was any injured conveyed to hospital by ambulance? | NO |
| 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? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | PUNGGOL N.P.C |
| Police Station Address | ROAD: 21A TEBING LANE , POSTCODE: 828837 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: - FAX NO: |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

REFER TO POLICE REPORT - T/20180302/2129.

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 | YM8817T |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | COMMERCIAL VEHICLE |
| Name of Driver | |
| NRIC/Passport Number | |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |

No. Of Passenger (Including Driver)

2

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

GBF1822H

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

DETAILS OF INJURED PERSON 1

Name

NG YONG JOO ROBIN ANDREW (HUANG YONGYU ROBIN ANDRE

Approximate Age

Injuries Sustain

BACK

Injured person in which vehicle?

SLU1826A

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

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.:

Diagram 1: Central

A: SCU 1826A
B: YM 88171
C: GBF 18224

Refer to police report - 7/20180302/2129.

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

Signature

Personnel's Signature

ACCIDENT STATEMENT

ACCIDENT DATE: (2 / 3 / 18) (DD/MM/YYYY), TIME: (11 : 50) (HH:MM)

LOCATION: Along Pongal Central before junction Pongal Walk

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLV 1826A
 b) INSURANCE COMPANY: NTUC
 c) POLICY NUMBER: 5083187969-01
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL:
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Commercial
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: Kent Auto Services (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 52974332M CONTACT: 67412539
 c) ADDRESS:

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

3. DRIVER

- a) NAME: Ng Yong Joo Robin Andrew (Mang) (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 574005562 CONTACT: 87860483
 c) ADDRESS: Blk 312C Pongal Walk #04-582 (823312)

*d) DATE OF BIRTH: (3 / 1 / 1974) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 8/9/1994

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Hired

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO) - Back

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: Pongal NPC

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: YM88177 MODEL:

b) DRIVER'S NAME:

c) NRIC/FIN/PASSPORT: CONTACT:

9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: 4BF182H MODEL:

e) DRIVER'S NAME:

f) NRIC/FIN/PASSPORT: CONTACT:

* No of passenger (including d) (1)

* No of passo (including d) (2)

* No of pass (including d) (1)

KentKh530@gmail.com

Email = andrewng.yongjoo@yahoo.com

fax =



SINGAPORE POLICE FORCE



T/20180302/2129

1 of 4

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

Report No. T/20180302/2129

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|------------------|--------------------------|
| Date/Time Report Made: 02/03/2018 17:17 | Vide Report No.: | Station Diary No.: 80 |
|--|------------------|--------------------------|

Informant's Particulars

| | | | | |
|--|------------|------------------------------|---|----------------------------|
| Name of Informant: NG YONG JOO ROBIN ANDREW | | | Address: APT BLK 310C PUNGGOL WALK #04-582 SINGAPORE 823310 | |
| ID Type / ID No.: NRIC NO / S7400556Z | | | Contact No.: Home/Office: | Mobile: 83860483 |
| Nationality: SINGAPORE CITIZEN | | | Email: | |
| Sex: Male | Age: 44 | Date of Birth: 03/01/1974 | Type of Informant: Driver | |
| Race: Chinese | | | Language: | Institution / School Name: |
| Occupation: LIMO DRIVER | | | Driving Licence Information: Class: 3 Date of Expiry: | |

General Information of the Accident

| General Information of the Accident | | | | |
|---|-----------------------|---|---|--|
| Type of Accident: | Injury Hit and Run | Drink Drive: No | Date/Time of Accident: 02/03/2018 11:50 | Type of Location: Straight Road |
| Location: Along Road 1 Traveling Toward Road 2 PUNGGOL CENTRAL PUNGGOL ROAD At the traffic light of Waterway Point. | | | | |
| Weather: Clear | | Road Surface: Dry | Road Speed Limit: | |
| Traffic Flow: Dual Carriage Way | | Traffic Control: Traffic Light - Working | | Traffic Volume: Moderate |
| Type of Collision: Between Moving Vehicles - Head To Rear | | | | Anyone conveyed by ambulance: No |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|-------|------------|-------|--------|-------------------|-----------------|
| GBF1822H | Lorry | TOYOTA | Dyna | Silver | No Damage | 0 |
| SLU1826A | Car | TOYOTA | Wish | Silver | Seriously Damaged | 0 |
| YM8817T | Lorry | MITSUBISHI | Fuso | White | Slightly Damaged | 1 |

