

# NATIONAL Assessment Centre Services

[wef 1 Jan 05] MNA18042947

Date In: 31/3/18-12:55	Job description	Date & Time Completed	Done by
Ref No: NA1802031 06/24	SAS e-filing		
Veh No: SKA671K	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 29/3/18-16:00	i-Motor Claim Form	MT/0988354	31/3/18 14:07
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: SW48444	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

Claimant's Particulars :-	Invoice Preparation Checklist	Am't (\$) In Bill	Am't (\$) Add Bill
Driver/Owner:	1) AR : Accident Reporting (\$30);		
Contact No:	2) DA : Damage Assessment (\$100); INC (\$80)		
Damaged Portion:	3) TF : Towing Fee \$40/\$45		
	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:-		
	OD:		
QC Checked by (Engr-In-Charge):	*N5: Courtesy Car / Tpl Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
Auditors' Comments :-	TP (N11) : TP (Non INC) against INC \$20		
Dat. 1:	9) N12: Idac Mobile 30		
Dat. 2 / 3:	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	



## 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	31/03/2018 12:55
Date Of Accident	29/03/2018 16:00
Exact Location Of Accident	ALONG PUNGGOL FIELD BEFORE JUNC PUNGGOL PLACE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKA6701K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN WEIQIANG MARK
NRIC No	S8327783A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90290044
Alternative Phone No	OFFICE-90290044

### Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA3 1.6L SDN
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	5059417083-05
Cover Note Number	

### Driver

Name of Driver	TAN WEIQIANG MARK (CHEN WEIQIANG,MARK)
NRIC No	S8327783A
Date Of Birth	08/09/1983
Occupation	INDOOR
Date Of Driving Pass	01/03/2004
Driving Experience	14 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90290044
Fax Number	
Contact Number	OFFICE-90290044
Email Address	NOEMAIL

Address	288C PUNGGOL PLACE #11-835
Postcode	823288
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)	2
Passenger 1	NAME: : - GENDER: : FEMALE

#### 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 PUNGGOL FIELD. I DID NOT NOTICED THAT VEHICLE B WAS STATIONARY WAITING THE TRAFFIC LIGHT TURN GREEN. IN A RESULT, I COULDN'T BRAKE MY VEHICLE IN TIME AND HIT ONTO VEHICLE B REAR PORTION. AFTER AN IMPACT, MY VEHICLE IU FOR THE CASH CARD IS NOT WORKING.

#### 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	SLV4844Y
Vehicle Make/Model/Colour	TOYOTA C-HR
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TEO CHEE KIONG
NRIC/Passport Number	S7281051A
Contact Number	81573805
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:

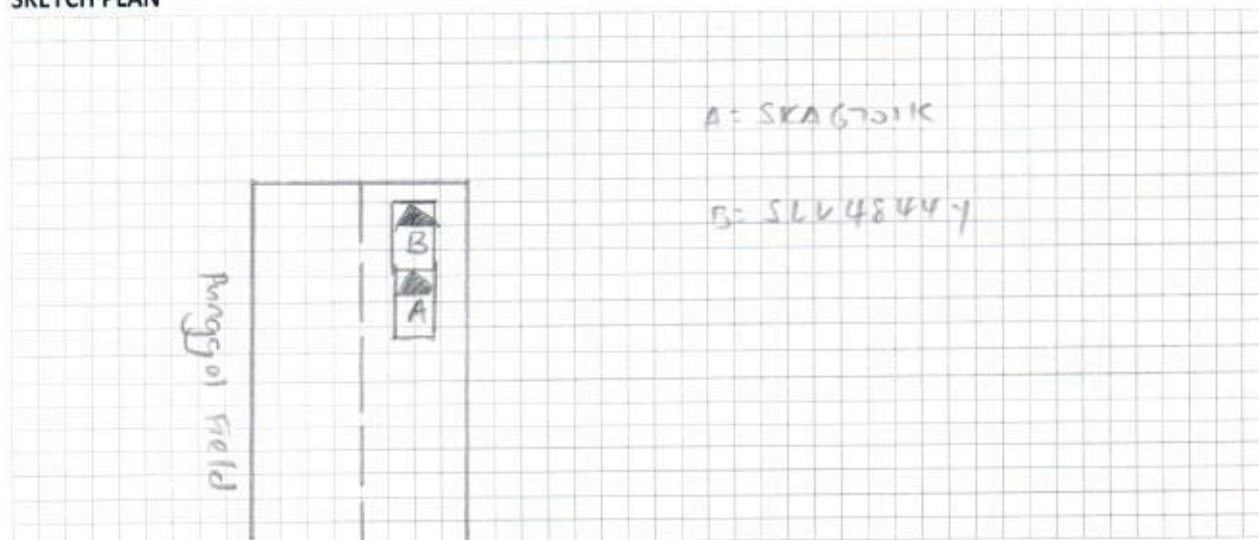
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**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



