

NATIONAL Assessment Centre Services

Ref: 1 Jan 2005 MNA 118-55251

Date In: 27/4/18 11:07	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NA/INC18007754164	E-mail (within 5hrs, AIC 2hrs)		
Veh No: SLC 3102L	i-Motor Claim Form	MT/0992192-001	27/4/18 10:13
D.O.A: 26/4/18 18:20	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
OD: TP: Reporting Only	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: SHA 4695 M.	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

Claimant's Particulars:-	Invoice Preparation Checklist	Ant (\$)	Ant (\$)
Driver/Owner:		1st Bill	Add Bill
Contact No:	1) AR: Accident Reporting (\$30);	30.00	
Damaged Portion:	2) DA: Damage Assessment (\$100); INC (\$80)		
QC Checked by (Engr-In-Charge):	3) TP: 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:-		
	QD*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$3		
	TP (N11): TP (Non INC) against INC \$20		
	9) N12: Idac Mobile \$0		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	
Auditors' Comments:-			
Lat 1:			
Lat 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	27/04/2018 11:07
Date Of Accident	26/04/2018 18:20
Exact Location Of Accident	VIVO CITY DROP OFF POINT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC3102L
Insured/Policyholder	
Name Of Registered Owner	E-CUBE VEHICLE RENTAL PTE LTD
Co Reg No	201607761H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-83681881

Vehicle Particulars

Manufacturer	HONDA
Model	STREAM
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5088017748-01
Cover Note Number	-

Driver

Name of Driver	HO KAH WENG
NRIC No	S8576147A
Date Of Birth	18/01/1985
Occupation	INDOOR
Date Of Driving Pass	29/07/2013
Driving Experience	4 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96330827
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 8 MAR THOMA RD #01-03
Postcode	328689
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	DRIZZLING
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : LIM BEE SING
	GENDER: : MALE

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

I WAS DRIVING AT THE VIVO CITY DROP OFF POINT, WHEN SUDDENLY A TAXI WHICH WAS INFRONT OF ME STOP, I MANAGE MY BRAKE BUT CANNOT STOP IN TIME AND HIT ONTO THE TAXI 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	SHA4645M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	TAN LIAN HUAT @THAM LIAN HUAT
NRIC/Passport Number	S1100521G
Contact Number	83173564
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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.

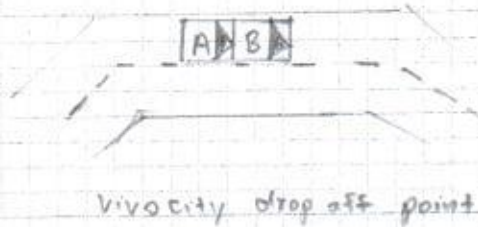


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



A= SLG 31021

B= SHA 4695M

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please 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.:

Personal Particulars

Date of Accident: 26/04/18 Time of Accident: 1830 HRS

Exact Location of Accident: VINO CITY DROP-OFF POINT

Owner's Name: E-CUBE VEHICLE RENTAL PTE LTD NRIC No: 201607761H HP No: _____

Driver's Name: HO KAH WENG NRIC No: S8576147A *HP No: 9633 0827

Date of Birth: 18/01/1985 Driving Licence Passing Date: 29/07/13 Occupation: Indoor / Outdoor

*Driver Address: ~~BEK MAR TH~~ 101 UPPER CROSS STREET #06-01, PEOPLE'S PARK CENTRE S(058357)

Relationship of Driver with Insured: HIRER Email Address: ISAFEGARAGE@gmail.com

Vehicle No: SLC3102L Make & Model: HONDA STREAM

Insurance Co: NTUC Coverage: _____ Policy No: 5088017748-01

*Purpose of Reporting? Own Damage Claim / 3rd Party Claim / Not Claiming, Just Reporting Only

*Exact Purpose of The Vehicle Was Being Used At Time Of Accident: Private Use / Work

*Weather Condition? Clear / Raining / Others: Drizzling Wet / Dry / Others: _____

*Any passenger inside vehicle involved? (Yes / No) If yes, Vehicle No & How many pax:

(MALE)
A: LIM BEE SING B: _____ C: _____ D: _____

*Conveyed to hospital? (Yes / No)

*Was Anybody Injured? (Yes / No) If yes,

Name / NRIC / In Vehicle: _____

*Was The Accident Reported To The Police?