Details of Vehicle Insurance

| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
|-------------|-------------------|--------------|-----------|-------------|
|-------------|-------------------|--------------|-----------|-------------|



SINGAPORE POLICE FORCE



T/20180302/2129

2 of 4

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

Report No. T/20180302/2129

CONTINUATION OF REPORT

| Details of Vehicle Insurance | | | | |
|------------------------------|--|---------------|------------|-------------|
| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
| SLU1826A | NTUC Income Insurance Co-Operative Limited | 5083187969-01 | 29/11/2017 | 28/11/2018 |

| Details of Person Involved | | | | |
|-----------------------------------|--------------------------|-----|--|-----------------------------------|
| Any Pedestrian Involved: No | | | | |
| No. of Pedestrians Injured: NIL | | | Use of Pedestrian Crossing: NA | |
| Driver | | | | |
| Name | NG YONG JOO ROBIN ANDREW | | ID No. | S7400556Z |
| Related Vehicle | SLU1826A (Car) | | Contact No. | 83860483 |
| Hospital/Clinic | NIL | | Class of Driving Licence & Expiry Date | Class: 3 Date of Expiry: NIL |
| Date Treatment | 02/03/2018 | | Date Discharge | 02/03/2018 |
| No. of Days granted Medical Leave | | 03 | Degree of Injury | Slight |
| Driver | | | | |
| Name | Selvarajan Velmurugan | | ID No. | G6561210R |
| Related Vehicle | NIL | | Contact No. | 83863132 |
| Hospital/Clinic | NIL | | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | | Date Discharge | NIL |
| No. of Days granted Medical Leave | | NIL | Degree of Injury | NIL |

Brief Details.

On 02/03/2018 at 1150hrs, I was driving a rented vehicle Toyota Wish, silver colour, SLU1826A along Punggol Central towards Punggol Road. It was a three lane road and the traffic light was red. I had stopped my vehicle behind a lorry (A) YM8817T, Mitsubishi Fuso in the middle lane, at the traffic light.

On the same day at 1151hrs, the traffic light changed to green. As the vehicle (A) which was in front of me moved, I also accelerate. Suddenly the vehicle (A) in front of me, jammed his brake and stopped. However, I could not stop in time and collided at the rear of the vehicle (A).

The driver and the passenger of the vehicle (A) came to me and informed that there is another lorry (B) in front of their vehicle (A) which had stopped suddenly causing them to collide. The other vehicle (B) went off and had to be chased to stop. The driver of vehicle (B) informed that he had dropped some things on the road as such they stopped suddenly to pick it up but it caused an accident. The vehicle (B) GBF1822H Dyna, then left the scene.

I felt pain on my lower back and giddy while I was in my vehicle. I went to Punggol Polyclinic at about 1500hrs and to get medical treatment. The doctor gave me 3 days Medical certificate. The damages to my vehicle is on the front portion, bonnet was dented inwards, both headlights broken, radiator was



**SINGAPORE
POLICE FORCE**



T/20180302/2129

3 of 4

Report No. T/20180302/2129

Police Station Of Origin:

Punggol N.P.C

21A Tebing Lane SINGAPORE 828837

Tel No: 1800-6049999

CONTINUATION OF REPORT

damaged, front bumper dislodged from the vehicle.



**SINGAPORE
POLICE FORCE**



T/20180302/2129

4 of 4

Report No. T/20180302/2129

Police Station Of Origin:

Punggol N.P.C

21A Tebing Lane SINGAPORE 828837

Tel No: 1800-6049999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

F /

Staff Sgt AKBAR KHAN GAFFOOR

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

02/03/2018 17:17

Officer In Charge Of Case:

TP / HRT /

SI KALESWARI PALANI

Contact No.: 65476902


Classification Of Case:

Authentication Stamp

NP168



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7400556Z



Name
NG YONG JOO ROBIN ANDREW
(HUANG YONGYU ROBIN ANDREW)
黄永裕


Race
CHINESE

Date of Birth
03-01-1974

Country of Birth
SINGAPORE

Sex
M

License Number: S7400556Z



Name
NG YONG JOO ROBIN ANDREW
(HUANG YONGYU ROBIN ANDREW)

