

NATIONAL Assessment Centre Services

(wef 1 Jan'05) MNA/1801/1670

Date In: 6/3/18-16:47	Job description	Date & Time Completed	Done by
Ref No: NA/INC1801/4322/24	SAS e-filing		
Veh No: SJ20125	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 10/2/18-20:00	i-Motor Claim Form	MT/0983129	6/3/18 17:21
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: SKK6721A	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

NA1801/445	Invoice Preparation Checklist	Ant (\$)	Ant (\$)
		1st Bill	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:-		
	ON:		
	*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		
QC Checked by (Engr-In-Charge):	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	
Auditors Comments:-			
Dat. 1:			
Dat. 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	06/03/2018 16:47
Date Of Accident	10/02/2018 20:00
Exact Location Of Accident	25 JALAN MAT JAMBOL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGJ2012S
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Insured/Policyholder

Name Of Registered Owner	YEE KIN SEONG @ CHOR KIM SEONG
NRIC No	S0601793B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96639700
Alternative Phone No	OFFICE-96639700

Vehicle Particulars

Manufacturer	NISSAN
Model	SUNNY 1.6EXA
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?	NO
If No, Please state action to be taken	REPORTING ONLY
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	5014758158-11
Cover Note Number	

Driver

Name of Driver	YEE KIN SEONG
NRIC No	S0601793B
Date Of Birth	15/02/1938
Occupation	INDOOR
Date Of Driving Pass	07/08/1958
Driving Experience	59 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96639700
Fax Number	
Contact Number	OFFICE-96639700
Email Address	NOEMAIL

Address	BLK 721 BEDOK RESERVOIR ROAD #14-4630
Postcode	470721
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	NO 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	
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)	0

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

ON THE STATED DATE AND TIME, I DID NOT WENT TO MENTIONED LOCATION YET I RECEIVED A LAWYER FROM THE THE OTHER PARTY TO NTUC INCOME. ON THE STATED DATE AND TIME, I WAS AT MY HOUSE. I WISH TO STATE THAT I ABSOLUTELY NOT INVOLVE IN THIS ACCIDENT.

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	SKK6721A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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

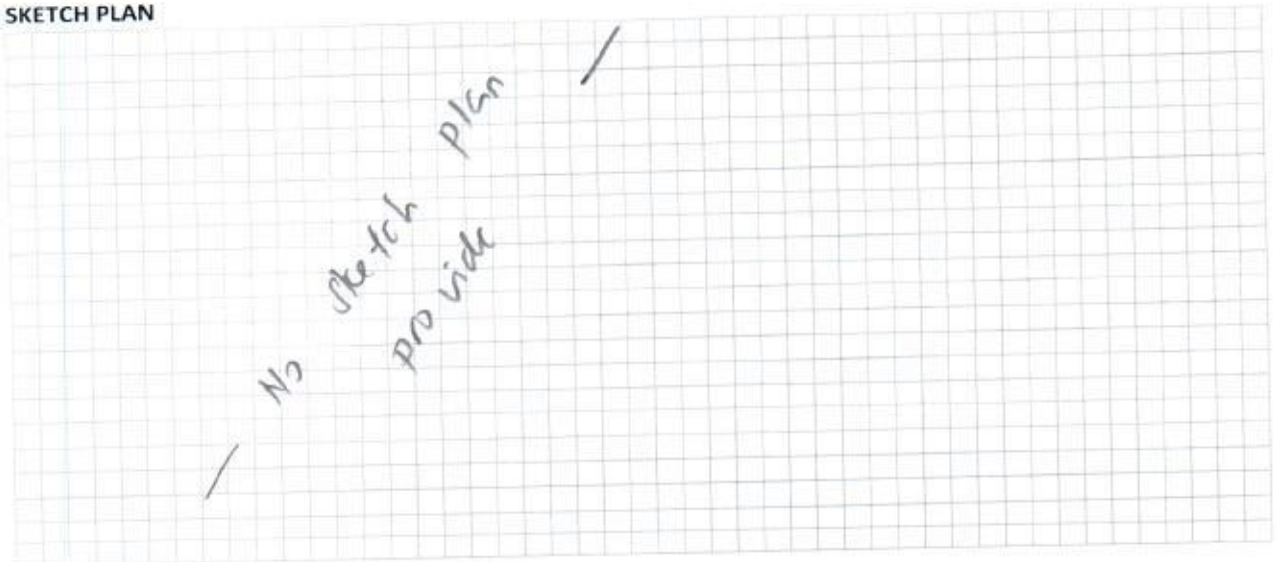

Policyholder's Signature

Date & Time: 6/3/2018
16:48

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


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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to statement.