☒ No ☐ Yes, Which Police Station? _____

*Does the Driver Own Any Other Vehicle?

☒ No ☐ Yes, Vehicle Registration No: _____ Insurer: _____

*Was any foreign vehicle involved? (Yes / No) If yes, Vehicle No & Category: _____

*Was there any video captured by Car Camera? (Yes / No)

Third Party Driver's Particulars

Vehicle B No: SHA4645M Make & Model: _____

Driver's Name: TAN LIAN HUAT @ THAM LIAN HUAT NRIC No: S1100521A HP No: 8317 3564

Vehicle C No: _____ Make & Model: _____

Driver's Name: _____ NRIC No: _____ HP No: _____

Witness Particulars

Name: _____ NRIC No: _____ HP No: _____

Passenger Particulars (Vehicle A):

Name: LIM BEE SING

Gender: MALE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait of a man

License Number: S8576147A

Name: HO KAH WENG

Birth Date: 18 Jan 1985

Issue Date: 29 Jul 2013

Barcode: 0022075248

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8576147A

Portrait of a man

Name: HO KAH WENG

何家榮

Race: CHINESE

Date of birth: 18-01-1985

Country of birth: MALAYSIA

Sex: M

88576147A

30
5
96330827

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

	EFFECTIVE DATE
Class 2B Motorcycles <= 200 cc	29 Jul 2013
Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg	29 Jul 2013

NP 428A

Barcode

License No: S8576147A

8851751

Barcode

NRIC No: S8576147A

Nationality: MALAYSIAN

Date of issue: 30-07-2008

APT BLK 8 MAR THOMA ROAD #01-03
SINGAPORE 328689

S8576147A 11/06/2013

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: 5088017748-01

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SLC3102L**
 Chassis Number : JHMRN68809S200963
2. Name of Policyholder : E-CUBE VEHICLE RENTAL PTE LTD
3. Effective Date of Insurance : 17 Mar 2018
4. Expiry Date of Insurance : 16 Mar 2019
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\$2,000
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	: UNITED OVERSEAS BANK LIMITED
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 : TAN INSURANCE BROKERS PTE LTD (00000690287)
 Date of Issue : 29 Jan 2018 14:31 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

The premium on this policy has not been collected.

Accident MT/0992192

Policy No.	5088017748-01	Vehicle No.	SLC3102L	GST Registration No.	
Policyholder Name	E-CUBE VEHICLE RENTAL PTE LTD			Policyholder NRIC	201607761H
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	83681881	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No ▼
KFK	<input type="radio"/> No <input checked="" type="radio"/> Yes	TCA	<input type="radio"/> No <input checked="" type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes

Report Date	28/04/2018 09:56	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	26/04/2018	Time of Accident hh:mm	18:20	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	VIVO CITY DROP OFF POINT				

Excess	1,000.00	Additional Excess	0.00	Windscreen Excess	100.00
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Own damage Excess	1,000.00	Additional Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess	3,000.00
Third Party Excess	1,500.00	Outside Singapore TP Excess	3,000.00

