

NATIONAL Assessment Centre Services

Date In: 23/04/18	Job description	Date & Time Completed	Done by
Ref No: NA/INC18007460/12	SAS e-filing		
Veh No: SJF468J	E-mail (within 8hrs, AP: 2hrs)		
D.O.A: 21/04/18 2155	i-Motor Claim Form	07/0991689-001	
OD: TP Reporting Only	i-Motor W/O (Within: OI: 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: (	TWINCAR	Tel:	Fax:
TP Particulars:	Veh No: SKS4107U	INC () / Non-INC ()	
Owner / Driver: (		Tel:	
Policy No: (	Period: (	Cover Type: (
Confirmed by: (	Date:	Time:	
Insured/Driver Liability: (	% [Note-Est. Status (WO): N: 0-20%; P: 21-79%; F: 80-100%]		
Year of Registration: (	Warranty: YES () / NO ()		
Excess: (\$	Loading: \$1,000 () / \$2,000 ()		

General Remarks:-

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co. ()

Remarks:- (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

NA/802523	Invoice Preparation Checklist	Ant (\$) 1st Bill	Ant (\$) Add Bill
Claimant's Particulars :-	1) AR: Accident Reporting (\$30);		
	2) DA: Damage Assessment (\$100); INC (\$80)		
	3) TF: Towing Fee \$40/\$45		
	4) FT: Follow-Through Survey \$120		
	5) RT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) NI: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
QC Checked by (Engr-In-Charge):	Q1:		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
Auditors' Comments :-	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (Non INC) against INC \$20		
	9) N12: Idac Mobile \$0		
Cat. 1:	Invoice dated	Fee Charged	
Cat. 2 / 3:	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	23/04/2018 17:11
Date Of Accident	21/04/2018 21:55
Exact Location Of Accident	HOUGANG AVE 7 TWDS TAMP RD INFRT OF RIO CASS CONDO
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJF468J
Insured/Policyholder	
Name Of Registered Owner	SHIN-HAN LIMO SERVICES
Co Reg No	53315973C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-98575910

Vehicle Particulars

Manufacturer	TOYOTA
Model	ALTIS
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5086951265-01
Cover Note Number	

Driver

Name of Driver	MOHAMMAD FAIZUL BIN ZULKEPLEE
NRIC No	S7709264A
Date Of Birth	05/04/1977
Occupation	OUTDOOR
Date Of Driving Pass	29/11/2000
Driving Experience	17 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96805037
Fax Number	
Contact Number	
Email Address	NOEMAIL

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.