DECLARATION

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

Policyholder's Signature

Date & Time: 6/3/2018
16:55

GA/NC SKETCH PLAN 01/11/13

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

CHIA S ARUL LLC
ADVOCATES & SOLICITORS
UEN 201330709H

ARULCHELVAN S

Our Ref : SKK 6721A (AY)

Your Ref :

21 February 2018

NTUC Income ins Co-op Ltd
73 Bras Basah Road
#05 - 01
NTUC Trade Union House
Singapore 189556

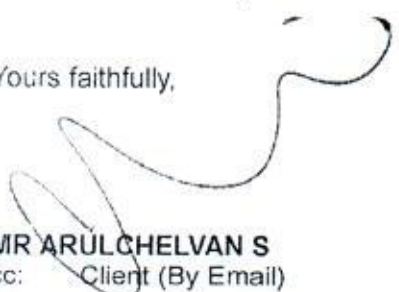
BY FACSIMILE ONLY
(Fax: 6338 1500)

Dear Sir,

RE: PROPERTY DAMAGE CLAIM
CLAIMANT : CHUA KWEE HOI
ACCIDENT INVOLVING SKK 6721A & SGJ 2012S ALONG 25 JALAN MAT
JAMBOL ON 10 FEBRUARY 2018

1. We act for CHUA KWEE HOI, the owner of motor vehicle no. SKK 6721A, which was involved in the aforesaid accident.
2. We hereby give you **NOTICE** that we are claiming against your insured motor vehicle no. SGJ 2012S for damages, costs and disbursements as a result of your insured driver's negligence.
3. Kindly let us know if you wish to conduct a pre-repair inspection on our client's motor vehicle at M/s ECO Automobile Claims and Repair Pte Ltd at 13 Kari Bukit Road 4 #03 - 29 Bartley Biz Centre Singapore 417807 and kindly arrange with Mr Alfie at 9176 5733.
4. If we do not hear from you within the next **two (2) working days**, we shall advise our client to proceed with their own inspection and repairs.

Yours faithfully,


MR ARULCHELVAN S
cc: Client (By Email)

Our Ref: MT/CA/TP/001/0983129-001/AL/VU

22 Feb 2018

YEE KIN SEONG @CHOR KIM SEONG
BLK 721 #14-4630
BEDOK RESERVOIR ROAD
SINGAPORE 470721

REMARKS

X ? : NO SUCH COR / DATE

SKW 3436H

Dear Policyholder

CLAIM NUMBER: MT/0983129-001

ACCIDENT INVOLVING SGJ2012S / SKK6721A on 10 Feb 2018

We would like to inform you that a claim has been made against your motor policy.

We need to respond to this claim within seven days. We would appreciate it if you could provide us:

- a. additional evidence, if any, such as accident photographs, video clips or witnesses' statement
- b. information on whether you are making a claim against the other party

We wish to remind you that under this motor insurance policy, you are required to report the accident, whether there is damage or not, within 24 hours or the next working day after the accident at any of our reporting centres. If you have not done so, please report this accident to us immediately. Otherwise, we regret to inform you that we may not be able to handle the claim on your behalf.

You need not respond to us if you have already reported the accident and do not have any further information.

We wish to remind you not to admit liability, make offer or payment without informing us and getting our approval. If you are making a claim against another party or have instructed your workshop or lawyers to act on your behalf, please update us on the developments. This is important as any liability undertaken by you may have serious implication on the third party claim against you, and may result in us not being able to handle the claim for you.

If you have any queries, please contact our Customer Service Officers at 6788 6616 or email us at motor@income.com.sg.

Yours sincerely



Goh Peng Hong
Manager
Motor Insurance

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number **S0601793B**
 Name
YEE KIN SEONG
 Birth Date: **15 Feb 1938**
 Issue Date: **16 Dec 2002**

000007576G



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S0601793B




Name
YEE KIN SEONG
@CHOR KIM SEONG
 俞金泉
 Race
CHINESE
 Date of Birth: **15-02-1938** Sex: **M**
 Country of Birth
SINGAPORE



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

Class	Description	Valid Until
Class 2B	Motorcycles not exceeding 200 cc	23 Oct 1981
Class 2A	Motorcycles between 201 cc and 400 cc	23 Oct 1981
Class 2	Motorcycles exceeding 400 cc	23 Oct 1981
Class 3	Motor cars and Motor Tractors the weight unladen does not exceed 2500 kg	07 Aug 1988

