

NATIONAL Assessment Centre Services

Ref: Jan 05/18 NA/18036155

Date In: 16/3/18 -14:47	Job description	Date & Time Completed	Done by
Ref No: NA/INC 18005050/24	SAS e-filing		
Veh No: SLB 379E	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 16/3/18 -13:30	i-Motor Claim Form	16/3/18 18:00	
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: 61x5029B	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

NA/1801824	Invoice Preparation Checklist	Ant (\$)	Ant (\$)
Claimant's Particulars:	1) AR: Accident Reporting (\$30);	Ant Bill	Add Bill
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: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	ON*		
	*N5: Courtesy Car / Tpl 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: Idao Mobile 30		
QC Checked by (Engr-In-Charge):	Invoice dated	Fee Charged	
Auditors' Comments:	Invoice dated	Fee Charged	
Ref. 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	16/03/2018 14:47
Date Of Accident	16/03/2018 13:30
Exact Location Of Accident	AMK AVE 5 AFTER JUNC AMK IND PARK 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB379E
Insured/Policyholder	
Name Of Registered Owner	CHIA HEE KWEE
NRIC No	S1297467A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83023994
Alternative Phone No	OFFICE-83023994

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL 1.5X CVT ABS D/AIRBAG 2WD
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	5088378960
Cover Note Number	

Driver

Name of Driver	CHIA HEE KWEE
NRIC No	S1297467A
Date Of Birth	15/05/1958
Occupation	INDOOR
Date Of Driving Pass	11/10/1979
Driving Experience	38 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83023994
Fax Number	
Contact Number	OFFICE-83023994
Email Address	NOEMAIL

Address	BLK 121C SENGKANG EAST WAY #09-61
Postcode	543121
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	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	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

ON STATED DATE AND TIME, I WAS TRAVELLING ALONG AMK AVE 5 AFTER JUNC AMK IND PARK 2. SUDDENLY VEHICLE B BRAKE HIS VEHICLE. IN A RESULT, I COULDN'T BRAKE MY VEHICLE IN TIME AND HIT ONTO VEHICLE B REAR 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	GX5029B
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

SKETCH PLAN

IMPORTANT NOTICE

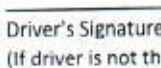
1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material 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: SLB 79E
B: GX 5029 B

ANK Ave 5

B
A

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:

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


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

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1297467A

Name: CHIA HEE KWEE

Birth Date: 15 May 1958

Issue Date: 02 Aug 2003

000709055C



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1297467A

Name: CHIA HEE KWEE

謝 錦 桂

Race: CHINESE

Date of Birth: 15-05-1958

Sex: M

Country of Birth: SINGAPORE

S1297467A




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

		PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	11 Oct 1979
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	16 Oct 1982
Class 5	Motor Vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7250 kilograms	05 Mar 1983

Licence No: S1297467A

NP 422/1

0592804

NRIC No: S1297467A

Blood Group: A+

Date of issue: 31-10-1992

APT BLK 121C SENGKANG EAST WAY #09-61
SINGAPORE 543121

NRIC No: S1297467A

Date: 01-11-2000

No: 3820424




eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI_800601

Change Language

Change Password

Log Out

My Desktop

Notice of Loss

Policy Query

Policy No. Date of Accident

Vehicle No.(For Motor)

Search

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
☐	5088378960	CHIA HEE KWEE	S1297467A	GPC	drive CLASSIC	SLB379E	SLB379E	24/03/2017	23/03/2018

Continue

 Policy Information

Policy No.	5088378960	Policyholder Name	CHIA HEE KWEE	Policyholder NRIC	S1297467A
Address	BLK 121C #09-61 SENGKANG EAST WAY SINGAPORE 543121				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	10/03/2017	Effective Date	24/03/2017 00:00	Expiry Date	23/03/2018 23:59
Third Party Excess	0	Own damage Excess	0	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	0	Outside Singapore TP Excess	0		
Agent	VINCAR PTE LTD	Agent Tel.	64741119	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

 Policyholder Mailing Address

Address 1	BLK 121C #09-61	Address 2	SENGKANG EAST WAY	Address 3	SINGAPORE 543121
Address 4		Address Type	Singapore address	Post Code	543121
Unit No.		Related Policy Number	5088378960-01		