Birth Date
03 Jan 1974

Issue Date
08 Jan 2003

0000721938

3273463




NRIC No. S7400556Z

Blood Group
-

Date of issue
09-12-2002


APT BLK 310C PUNGGOL WALK #04-582
SINGAPORE 823310
NRIC No: S7400556Z
Date: 08/07/2017

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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE
15 Sep 1994

License No: S7400556Z



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

02/03/2018 11:50

Vehicle No.(For Motor)

SLU1826A

| Select | Policy No. | Policyholder Name | Policyholder NRIC | Product | Cover Type | Vehicle No. | Insured Object | Commence Date | Expiry Date |
|-----------------------|---------------|--------------------|-------------------|---------|-------------|-------------|----------------|---------------|-------------|
| <input type="radio"/> | 5083187969-01 | KENT AUTO SERVICES | 52974332M | GFT | Third Party | SLU1826A | SLU1826A | 29/11/2017 | |

 Policy Information

| | | | | | |
|-----------------------------|--|-----------------------------|--------------------|-------------------|------------------|
| Policy No. | 5083187969-01 | Policyholder Name | KENT AUTO SERVICES | Policyholder NRIC | 52974332M |
| Address | 2 KAKI BUKIT AVENUE 2 #01-21 KAKI BUKIT AUTOHUB SINGAPORE 417921 | | | | |
| Product Name | FLEET INSURANCE | Plan | | Group Policy Flag | N |
| Policy issue Date | 07/08/2017 | Effective Date | 17/08/2017 00:00 | Expiry Date | 16/08/2018 23:59 |
| Third Party Excess | 1500 | Own damage Excess | 0 | Windscreen Excess | 0 |
| Additional Excess | 0 | OS Premium | 526.96 | | |
| Outside Singapore OD Excess | 0 | Outside Singapore TP Excess | 1500 | | |
| Agent | LOMEN INSURANCE AGENCY | Agent Tel. | NIL | GST Flag | Y |
| Co-insurance Flag | No | | | | |
| Open Policy Info | | | | | |
| Certificate Info | | | | | |

 Policyholder Mailing Address

| | | | | | |
|-----------|-----------------------|-----------------------|---------------------------|-----------|------------------|
| Address 1 | 2 KAKI BUKIT AVENUE 2 | Address 2 | #01-21 KAKI BUKIT AUTOHUB | Address 3 | SINGAPORE 417921 |
| Address 4 | | Address Type | Singapore address | Post Code | 417921 |
| Unit No. | | Related Policy Number | 5097028160 | | |

 Insured Object: SLU1826A

 Endorsements

| Sequence | Date of Endorsement | Endorsement Type | Endorsement Number | Endorsement Status | Endorsement Content |
|----------|---------------------|-------------------------------|--------------------|-----------------------|--|
| 1 | 17/08/2017 00:00 | Basic Information Endorsement | null | Underwriting Rejected | <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. SLP6054D 17-08-2017 \$1,144.90 In view of this amendment, an additional premium of \$1,144.90 (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</p> |

Exit

Claim Handling

The premium on this policy has not been collected.

Accident MT/0984555

| | | | | | |
|---------------------|---|---------------------|---|----------------------|-----------|
| Policy No. | 5083187969-01 | Vehicle No. | SLU1826A | GST Registration No. | |
| Policyholder Name | KENT AUTO SERVICES | Cover Type | Third Party | Policyholder NRIC | S2974332M |
| Product Code | FLEET INSURANCE | Contact No.(Office) | 67412629 | Loading | 0 |
| Contact No.(Mobile) | 0 | Special Remark | | Contact No.(Home) | 0 |
| 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(%) | 0 | eCode Reason | |
| NCD Protection | No | | | Private Hire | Yes |

| | | | | | |
|-------------------|--|-------------------------------|-------|---------------------|-----------------|
| Report Date | 03/03/2018 16:54 | Accident Report Within 24 hrs | Yes | Accident Type | Chain Collision |
| Date of Accident | 02/03/2018 | Time of Accident (hh:mm) | 11:50 | Country of Accident | Singapore |
| Reporting Centre | | Orange Force | | ICM No. | |
| Accident Location | ALONG PUNGOL CENTRAL BEFORE JUNG PUNGOL WALK | | | | |