S0601793B S / No. **9000022017**
 Licence No. **S0601793B**



TOP 428A

1413554



NRIC No: **S0601793B**
 Blood Group: **A+** Date of issue: **08-11-1993**
 Address
APT BLK 721 BEDOK RESERVOIR ROAD
#14-4630
SINGAPORE 1647



eBaoTech

General Claim

Hello, NAC_PAYA_UBI_800601

• Change Language

• Change Password

• Log Out

My Desktop

Notice of Loss

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="10/02/2018 20:00"/>						
Vehicle No. (For Motor)	<input type="text" value="SGJ2012S"/>								
<input type="button" value="Search"/>									
Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5014758158-11	YEE KIN SEONG @CHOR KIM SEONG	S0601793B	GPC	drivo CLASSIC	SGJ2012S	SGJ2012S	03/07/2017	02/07/2018
				<input type="button" value="Continue"/>					

Claim Handling

• Exit

Accident MT/0083129











Policy No.	5014758158-11	Vehicle No.	SGJ20125	GST Registration No.	
Policyholder Name	YEE KIN SEONG @CHOR KIM SEONG	Cover Type	drive CLASSIC	Policyholder NRIC	506017938
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)		Loading	0
Contact No.(Mobile)	NA	Special Remark		Contact No.(Home)	
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	NI
KYC	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Endorsement(%)	50	eCode Reason	
NCD Protection	Yes			Private Hire	Not available
Accident Details					
Report Date	22/02/2018 09:14	Accident Report Within 24 hrs	Yes	Accident Type	Collided into Parked Vehicle
Date of Accident	10/02/2018	Time of Accident hh:mm	20:00	Country of Accident	Singapore
Reporting Centre		Grange Force		ICM No.	
Accident Location	25 JALAN MAT JAMBOL S(119505)				
Benefits					
Coverage	Sum Insured				
Excess Waiver	999999999.99				
Transport Allowance	999999999.99				
Excess					
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		
GST Registered Information					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified	Yes		
Modification History					
Policyholder Mailing Address					
Address 1	BLK 721 #14-4630	Address 2	BEDOK RESERVOIR ROAD	Address 3	SINGAPORE 470721
Address 4		Address Type	Singapore address	Post Code	470721
Unit No.		Related Policy Number	5014758158-11		
OT Driver Info					
Driver Name	Unnamed driver Name	Driver Type		Driver DOB	
Register Date of Driver License		Driver NRIC		Driving Experience	
Contact No.(Mobile)		Driver Age		Contact No.(Home)	
Address 1		Contact No.(Office)		Address 3	
Address 4		Address 2		Post Code	
Unit No.		Address Type	Foreign address		
Does he own a Singapore Registered Car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	
Modification History					

Claim 002 New

Claim Type *	OD-MX	Insured Name	YEE KIN SEONG @CHOR KIM SE	Insured NRIC	506017938
Contact No.(Mobile)	96639700	Contact No.(Home)	92069583	Contact No.(Office)	
Email Address	YBKS38@HOTMAIL.COM	OT Vehicle Number	SGJ20125	TP Vehicle Number	SKK6721A
Claim Description	SGJ20125 / SKK6721A ON 10 Feb 2018				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	06/03/2018 17:21	Claim Close Date		Date Received	06/03/2018 00:00
Report Taken By	Jackson				
<input checked="" type="checkbox"/> Print AK letter					
Save Submit					

Attachment

Accident No.	MT/0083129	Claim No.	002
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	upload Date	06/03/2018 17:22
Path *			
Browse...	Clear	Category *	Confidential
Browse...	Clear	Urgency *	Normal
Browse...	Clear	Description *	
Browse...	Clear		
Browse...	Clear		
Browse...	Clear		
Browse...	Clear		
Browse...	Clear		
Send Message Upload			
Attachment List			

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	Action
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Mar 2018 17:22	NR3C/ Driving License	Normal	NR3C/ Driving License 2018-3-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Mar 2018 17:22	SAS	Normal	SAS 2018-3-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Mar 2018 17:21	Photos	Normal	Photos 2018-3-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Mar 2018 17:21	Photos	Normal	Photos 2018-3-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Mar 2018 17:21	Photos	Normal	Photos 2018-3-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Mar 2018 17:21	Photos	Normal	Photos 2018-3-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Mar 2018 17:21	Photos	Normal	Photos 2018-3-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Mar 2018 17:21	Photos	Normal	Photos 2018-3-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Mar 2018 17:21	Photos	Normal	Photos 2018-3-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Mar 2018 17:21	Photos	Normal	Photos 2018-3-6		Edit
Video List						
	Uploaded By/Date	Folder Date	File Name	Source	Action	
<div>Display in New Window</div> <div>Scan and uploading</div>						