 Insured Object: SLB379E

 Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
Continue Cancel				

Claim Handling

Exit

Accident MT/0986359

Policy No.	508378960	Vehicle No.	SLB379E	GST Registration No.	
Policyholder Name	CHIA HEE KWEE	Cover Type	drive CLASSIC	Policyholder NRIC	S1297467A
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)	0	Loading	0
Contact No.(Mobile)	83023994	Special Remark		Contact No.(Home)	0
Email Address		TCA	☒ No ☐ Yes	eCode	No
KFK	☒ No ☐ Yes	NCD Entitlement(%)	50	eCode Reason	
NCD Protection	No	Private Hire	No		

Accident Details

Report Date	16/03/2018 17:58	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	16/03/2018	Time of Accident hh:mm	13:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	AMK AVE 5 AFTER JUNC AMK IND PARK 2				

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 121C #09-61	Address 2	SENGKANG EAST WAY	Address 3	SINGAPORE 543121
Address 4		Address Type	Singapore address	Post Code	543121
Unit No.		Related Policy Number	508378960-01		

OI Driver Info

Driver Name	CHIA HEE KWEE	Driver Type	Main Driver	Driver DOB	15/05/1958
Unnamed driver Name		Driver NRIC	S1297467A	Driving Experience	38
Register Date of Driver License	11/10/1979	Driver Age	59	Contact No.(Home)	0
Contact No.(Mobile)	83023994	Contact No.(Office)	0	Address 3	SINGAPORE 543121
Address 1	BLK 121C	Address 2	SENGKANG EAST WAY	Post Code	543121
Address 4		Address Type	Singapore address		
Unit No.	09-61				
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.		Driver Insurer Company	

Declaration

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

Claim 001 New

Claim Type *	OD-MD	Insured Name	CHIA HEE KWEE	Insured NRIC	S1297467A
Contact No.(Mobile)	97857368	Contact No.(Home)	54897656	Contact No.(Office)	
Email Address		OI Vehicle Number	SLB379E	TP Vehicle Number	GX5029B
Claim Description	SLB379E / GX5029B ON 16 Mar 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault	GSA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	16/03/2018 00:00
Date Registered	16/03/2018 18:00	Claim Close Date			
Report Taken By	Jackson				
☒ Print AK letter					

Save Submit

Attachment

Accident No.	MT/0986359	Claim No.	001
Last Doc. Received	☒ Yes ☐ No	Upload Date	16/03/2018 18:01

Path *	Category *	Confidential	Urgency *	Description *
Browse... Clear Please Select	NO	Normal		
Browse... Clear Please Select	NO	Normal		
Browse... Clear Please Select	NO	Normal		
Browse... Clear Please Select	NO	Normal		
Browse... Clear Please Select	NO	Normal		

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? Action (CO)
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 16 Mar 2018 18:01	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-3-16	Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 16 Mar 2018 18:01	SAS	Normal	SAS 2018-3-16	Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 16 Mar 2018 18:01	Photos	Normal	Photos 2018-3-16	Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 16 Mar 2018 18:01	Photos	Normal	Photos 2018-3-16	Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 16 Mar 2018 18:01	Photos	Normal	Photos 2018-3-16	Edit
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 16 Mar 2018 18:00	Photos	Normal	Photos 2018-3-16	Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 16 Mar 2018 18:00	Photos	Normal	Photos 2018-3-16	Edit
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 16 Mar 2018 18:00	Photos	Normal	Photos 2018-3-16	Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 16 Mar 2018 18:00	Photos	Normal	Photos 2018-3-16	Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 16 Mar 2018 18:00	Photos	Normal	Photos 2018-3-16	Edit

Video List

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

ASSIGNMENT (IDAC)By CSO- Nature of Accident:

- 1) Vehicle hit Vehicle: 2) Vehicle hit ??
- a) Motorcar () a) Pedestrian ()
- b) M/cycle () b) Animal ()
- c) Bicycle ()
- 3) Vehicle hit Road Side Objects:
- a) Govn. Property () b) Road Work Object ()
- (Eg: signboard, barrier, trees 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

* Owner continue driving after reporting.

- Car in for damaged assessment on 20/3/2018 at _____ am.