## 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.:



# ACCIDENT STATEMENT

ACCIDENT DATE: 29/03/2018 (DD/MM/YYYY), TIME: 16:00 (HH:MM)

LOCATION: PUNGOL FIELD

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SKA 6701 K  
 b) INSURANCE COMPANY: NIC income  
 c) POLICY NUMBER: 5059417083-05  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: MAZDA 3  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: PERSONAL USE  
 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: TAN WEI DIANG MARIC (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S8327783A CONTACT: 90290044  
 c) ADDRESS: 288C PUNGOL PLACE #11-835  
(S) 823288

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## 3. DRIVER

- a) NAME: \_\_\_\_\_ (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
 c) ADDRESS: \_\_\_\_\_

\*d) DATE OF BIRTH: 08/09/1983 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 14

## 4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/ NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: \_\_\_\_\_

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

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

## 6. WAS ANYBODY INJURED (YES/ NO)

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

IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: SLV 4844 Y MODEL: TOYOTA C-HR

b) DRIVER'S NAME: TEO CHEE KIONG

c) NRIC/FIN/PASSPORT: S7281051A CONTACT: 81573805

## 9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_

e) DRIVER'S NAME: \_\_\_\_\_

f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

\* No of passenger (including d) (2)

\* No of passenger (including d) (1)

\* No of passenger (including d) (-)

email =

fax =

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S8327783A**

Name  
**TAN WEIQIANG, MARK**  
(CHEN WEIQIANG, MARK)

Birth Date **08 Sep 1983**

Issue Date **01 Mar 2004**

001144003A




REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8327783A**

Name  
**TAN WEIQIANG, MARK**  
(CHEN WEIQIANG, MARK)

陈伟强

Race  
**CHINESE**

Date of birth  
**08-09-1983**

Sex  
**M**

Country/Place of birth  
**SINGAPORE**





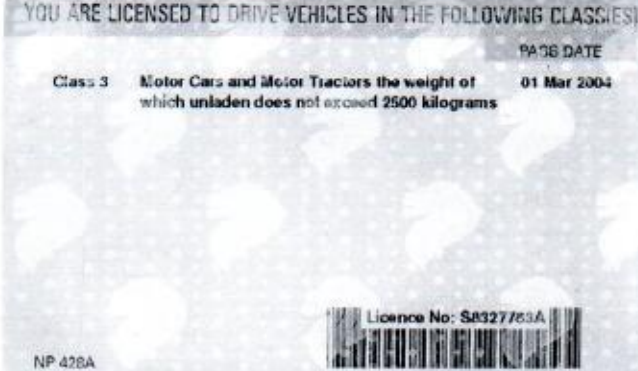
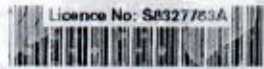

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

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

ISSUE DATE  
**01 Mar 2004**

Licence No: **S8327783A**

NP 428A

5231697

NRIC No. **S8327783A**

Date of issue  
**23-10-2013**

Address  
**288C PUNGGOL PLACE**  
**#11-835**  
**SINGAPORE 823288**






eBaoTech

GeneralClaim

Hello, NAC\_PAYA\_UB1\_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"/>	5059417083-05	TAN WEIQIANG MARK	S8327783A	GPC	drive CLASSIC	SKA6701K	SKA6701K	27/01/2018	26/01/2019