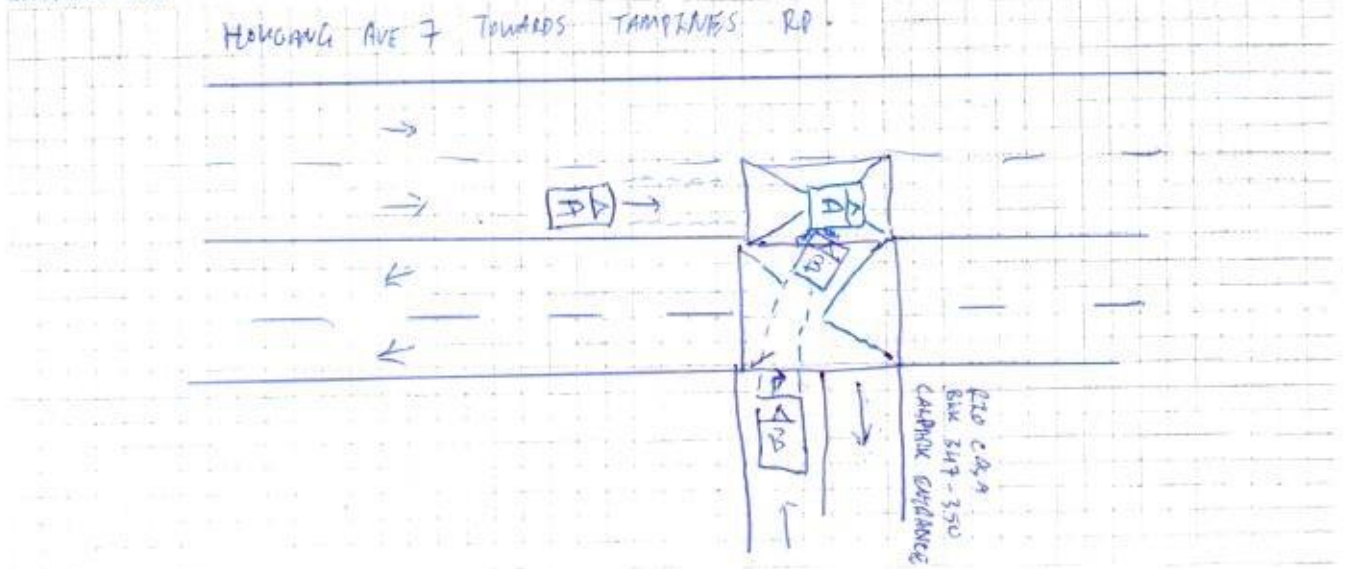


Policyholder's Signature
Date & Time:

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

As per police report No. T/20180422/20424.

DECLARATION

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.:

Vehicle No.	SJF 468 J	Model / Make	TOYOTA ALTIS
Date of Accident	21/04/18		
Time of Accident	9:55 P.M	HRS	
Location of Accident	HOUGANG AVE 7 TOWARDS TANJONG RD IN FRONT OF RED CASA ESTATE		
Exact purpose use during accident	Working hour		
Name of Owner	SHEN-HAN LIM SERVICES		
Telephone No.	H/P : 9857 5910	Home :	Office :
NRIC	53315973C		
Address	43 SPRINGSIDE WALKS (786628)		
Claim type	OD	THIRD PARTY	REPORTING ONLY
Insurance Company	NTUC		
Type of Coverage	Comprehensive	Third Party	Third Party / Fire / Theft
Policy No.	5086951265-01		
Name of Driver	As Above If No, MOHAMMAD FAZUL BIN ZULKERLEE		
NRIC	S7709264D	Any Passengers : NZL	
Date of birth	05/04/1977		
Occupation	Outdoor / Indoor		
Driving License Pass Date	29/11/2000		
Gender	Male / Female		
Contact No.	H/P : 9680 5037	Home :	Office :
Address	APT BLK 603B PUNGGOL ROAD #05-714 S (822603)		
Driver have any own vehicle	No, If yes, Reg No.		
Relationship	Employee, If no, state	HIRE	
Weather condition	Clear Raining Other		
Road Surface	Dry Wet Other		
Any Injuries	No, If Yes, Who?		
Name And Contact No.	MOHAMMAD FAZUL BIN ZULKERLEE		
Name And Contact No.			
Police Report	No, If Yes, Where?	SENGKANG N.P.C	
Vehicle B No.	SKS 4107 V	Any Passengers : NZL	
Name of Driver	SLM SEE LENG	Contact No. : 974 88678	
Vehicle C No.		Any Passengers :	
Vehicle D No.		Any Passengers :	
Vehicle E No.		Any Passengers :	
Vehicle F No.		Any Passengers :	
Vehicle G No.		Any Passengers :	
Witness Name		Witness Contact :	
Accident Portion	RIGHT REAR PORTION.		
Camera Recorder	Yes / No		
Email Address	ajunfaiz@gmail.com		
PARTICULAR WORKSHOP	TWINCAR AUTOMOTIVE PTE LTD		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	JUN MING		
FAX NO	6741 0510		
WORKSHOP EMAIL ADDRESS	sales@n5i.com.sg		



SINGAPORE POLICE FORCE



T/20180422/2044

1 of 3

Police Station of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Report No. T/20180422/2044

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/04/2018 12:45	Vide Report No.:	Station Diary No.: 39
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Informant's Particulars

Name of Informant: MOHAMMAD FAIZUL BIN ZULKEPLEE			Address: APT BLK 603B PUNGGOL ROAD #05-714 SINGAPORE 822603	
ID Type / ID No.: NRIC NO / S7709264A			Contact No.: Home/Office: Mobile: 96805037	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 41	Date of Birth: 05/04/1977	Type of Informant: Driver	
Race: Malay			Language:	Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 21/04/2018 21:55	Type of Location: Straight Road
Location: Along Road 1 HOUGANG AVENUE 7				
Along Hougang Avenue 7, Entrance/Exit of Rio Cass Condominium				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJF468J	Car	TOYOTA	Altis	Grey	Slightly Damaged	0
SKS4107U	Car	NISSAN		Black	Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA
No. of Pedestrians Injured: NIL	