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

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

| | | | | | |
|-----------|-----------------------|-----------------------|---------------------------|-----------|------------------|
| Address 1 | 2 KAKI BUKIT AVENUE 2 | Address 2 | #01-21 KAKI BUKIT AUTOHUB | Address 3 | SINGAPORE 417921 |
| Address 4 | | Address Type | Singapore address | Post Code | 417921 |
| Unit No. | | Related Policy Number | 5097028180 | | |

| | | | | | |
|---|---|---------------------|-------------------|------------------------|----------------------|
| Driver Name | Unnamed Driver | Driver Type | Unnamed Driver | Driver DOB | 03/01/1974 |
| Unnamed driver Name | NG YONG JOO ROBIN ANDREW | Driver NRIC | S7400556Z | Driving Experience | 23 |
| Register Date of Driver License | 15/09/1994 | Driver Age | 44 | Contact No.(Home) | 0 |
| Contact No.(Mobile) | 83650483 | Contact No.(Office) | 0 | Address 3 | WATERWAY TERRACES II |
| Address 1 | BLK 310C | Address 2 | PUNGOL WALK | Post Code | 823310 |
| Address 4 | SINGAPORE 823310 | Address Type | Singapore address | | |
| Unit No. | 04-582 | Driver Vehicle No. | | Driver Insurer Company | |
| Does he own a Singapore Registered car? | <input type="radio"/> Yes <input checked="" type="radio"/> No | | | | |

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

Claim 001 New























| | | | | | |
|---|----------------------------------|-------------------------|----------------------------------|----------------------------|------------------|
| Claim Type * | OD-MX | Insured Name | KENT AUTO SERVICES | Insured NRIC | S2974332M |
| Contact No.(Mobile) | | Contact No.(Home) | | Contact No.(Office) | |
| Email Address | | DI Vehicle Number | SLU1826A | TP Vehicle Number | YMB817T |
| Claim Description | SLU1826A / YMB817T ON 2 Mar 2018 | | | | |
| Preferred Workshop Contact No. | | Insured Liability * | Fullly at Fault | Name of Preferred Workshop | |
| Require Finalisation | Yes | Preferred Repair Option | Preferred Workshop, Name unknown | GIA report | Received |
| Date Registered | 03/03/2018 16:56 | Claim Close Date | | Date Received | 03/03/2018 00:00 |
| Report Taken By | Jackson | | | | |
| <input checked="" type="checkbox"/> Print AK letter | | | | | |

Attachment

| | | | |
|--------------------|---|-------------|------------------|
| Accident No. | MT/0984555 | Claim No. | 001 |
| Last Doc. Received | <input checked="" type="radio"/> Yes <input type="radio"/> No | Upload Date | 03/03/2018 16:58 |

| Path * | Category * | Confidential | Urgency * | Description * |
|---|---------------|-----------------------------------|-----------|---------------|
| <input type="button" value="Browse..."/> <input type="button" value="Clear"/> | Please Select | <input type="button" value="RT"/> | Normal | |
| <input type="button" value="Browse..."/> <input type="button" value="Clear"/> | Please Select | <input type="button" value="RT"/> | Normal | |
| <input type="button" value="Browse..."/> <input type="button" value="Clear"/> | Please Select | <input type="button" value="RT"/> | Normal | |
| <input type="button" value="Browse..."/> <input type="button" value="Clear"/> | Please Select | <input type="button" value="RT"/> | Normal | |
| <input type="button" value="Browse..."/> <input type="button" value="Clear"/> | Please Select | <input type="button" value="RT"/> | Normal | |
| <input type="button" value="Browse..."/> <input type="button" value="Clear"/> | Please Select | <input type="button" value="RT"/> | Normal | |

Attachment List

| Attachment | Uploaded By/Date | Category | Urgency | Description | Msg Sent? (CO) | Action |
|---|--|-----------------------|---------|--------------------------------|----------------|----------------------|
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:58 | NRIC/ Driving License | Normal | NRIC/ Driving License 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:57 | SAS | Normal | SAS 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:57 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:57 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:57 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:57 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:57 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:57 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:57 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:57 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:57 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:57 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:57 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:57 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:56 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:56 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:56 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:56 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:56 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:56 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:56 | Photos | Normal | Photos 2018-3-3 | | Edit |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Mar 2018 16:56 | Photos | Normal | Photos 2018-3-3 | | Edit |

Video List

| Uploaded By/Date | Folder Date | File Name | Source | Action |
|------------------|-------------|---------------------------------------|------------------------------------|--------|
| | | Display in New Window | Scan and uploading | |