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: SLB 379 E Yr Regn: 24 Mar 2016

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

Make & Model: Honda Vezel 1.5X c.c. 1496

Colour: Blue Transmission Type: Auto / Manual

Eng/No: _____ Sp. Reading: 34227

C/No: RUI 111035 1

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

Steering: Order / Jammed / Leaked / Burnt or

Brake: Order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 215/60 R16

R: _____

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

Front		Rear	
R/Bal. <u>5</u> mm		R/Bal. <u>6</u> mm	
L/Bal. <u>5</u> mm		L/Bal. <u>6</u> mm	

Parallel Import: Yes / No

Towed-In: Yes / No

Repair Type: LS / I.B.I

Towing Required: Yes / No

No of Repair Days: 7

Vehicle in Idac: Yes / No

D.O.I. 20/3/2018

Time: 9.10 am.

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. Govn Object () g. Road Work Object ()
- h. Private Property () i. Drain () j. Road Kerb/Grass Verge ()

3) Vehicle does not seem damaged as a result of:

- a. Fallen Object () b. Flood () c. Vandalism () d. Fire ()
- e. Moving Object () f. Stolen () g. Stolen & Recovered ()

Time Started:

Time completed:

1) CSO

2) ASS

3) Entire Operation Completed Time:

MOTOR CAR (Frt)

Front Portion

NAC	INC	Item	CON	AC	Qty
1001	991886	Frt Number Plate	DD	✓	
1002	991887	Frt Number Plate Base	BR	✓	
1003	991889	Frt Number Plate Garnish			
1004	991300	Frt Bumper	DD	✓	
1005	992341	Frt Bumper Clips	NEC	✓	6
1006	991325	Frt Bumper Bracket			
1007	991462	Frt Bumper Side Retainer	DIS	✓	
1008	991433	Frt Bumper Reinforcement	BT	✓	
1009	991318	Frt Bumper Beam			
1010	991468	Frt Bumper Sponge	GRA	✓	
1011	991427	Frt Bumper Protector			
1012	991420	Frt Bumper <i>Tow Hook Cover</i>	DIS	✓	
1013	991363	Frt Bumper Grille	DS	✓	
1014	991301	Frt Bumper Moulding			
1015	991407	Frt Bumper Lower Spoiler	CUT	✓	
1016	991438	Frt Bumper Sensor			
1017	995100	Frt LH Bumper Fog Lamp Cover	GRA	✓	
1018	991355	Frt RH Bumper Fog Lamp Cover			
1019	995079	Frt LH Bumper Fog Lamp	GRA	✓	
1020	995080	Frt RH Bumper Fog Lamp			
1021	991793	Frt Grille	GRA	✓	
1022	991328	Frt Grille Emblem	CUT	✓	
1023	991799	Frt Grille Chrome Moulding	SCR	✓	
1024	991222	Frt Apron Panel			
1025	992013	Frt Support Panel	BT	✓	
1026	992025	Frt Support Panel Top Garnish Cover	DS	✓	
1027	992416	Horn			
1028	991277	Frt Brace Panel			
1029	995153	Frt LH Headlamp Assy	GRA	✓	
1030	991821	Frt RH Headlamp Assy	GRA	✓	
1031	995088	Frt LH Side Lamp			
1032	995089	Frt RH Side Lamp			
1033	990248	Bonnet	Buck	✓	
1034	991328	Bonnet Emblem			
1035	990287	Bonnet Lock	BT	✓	
1036	990285	Bonnet Insulator	BT	✓	
1037	990273	Bonnet Hinge	BT	✓	2
1038	990261	Bonnet Damper			
1039	990305	Bonnet Rubber			
1040	990252	Bonnet Cable			
1041	990311	Bonnet Stand			
1042	990119	Air Con Condenser	BT	✓	
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	BT	✓	
1057	992757	Radiator Hose Bottom			
1058	992741	Radiator Expansion Tank			
1059	990151	Air Duct	CUT	✓	
1060	990070	Air Cleaner Assy			
1061	990056	Air Cleaner Hose			
1062	990089	Air Cleaner Resonator			
1063	991712	Frt Exhaust Manifold			
1064	991713	Frt Exhaust Manifold Cover			
1065	991054	Frt Exhaust Manifold Sensor (Oxygen)			
1066	991714	Front Exhaust Pipe			
1067	990219	Battery			
1068	990224	Battery Cover			
1069	990223	Battery Bracket			
1070	990229	Battery Tray			