## ▼ Policy Information

Policy No.	5059417083-05	Policyholder Name	TAN WEIQIANG MARK	Policyholder NRIC	S8327783A
Address	BLK 288C #11-835 PUNGGOL PLACE SINGAPORE 823288				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	17/01/2018	Effective Date	27/01/2018 00:00	Expiry Date	26/01/2019 23:59
Third Party Excess	0.0	Own damage Excess	600.0	Windscreen Excess	100.0
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	600.0	Outside Singapore TP Excess	0.0		
Agent	HIGH POWER ENTERPRISE	Agent Tel.	NIL	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

## ▼ Policyholder Mailing Address

Address 1	BLK 288C #11-835	Address 2	PUNGGOL PLACE	Address 3	SINGAPORE 823288
Address 4		Address Type	Singapore address	Post Code	823288
Unit No.		Related Policy Number	5059417083-05		

## ► Insured Object: SKA6701K

## ▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
----------	---------------------	------------------	--------------------	---------------------

Continue

Cancel



## Claim Handling

EXIT

Accident MT/D988354

Policy No.	5059417083-05	Vehicle No.	SKA6701K	GST Registration No.	
Policyholder Name	TAN WEIQIANG MARK	Cover Type	drive CLASSIC	Policyholder NRIC	S8327783A
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)	0	Loading	0
Contact No.(Mobile)	90290044	Special Remark		Contact No.(Home)	0
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	<input type="text" value="N"/>
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	40	eCode Reason	
NCD Protection	No			Private Hire	No

**Accident Details**

Report Date	31/03/2018 14:05	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	29/03/2018	Time of Accident Hh:mm	16:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG PUNGOL FIELD BEFORE JUNC PUNGOL PLACE				

**Benefits**

Own Damage Excess	600.00	Additional Excess	0.00	Windscreen Excess	100.00
Uninsured Driver Excess	0.00	Outside Singapore OD Excess	600.00		
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 288C #11-835	Address 2	PUNGOL PLACE	Address 3	SINGAPORE 823288
Address 4		Address Type	Singapore address	Post Code	823288
Unit No.		Related Policy Number	5059417083-05		

**OI Driver Info**

Driver Name	TAN WEIQIANG MARK	Driver Type	Main Driver	Driver DOB	08/09/1983
Unnamed driver Name		Driver NRIC	S8327783A	Driving Experience	14
Register Date of Driver License	01/03/2004	Driver Age	34	Contact No.(Home)	0
Contact No.(Mobile)	90290044	Contact No.(Office)	0	Address 3	SINGAPORE 823288
Address 1	BLK 288C	Address 2	PUNGOL PLACE	Post Code	823288
Address 4		Address Type	Singapore address		
Unit No.	11-835				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Declaration

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

Modification History

Claim 001 New

Claim Type *	OD-MD	Insured Name	TAN WEIQIANG MARK	Insured NRIC	S8327783A
Contact No.(Mobile)		Contact No.(Home)		Contact No.(Office)	
Email Address		OI Vehicle Number	SKA6701K	TP Vehicle Number	SLV4844Y
Claim Description	SKA6701K / SLV4844Y ON 29 Mar 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Income to assign workshop	Date Received	31/03/2018 00:00
Date Registered	31/03/2018 14:07	Claim Close Date			
Report Taken By	Jackson				

☒ Print AK letter

Save Submit

## Attachment

Accident No.	MT/D988354	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	31/03/2018 14:11

File *	Category *	Confidential	Urgency *	Description *
<input type="text" value="Browse..."/> <input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>	<input type="text" value=""/>
<input type="text" value="Browse..."/> <input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>	<input type="text" value=""/>
<input type="text" value="Browse..."/> <input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>	<input type="text" value=""/>
<input type="text" value="Browse..."/> <input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>	<input type="text" value=""/>
<input type="text" value="Browse..."/> <input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>	<input type="text" value=""/>
<input type="text" value="Browse..."/> <input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>	<input type="text" value="Normal"/>	<input type="text" value=""/>