SINGAPORE POLICE FORCE



T/20180422/2044

2 of 3

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Report No. T/20180422/2044

CONTINUATION OF REPORT

Driver			
Name	MOHAMMAD FAIZUL BIN ZULKEPLEE	ID No.	S7709264A
Related Vehicle	SJF468J (Car)	Contact No.	96805037
Hospital/Clinic	My Family Clinic	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	22/04/2018	Date Discharge	22/04/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	Sim See Leng	ID No.	S7234923G
Related Vehicle	NIL	Contact No.	97488678
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 the above mentioned date, time and location, I was driving my rental vehicle bearing the registration plate number SJF 468J (Toyota, Altis, Grey in colour) along Hougang Avenue 7. While traveling near to the Entrance/Exit of Rio Cass condominium, suddenly a vehicle bearing the registration plate number SKS4107U (Nissan, Black in colour) which was exiting from Rio Cass Condominium collided to the right rear of my vehicle. The driver and I then alighted from our vehicle and exchange particulars and also checked that there were no visible injuries found on us. After which, we then left the place. I wish to state that there dents and scratches on the right rear of my vehicle (Right above my Right rear tire).

On the same day about 2230hrs, I suffered some pain on my back and the back of my neck area. As such, I then visited a family clinic located at B/301 Punggol Central #01-02 Singapore 820301, and the doctor had given me 3 days of MC from 22/04/2018 to 24/08/2018. I am lodging this report for insurance claimed. That is all.



**SINGAPORE
POLICE FORCE**



T/20180422/2044

3 of 3

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Report No. T/20180422/2044

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 /

Sgt 1 TENG WEI KANG

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SI DZUL HAIRIE BIN RAMLI

Contact No.: 65476220

Signature Of Informant:

Date/Time:

22/04/2018 12:45

Classification Of Case:

SN 085

Authentication Stamp
NP168



Signature:

Singapore Police Force

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7709264A**

Name: **MOHAMMAD FAIZUL BIN ZULKEPLEE**

Birth Date: **05 Apr 1977**

Issue Date: **23 Oct 2007**

1001538305C



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7709264A

Name: **MOHAMMAD FAIZUL BIN ZULKEPLEE**

Race: **MALAY**

Date of birth: **05-04-1977**

Sex: **M**

Country of birth: **SINGAPORE**

S7709264A




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

Class 3 Motor Cars=<3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg

PASS DATE: **29 Nov 2000**

NP.428A

Licence No: **S7709264A**

4158401

NRIC No: **S7709264A**

11-01-2008

APT BLK 603B PUNGGOL ROAD #05-714
SINGAPORE 822603

NRIC No: **S7709264A**

Date: **24/11/2011 (R)**




Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5086951265-01 **Cover :** drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SJF468J**
Chassis Number : **MR053ZEE106108823**

2. Name of Policyholder : **SHIN-HAN LIMO SERVICES**

3. Effective Date of Insurance : **09 Nov 2017**

4. Expiry Date of Insurance : **08 Nov 2018**

5. Persons or Classes of Persons entitled to drive#
(a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his/her permission.
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover
(a) Use for racing, pace-making, reliability trial or speed-testing.
(b) Use for the carriage of goods (other than samples) in connection with any trade or business.
(c) Use for any purpose in connection with the Motor Trade.
Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : **HOBBS INSURANCE AGENCY (00000572363)**
Date of Issue : **11 Oct 2017 10:00 hrs**

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Enquire Transfer Fee

Vehicle Details

Vehicle No.	SJF468J
Vehicle Type	Z10 - Private Hire (Chauffeur) Motor Car
Vehicle Attachment 1	No Attachment
Vehicle Scheme	Normal
Vehicle Make	TOYOTA
Vehicle Model	COROLLA ALTIS 1.6 AUTO
Chassis No.	MR053ZEE106108823
Propellant	Petrol
Engine No.	3ZZ4766673
Engine Capacity	1598 cc
Maximum Power Output	80.0 kW (107 bhp)
Maximum Laden Weight	1630 kg
Unladen Weight	1195 kg
Year Of Manufacture	2008
Original Registration Date	15 May 2008
Lifespan Expiry Date	-
COE Category	A - Car (1600cc & below)
Quota Premium	\$11,009.00
COE Expiry Date	14 May 2018
Road Tax Expiry Date	14 May 2018
PARF Eligibility Expiry Date	14 May 2018
Inspection Due Date	14 May 2019
Intended Transfer Date	21 Nov 2017
CO2 Emission	-

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

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

Amount Payable

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee	11.00	-	11.00
Total Amount Payable			11.00

Claim Handling

The premium on this policy has not been collected.