Vehicle No: **SLB 379 E**

NAC	INC	Item	CON	AC	Qty
1071	992205	Fuse Box			
1072	994011	Relay Box			
1073	995053	Wiper Washer Tank			1
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			1
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			SCR R
1097	995072	Frt LH Fender Inner Panel			
1098	995147	Frt LH Fender Lamp			
1099	995148	Frt LH Fender Protector			1
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			SCR R
1106	991739	Frt RH Fender Inner Panel			
1107	991744	Frt RH Fender Lamp			
1108	991752	Frt RH Fender Protector			1
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			DIS
1123	991126	Firewall Panel			
1124	990753	Dashboard Assy			
1125	992282	Glove Box Cover			
1126	992281	Glove Box Compartment			
1127	994463	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	991923	Frt RH Seat Belt Assy			
1134	991899	Frt Passenger Seat			
1135	995182	Frt LH Seat Belt Assy			
1136	990247	Sticker			

Claim Handling

[Task Transfer](#) [Exit](#)
[LOS](#) [SAL](#) [SUB](#)

Accident MT/0986359

Policy No.	5088378900	Vehicle No.	SLB379E	GST Registration No.	
Policyholder Name	CHIA HEE KWEE	Cover Type	drive CLASSIC	Policyholder NRIC	S1297467A
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)	0	Loading	0
Contact No.(Mobile)	83023994	Special Remark		Contact No.(Home)	0
Email Address		TCA	☒ No ☐ Yes	eCode	N/A
KPK	☒ No ☐ Yes	ICD Entitlement(%)	50	eCode Reason	
NCD Protection	No			Private Hire	No
Accident Details		Accident Report Within 24 hrs		Accident Type	Collision - Head to Rear
Report Date	16/03/2018 17:58	Time of Accident hh:mm		Country of Accident	Singapore
Date of Accident	16/03/2018	Orange Force	No	ICM No.	
Reporting Centre	NATIONAL ASSESSMENT CENTR				
Accident Location	AMK AVE 5 AFTER JUNC AMK IND PARK 2				
Benefits					
Coverage		Sum Insured	999999999.99		
Excess Waiver			999999999.99		
Transport Allowance					
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 121C #09-61	Address 2	SENGKANG EAST WAY	Address 3	SINGAPORE 543121
Address 4		Address Type	Singapore address	Post Code	543121
Unit No.		Related Policy Number	5088378960-01		
OT Driver Info					
Driver Name	CHIA HEE KWEE	Driver Type	Main Driver	Driver DOB	15/05/1958
Unnamed driver Name		Driver NRIC	S1297467A	Driving Experience	38
Register Date of Driver License	11/10/1979	Driver Age	59	Contact No.(Home)	0
Contact No.(Mobile)	83023994	Contact No.(Office)	0	Address 3	SINGAPORE 543121
Address 1	BLK 121C	Address 2	SENGKANG EAST WAY	Post Code	543121
Address 4		Address Type	Singapore address		
Unit No.	09-61	Driver Vehicle No.		Driver Insurer Company	
Does he own a Singapore Registered car?	☐ Yes ☒ No				
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	☐ Yes ☒ No		
Modification History					

Investigation					
Claim 001 OD-MD					
Claim Case Officer Yap Chee Ling					
Claim Type	OD-MD	Insured Name	CHIA HEE KWEE	Insured NRIC	S1297467A
Contact No.(Mobile)	97557368	Contact No.(Home)	64897656	Contact No.(Office)	
Email Address		OT Vehicle Number	SLB379E	TP Vehicle Number	GX50298
Claim Description	SLB379E / GX50298 ON 16 Mar 2018	Name of Preferred Workshop			
Preferred Workshop Contact No.		Insured Liability	Fully at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	20/03/2018 12:04
Date Registered	16/03/2018 18:02	Claim Close Date		Total Loss but Repaired	
Report Taken By	Jackson	Workshop Repairer			
☒ Print AK letter					
Modification History					

Special Claim Creation Approval					
Approval	Reason				
Remarks					
damage assessment Attachment					
Vehicle Info					
Vehicle Make	HONDA	Vehicle Model	VEZEL	Engine Capacity	1495
Date of Registration	24/03/2016	Class No.	RU11110351	Parallel Import *	☒ Yes ☐ No
Towing Required *	☒ Yes ☐ No	Vehicle in IDAC *	☒ Yes ☐ No	Survey Current Status	
Type of Tender *	Own Damage	Assessor Name *	SIMON		