Attachment List

31/3/2018



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) Govrn. 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 informationRemarks 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: SKA 6701 K Yr Regn: 26 Jan 2010

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

Make & Model: Mazda 3 1.6 L c.c. 1598

Colour White Transmission Type: Auto / Manual

Eng/No: \_\_\_\_\_ Sp. Reading: 102457

C/No: DM6BL10Z1A012R672

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: 205/55 R16  
R: \_\_\_\_\_

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

Front		Rear	
R/Bal.	<u>7</u> mm	R/Bal.	<u>8</u> mm
L/Bal.	<u>7</u> mm	L/Bal.	<u>8</u> mm

Parallel Import: Yes No

Repair Type: LS / I.B.I

No of Repair Days: 6

D.O.I. 2/4/2018

Towed-In: Yes / No

Towing Required: Yes / No

Vehicle in Idac: Yes / No

Time: 9.35pm

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. Govrn 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 Person

NAC	INC	Item	CON	AC	Qty
1001	991886	Frt Number Plate	BT	✓	
1002	991887	Frt Number Plate Base	BT	✓	
1003	991889	Frt Number Plate Garnish			
1004	991300	Frt Bumper	DD	✓	
1005	992341	Frt Bumper Clips	WES	✓	6
1006	991325	Frt Bumper Bracket			
1007	991462	Frt Bumper Side Retainer			
1008	991433	Frt Bumper Reinforcement	BT	✓	2
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	ORT	✓	
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	CUT	✓	
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	CRA	✓	
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	990210	Battery			
1068	990224	Battery Cover			
1069	990223	Battery Bracket			
1070	990229	Battery Tray			

Vehicle No: SKA 6701 K

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			
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	CRA	✓	
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	89 C	✓	
1106	991739	Frt RH Fender Inner Panel	BT R	✓	
1107	991744	Frt RH Fender Lamp			
1108	991752	Frt RH Fender Protector			
1109	991740	Frt RH Fender Inner Shield	CRA	✓	
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			
		Frt OPC No. Plate Seal	NEC	✓	



# Claim Handling

Task Transfer Exit

LOS SAL SUB

## Accident MT/0988354

Policy No.	S059417083-05	Vehicle No.	SKA6701K	GST Registration No.	
Policyholder Name	TAN WEIQIANG MARK			Policyholder NRIC	S8327783A
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No. (Mobile)	90290044	Contact No. (Office)	0	Contact No. (Home)	0
Email Address		Special Remark		eCode	No
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	40	Private Hire	No
<b>Accident Details</b>					
Report Date	31/03/2018 14:05	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	29/03/2018	Time of Accident hh:mm	16:00	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	ICM No.	
Accident Location	ALONG PUNGGOL FIELD BEFORE JUNG PUNGGOL PLACE				
<b>Benefits</b>					
<b>Excess</b>					
Own damage Excess	600.00	Additional Excess	0.00	Windscreen Excess	100.00
Uninsured Driver Excess	0.00	Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		
<b>GST Registered Information</b>					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified	Yes		
Modification History					

## Policyholder Mailing Address

Address 1	BLK 28BC #11-835	Address 2	PUNGGOL PLACE	Address 3	SINGAPORE 823288
Address 4		Address Type	Singapore address	Post Code	823288
Unit No.		Related Policy Number	S059417083-05		

## OT Driver Info

Driver Name	TAN WEIQIANG MARK	Driver Type	Main Driver	Driver DOB	08/09/1963
Unnamed driver Name		Driver NRIC	S8327783A	Driving Experience	14
Register Date of Driver License	01/03/2004	Driver Age	34	Contact No. (Home)	0
Contact No. (Mobile)	90290044	Contact No. (Office)	0	Address 3	SINGAPORE 823288
Address 1	BLK 28BC	Address 2	PUNGGOL PLACE	Post Code	823288
Address 4		Address Type	Singapore address		
Unit No.	11-835				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