Accident MT/0991689

Policy No.	5086951265-01	Vehicle No.	SJF468J	GST Registration No.	
Policyholder Name	SHIN-HAN LIMO SERVICES	Cover Type	drive CLASSIC	Policyholder NRIC	53315973C
Product Code	FLEET INSURANCE	Contact No.(Office)	0	Loading	0
Contact No.(Mobile)	98575910	Special Remark		Contact No.(Home)	0
Email Address		TCA	No Yes	eCode	No
KFK	No Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No			Private Hire	Yes

▼ Accident Details

Report Date	24/04/2018 16:15	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	21/04/2018	Time of Accident hh:mm	21:55	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	HOUGANG AVE 7 TWO5 TAMP RD INFRT OF RIO CASS CONDO				

▼ Benefits

▼ Excess					
Own damage Excess	2,000.00	Additional Excess	0.00	Windscreen Excess	1
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		

▼ GST Registered Information

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

▼ Policyholder Mailing Address

Address 1	43 SPRINGSIDE WALK	Address 2	SINGAPORE 786628	Address 3	
Address 4		Address Type	Singapore address	Post Code	786628
Unit No.		Related Policy Number	5097882815		

▼ O1 Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	05/04/1977
Unnamed driver Name	MOHAMMAD FAIZUL BIN ZULKEI	Driver NRIC	S7709264A	Driving Experience	17
Register Date of Driver License	29/11/2000	Driver Age	41	Contact No.(Home)	0
Contact No.(Mobile)	96805037	Contact No.(Office)	0	Address 3	PUNGGOL LODGE
Address 1	BLK 603B	Address 2	PUNGGOL ROAD	Post Code	822603
Address 4	SINGAPORE 822603	Address Type	Singapore address		
Unit No.	#05-714				
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 OD-MX **New**

Claim Type *	OD-MX	Insured Name	SHIN-HAN LIMO SERVICES	Insured NRIC	53315973C
Contact No.(Mobile)	98575910	Contact No.(Home)		Contact No.(Office)	
Email Address		O1 Vehicle Number	SJF468J	TP Vehicle Number	SKS4107U
Claim Description	SJF468J / SKS4107U ON 21 Apr 2018			Name of Preferred Workshop	TWINCAR
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop (refer below)	Date Received	24/04/2018 00:00
Date Registered	24/04/2018 16:21	Claim Close Date		Total Loss but Repaired	
Report Taken By	ROSILINDA	Workshop Repairer			

✓ Print AK letter

Save Submit

Attachment

Accident No.	MT/0991689	Claim No.	001
Last Doc. Received	Yes No	Upload Date	24/04/2018 00:00
Path *		Category *	Confidential Urgency *
Choose File No file chosen		Clear Please Select	NO Normal
Choose File No file chosen		Clear Please Select	NO Normal
Choose File No file chosen		Clear Please Select	NO Normal

4/24/2018

Claim Handling(accident reporting Claim Task 001 OD-MX)

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Message Read

Clear	Please Select	NO	Normal	
Clear	Please Select	NO	Normal	
Clear	Please Select	NO	Normal	

Sen

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Apr 2018 16:21	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Apr 2018 16:21	SAS	Normal	SAS 2018-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Apr 2018 16:21	Photos	Normal	Photos 2018-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Apr 2018 16:21	Photos	Normal	Photos 2018-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Apr 2018 16:21	Photos	Normal	Photos 2018-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Apr 2018 16:21	Photos	Normal	Photos 2018-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Apr 2018 16:21	Photos	Normal	Photos 2018-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Apr 2018 16:21	Photos	Normal	Photos 2018-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Apr 2018 16:21	Photos	Normal	Photos 2018-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Apr 2018 16:21	Photos	Normal	Photos 2018-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Apr 2018 16:21	Photos	Normal	Photos 2018-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Apr 2018 16:21	Photos	Normal	Photos 2018-4-24

Video List

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