IDAC/Workshop Name	NATIONAL ASSESSMENT CENTRE	IDAC/Workshop Location	51 UBI AVENUE 1 #01-25 PAYA
Windscreens Parts & Labour Cost		Total Loss *	☐ Yes ☒ No
Market Value(\$)		Scrap Value(\$)	
		Economical Repair Value(\$)	
Remark	REMARK: NO OF REPAIR DAY: 7 DAYS. 1 X FRT BUMPER TOW HOOK COVER - REPLACE. 1 X FRT BUMPER LOWER SPOILER - REPLACE. 1 X FRT GRILLE CHROME MOULDING - REPLACE. 1 X FRT SUPPORT PANEL TOP GARNISH COVER - REPLACE. 1 X AIR CON SUCTION PIPE (LOW PRESSURE) - UNCONFIRM. 1 X AIR CON DISCHARGE PIPE (HIGH PRESSURE) - UNCONFIRM. 1 X AIR CON LIQUID PIPE - UNCONFIRM. 1 X AIR DUCT - REPLACE. 1 X AIR CLEANER ASSY - UNCONFIRM. 1 X WIPER WASHER TANK - UNCONFIRM. 1 X FRT LH FENDER WHEEL ARCH PROTECTOR - UNCONFIRM. 1 X FRT RH FENDER WHEEL ARCH PROTECTOR - UNCONFIRM.		

Damage Listing									
Find a Part	No.	Part No.	Description	Qty *	Repair Code *				
1000									
Not Applicable	1	32200101	NUMBER PLATE (FRONT)	1	Replace				X
ABS	2	32200201	NUMBER PLATE BASE (FRONT)	1	Replace				X
ABSORBER			BUMPER (FRONT)	1	Replace				X
ACCELERATOR	3	16000101	BUMPER CLIPS (FRONT)	6	Replace				X
ACTUATOR	4	16002401	BUMPER RETAINER (FRONT LEFT)	1	Replace				X
ADVERTISEMENT STICKER	5	16005101	BUMPER RETAINER (FRONT RIGHT)	1	Replace				X
AIR BAG	6	16005102	BUMPER REINFORCEMENT (FRONT)	1	Replace				X
AIR BLOWER	7	16005901	BUMPER SPONGE (FRONT)	1	Replace				X
AIR BOX	8	16005901	BUMPER GRILLE (FRONT)	1	Replace				X
AIR CHAMBER BOX	9	16003201	BUMPER FOG LAMP COVER (FRONT LEFT)	1	Replace				X
AIR CLEANER	10	16002901	BUMPER FOG LAMP COVER (FRONT RIGHT)	1	Unconfirm				X
AIR COMPRESSOR	11	16002902	BUMPER FOG LAMP (FRONT LEFT)	1	Replace				X
AIR CON	12	16002701	BUMPER FOG LAMP (FRONT RIGHT)	1	Unconfirm				X
AIR CON (VAN)	13	16002702	GRILLE (FRONT)	1	Replace				X
AIR COOLER	14	27100101	GRILLE EMBLEM (FRONT)	1	Replace				X
AIR DISTRIBUTOR	15	27100801	SUPPORT PANEL (FRONT)	1	Replace				X
AIR FILTER	16	41300101	HORN (LEFT)	1	Unconfirm				X
AIR FLOW	17	28500101	BRACE PANEL (FRONT)	1	Unconfirm				X
AIR GRILLE	18	15600101	HEAD LAMP (LEFT)	1	Replace				X
AIR HORN	19	27700101	HEAD LAMP (RIGHT)	1	Replace				X
AIR INTAKE	20	27700102	BONNET	1	Replace				X
AIR RESONATOR BOX	21	149001	BONNET LOCK (LOWER)	1	Replace				X
AIR THROTTLE BODY AND SENSOR	22	14903401	BONNET INSULATOR	1	Replace				X
ALARM	23	149029	BONNET HINGE (LEFT)	1	Replace				X
ALTERNATOR	24	14902201	BONNET HINGE (RIGHT)	1	Replace				X
ALUMINIUM PANEL - SIDE	25	14902202	BONNET RUBBER (CENTRE)	1	Unconfirm				X
AMPLIFIER	26	149041	AIR CON CONDENSER	1	Replace				X
ANTENNA	27	112023	AIR CON FAN	1	Unconfirm				X
ANTI ROLL	28	112060	RADIATOR	1	Unconfirm				X
APRON	29	344001	RADIATOR COWLING	1	Unconfirm				X
ARCH	30	344005	RADIATOR FAN	1	Unconfirm				X
ARM REST	31	344008	RADIATOR FAN CLUTCH	1	Unconfirm				X
ASH TRAY	32	344011	RADIATOR HOSE (TOP)	1	Replace				X
AUTO CLUTCH	33	34402802	RADIATOR HOSE (BOTTOM)	1	Unconfirm				X
AUTO COOLER PIPE	34	34402801	RADIATOR EXPANSION TANK	1	Unconfirm				X
AUTO CRUISE MOTOR	35	344007	BATTERY	1	Unconfirm				X
AUTO TRANSMISSION	36	141001	ENGINE LOWER COVER	1	Unconfirm				X
AXLE	37	243014	FENDER (FRONT LEFT)	1	Repair				X
BACK REST (MC)	38	25400102	FENDER (FRONT RIGHT)	1	Repair				X
BACK SEAT	39	25400103	WIPER PANEL GARNISH	1	Replace				X
BALANCE	40	454009							
BATTERY									
BEADING (MC)									
BELT COVER (MC)									
BELT TENSIONER									
BODY									
BODY (MC)									
BOLT CAP (MC)									
BOLT HEAD COVER (MC)									
BONNET									
BOOT									
BOX (MC)									
BOX BRACKET (MC)									
BOX CARRIER (MC)									
BOX DOOR									
BOX STICKER (MC)									
BRACE PANEL									
BRAKE									
BRAKE - ABS									
BRAKE - ABS									