## Declaration

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

Modification History

## Investigation

### Claim 001 OD-MD

LOS SAL SUB

## Claim Case Officer Yap Chee Ling

Claim Type	OD-MD	Insured Name	TAN WEIQIANG MARK	Insured NRIC	S8327783A
Contact No. (Mobile)		Contact No. (Home)		Contact No. (Office)	
Email Address		OT Vehicle Number	SKA6701K	TP Vehicle Number	SLV4844Y
Claim Description	SKA6701K / SLV4844Y ON 29 Mar 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability	Fully at Fault		
Require Finalisation	Yes	Preferred Repair Option	Income to assign workshop	GIA report	Received
Date Registered	31/03/2018 14:13	Claim Close Date		Date Received	02/04/2018 10:21
Report Taken By	Tackson	Workshop Repairer		Total Loss but Repaired	
<input checked="" type="checkbox"/> Print AIC letter					

Modification History

## Special Claim Creation Approval

Approval	Reason
Remarks	

## damage assessment Attachment

## Vehicle Info

Vehicle Make	MAZDA	Vehicle Model	3	Engine Capacity	
Date of Registration	26/01/2010	Class No.	JM6BL10Z1A012B672	Parallel Import *	<input type="radio"/> Yes <input checked="" type="radio"/> No
Towing Required *	<input checked="" type="radio"/> Yes <input type="radio"/> No	Vehicle in IDAC *	<input checked="" type="radio"/> Yes <input type="radio"/> No	Survey Current Status	
Type of Tender *	Own Damage	Assessor Name *	SIMON		
IDAC/Workshop Name	NATIONAL ASSESSMENT CENTR	IDAC/Workshop Location	51 UBI AVENUE 1 #01-25 PAVA		
Windscreen Parts & Labour Cost		Total Loss *	<input type="radio"/> Yes <input checked="" type="radio"/> No		
Market Value(\$)		Scrap Value(\$)		Economical Repair Value(\$)	

REMARK: NO OF REPAIR DAY: 6 DAYS. 1 X AIR CON SUCTION PIPE (LOW PRESSURE) - UNCONFIRM. 1 X FRT OPC NO PLATE SEED - REPLACE.

Remark

## Damage Listing

Find a Part	No.	Part No.	Description	Qty *	Repair Code *	
Not Applicable	1	32200101	NUMBER PLATE (FRONT)	1	Replace	X
ABS	2	32200201	NUMBER PLATE BASE (FRONT)	1	Replace	X
ABSORBER	3	16000101	BUMPER (FRONT)	1	Replace	X
ACCELERATOR	4	16002401	BUMPER CLIPS (FRONT)	6	Replace	X
ACTUATOR	5	16005101	BUMPER RETAINER (FRONT LEFT)	1	Unconfirm	X
ADVERTISEMENT STICKER	6	16005102	BUMPER RETAINER (FRONT RIGHT)	1	Unconfirm	X
AIR BAG	7	16005001	BUMPER REINFORCEMENT (FRONT)	1	Replace	X
AIR BLOWER	8	16005901	BUMPER SPONGE (FRONT)	1	Unconfirm	X
AIR BOX	9	16003201	BUMPER GRILLE (FRONT)	1	Replace	X
AIR CHAMBER BOX	10	16002901	BUMPER FOG LAMP COVER (FRONT LEFT)	1	Unconfirm	X
AIR CLEANER	11	16002902	BUMPER FOG LAMP COVER (FRONT RIGHT)	1	Unconfirm	X
AIR COMPRESSOR	12	27100101	GRILLE (FRONT)	1	Replace	X
AIR CON	13	12900301	APRON PANEL (FRONT)	1	Unconfirm	X
AIR CON (VAN)	14	41300101	SUPPORT PANEL (FRONT)	1	Unconfirm	X
AIR COOLER	15	27700101	HEAD LAMP (LEFT)	1	Unconfirm	X
AIR DISTRIBUTOR	16	27700102	HEAD LAMP (RIGHT)	1	Replace	X
AIR FILTER	17	14903401	BONNET LOCK (LOWER )	1	Unconfirm	X
AIR FLOW	18	112023	AIR CON CONDENSER	1	Unconfirm	X
AIR GRILLE	19	344001	RADIATOR	1	Unconfirm	X
AIR HORN	20	344005	RADIATOR COWLING	1	Unconfirm	X
AIR INTAKE	21	344008	RADIATOR FAN	1	Unconfirm	X
AIR RESONATOR BOX	22	454012	WIPER WASHER TANK	1	Unconfirm	X
AIR THROTTLE BODY AND SENSOR	23	454014	WIPER WASHER TANK MOTOR	1	Unconfirm	X
ALARM	24	25400901	FENDER INNER SHIELD (FRONT LEFT)	1	Replace	X
ALTERNATOR	25	25400103	FENDER (FRONT RIGHT)	1	Replace	X
ALUMINIUM PANEL - SIDE	26	25400802	FENDER INNER PANEL (FRONT RIGHT)	1	Repair	X
AMPLIFIER	27	25400902	FENDER INNER SHIELD (FRONT RIGHT)	1	Replace	X
ANTENNA						
ANTI ROLL						
APRON						
ARCH						
ARM REST						
ASH TRAY						
AUTO CLUTCH						
AUTO COOLER PIPE						
AUTO CRUISE MOTOR						
AUTO TRANSMISSION						
AXLE						
BACK REST (MC)						
BACK SEAT						