Save Submit

LKK Paya Ubi

From: Ng Hak Joo <hakjoo.ng@income.com.sg>
Sent: Thursday, 22 March 2018 2:53 PM
To: city auto
Cc: LKK Paya Ubi
Subject: MT/0986359-001, VEHICLE NUMBER: SLB379E

Importance: High

Dear Ms Yvonne

We spoke, please tow this vehicle from Idac and contact owner Mr Chia Hee Kwee at 83023994 when the vehicle arrived at your workshop, as he requested to expedite repair ASAP in view that his prefer unable to accept our offer for the 2 days delay,

Excess waiver and TA applicable.

Our Ref: MT/CA/OD/051/0986359-001/NHJ
22 Mar 2018
CITY AUTO PTE LTD
BLK 8 #01-58TO66
SIN MING INDUSTRIAL EST SECTOR C
SINGAPORE 575643

Dear Sir

CLAIM NUMBER: MT/0986359-001

REPAIR OF VEHICLE NUMBER: SLB379E

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

Award Date: 22 Mar 2018

Make: HONDA

Model: VEZEL

Estimated Repair Days: 7

Location: NATIONAL ASSESSMENT CENTRE SERVICES

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

Benefits Applicable: Transport Allowance and Excess Waiver

Excess Applicable: 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.

Yours sincerely

Low Choo Mee

Senior Manager

Motor Insurance

Ng Hak Joo
Claims Executive, Motor Insurance
T +65 6430 7890
www.income.com.sg



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



Vehicle Movement Form

Vehicle Check-In

Vehicle No: SLB379E Date In: _____ Time In: _____ with Keys: Yes / No

For Office use

Attended by: _____

Workshop Collection of Vehicle

Workshop: City Auto

Collection Date: 22/3/18 Time: 1620 with Keys: Yes / No

Tow Truck No: YP2817S Tow Man: LOH YING KHAM NRIC: 58918037F

Signature: [Signature] 96662762

For office use

Attended by: Jackson

Approved by: _____

Workshop Return of Vehicle

Workshop: _____

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

* Tow In / Drive In

Tow Man / Workshop Representative: _____ NRIC: _____

Signature: _____

For office use

Attended by: _____

Owner Collection of Vehicle

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

Owner: _____ NRIC: _____

Signature: _____

For office use

Attended by: _____

Approved by: _____