Save Submit



## LKK Paya Ubi

---

**From:** Yap Chee Ling <CheeLing.Yap@income.com.sg>  
**Sent:** Monday, 2 April 2018 4:31 PM  
**To:** Chew Goon - Admin; Chew Goon Motor(ad3); Chew Goon Motor - Mrs Chew; 'LKK Paya Ubi'  
**Subject:** SKA6701K | MT/0988354 (Awarding Letter to Chew Goon)  
**Importance:** High

Hi IDAC and Chew Goon,

Vehicle is currently in IDAC.

Excess of \$600 is applicable.

Please liaise with the owner – Mr Mark Tan Weiqiang at tel: 9029 0044 on the necessary.

\*\* To check if the IU is working fine.

Thank you.

**Yap Chee Ling (Ms)**  
Claims Executive  
Motor Insurance  
T +65 6430 7893  
[www.income.com.sg](http://www.income.com.sg)



---

Our Ref: MT/CA/OD/051/0988354-001/YCL

02 Apr 2018

CHEW GOON MOTOR  
BLK 10 AMK IND PARK 2A AVE 5  
#01-15, 16 & 17 AMK AUTOPOINT  
SINGAPORE 568047

Dear Sir

**CLAIM NUMBER: MT/0988354-001**  
**REPAIR OF VEHICLE NUMBER: SKA6701K**

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

follows:

Award Date: 02 Apr 2018

Make: MAZDA

Model: 3

Estimated Repair Days: 6

Location: NATIONAL ASSESSMENT CENTRE SERVICES

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

Benefits: Not applicable

Excess Applicable: 600

Please note that supplementary items will not be allowed.

If you have any queries, please contact Yap Chee Ling at 6430-7893 or email us at [motor@income.com.sg](mailto:motor@income.com.sg).

Yours sincerely

Low Choo Mee  
Senior Manager  
Motor Insurance

---

#### Disclaimer

This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.



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: SKA6701K Date In: \_\_\_\_\_ Time In: \_\_\_\_\_ with Keys: Yes / No

*For Office use*

Attended by: \_\_\_\_\_

Workshop Collection of Vehicle

Workshop: Chew Hoon

Collection Date: 3/4/18 Time: 0930 with Keys: Yes / No

Tow Truck No: Ynyase Tow Man: Romul NRIC: 99043537/E

Signature: [Signature]

97297337

*For office use*

Attended by: Shan Hui

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: \_\_\_\_\_