Registration Number	Name	GST Registration Date
06AABAA78901234567890	M/S ABC COMPANY PVT LTD	15-07-2018
06BBAAB12345678901234	MRS XYZ	20-08-2019
06CBAAC56789012345678	MR PQR	10-09-2020
06DBAAC90123456789012	M/S DEF COMPANY PVT LTD	05-10-2021
06EBAAE34567890123456	MR GHI	25-11-2022
06FBAAF78901234567890	M/S JKL COMPANY PVT LTD	15-12-2023
06GBAAG12345678901234	MRS MNO	01-01-2024
06HBAAI56789012345678	MR STU	10-02-2024
06IBAAJ90123456789012	M/S VWX COMPANY PVT LTD	20-03-2024
06JBAAK34567890123456	MRS YZA	05-04-2024
06KBAAO78901234567890	MR BCD	15-05-2024
06LBAAQ12345678901234	M/S EFG COMPANY PVT LTD	25-06-2024
06MBAAU56789012345678	MRS HIJ	05-07-2024
06NBAAW90123456789012	MR KLM	15-08-2024
06OBAAZ34567890123456	M/S NOP COMPANY PVT LTD	25-09-2024
06PBAAA78901234567890	MRS QRS	05-10-2024
06QBAAA12345678901234	MR TUV	15-11-2024
06RBAAA56789012345678	M/S WXY COMPANY PVT LTD	25-12-2024
06SBAAA90123456789012	MRS ZAB	05-01-2025
06TBAAA34567890123456	MR CDE	15-02-2025
06UBAAA78901234567890	M/S FGH COMPANY PVT LTD	25-03-2025
06VBAAB12345678901234	MRS IJK	05-04-2025
06WBAAD56789012345678	MR LMN	15-05-2025
06XBAAH90123456789012	M/S OPQ COMPANY PVT LTD	25-06-2025
06YBAAJ34567890123456	MRS RST	05-07-2025
06ZBAAL78901234567890	MR UVW	15-08-2025
06ABAAO12345678901234	M/S XYZ COMPANY PVT LTD	25-09-2025
06BBAAU56789012345678	MRS ABC	05-10-2025
06CBAAW90123456789012	MR DEF	15-11-2025
06DBAAZ34567890123456	M/S GHI COMPANY PVT LTD	25-12-2025
06EBAAA78901234567890	MRS JKL	05-01-2026
06FBAAA12345678901234	MR MNO	15-02-2026
06GBAAA56789012345678	M/S PQR COMPANY PVT LTD	25-03-2026
06HBAAA90123456789012	MRS STU	05-04-2026
06IBAAA34567890123456	MR VWX	15-05-2026
06JBAAA78901234567890	M/S YZA COMPANY PVT LTD	25-06-2026
06KBAAA12345678901234	MRS ABC	05-07-2026
06LBAAA56789012345678	MR DEF	15-08-2026
06MBAAA90123456789012	M/S GHI COMPANY PVT LTD	25-09-2026
06NBAAA34567890123456	MRS JKL	05-10-2026
06OBAAA78901234567890	MR MNO	15-11-2026
06PBAAA12345678901234	M/S PQR COMPANY PVT LTD	25-12-2026
06QBAAA56789012345678	MRS STU	05-01-2027
06RBAAA90123456789012	MR VWX	15-02-2027
06SBAAA34567890123456	M/S YZA COMPANY PVT LTD	25-03-2027
06TBAAA78901234567890	MRS ABC	05-04-2027
06UBAAA12345678901234	MR DEF	15-05-2027
06VBAAA56789012345678	M/S GHI COMPANY PVT LTD	25-06-2027
06WBAAA90123456789012	MRS JKL	05-07-2027
06XBAAA34567890123456	MR MNO	15-08-2027
06YBAAA78901234567890	M/S PQR COMPANY PVT LTD	25-09-2027
06ZBAAA12345678901234	MRS STU	05-10-2027
06ABAAA56789012345678	MR VWX	15-11-2027
06BBAAA90123456789012	M/S YZA COMPANY PVT LTD	25-12-2027
06CBAAA34567890123456	MRS ABC	05-01-2028
06DBAAA78901234567890	MR DEF	15-02-2028
06EBAAA12345678901234	M/S GHI COMPANY PVT LTD	25-03-2028
06FBAAA56789012345678	MRS JKL	05-04-2028
06GBAAA90123456789012	MR MNO	15-05-2028
06HBAAA34567890123456	M/S PQR COMPANY PVT LTD	25-06-2028
06IBAAA78901234567890	MRS STU	05-07-2028
06JBAAA12345678901234	MR VWX	15-08-2028
06KBAAA56789012345678	M/S YZA COMPANY PVT LTD	25-09-2028
06LBAAA90123456789012	MRS ABC	05-10-2028
06MBAAA34567890123456	MR DEF	15-11-2028
06NBAAA78901234567890	M/S GHI COMPANY PVT LTD	25-12-2028
06OBAAA12345678901234	MRS JKL	05-01-2029
06PBAAA56789012345678	MR MNO	15-02-2029
06QBAAA90123456789012	M/S PQR COMPANY PVT LTD	25-03-2029
06RBAAA34567890123456	MRS STU	05-04-2029
06SBAAA78901234567890	MR VWX	15-05-2029
06TBAAA12345678901234	M/S YZA COMPANY PVT LTD	25-06-2029
06UBAAA56789012345678	MRS ABC	05-07-2029
06VBAAA90123456789012	MR DEF	15-08-2029
06WBAAA34567890123456	M/S GHI COMPANY PVT LTD	25-09-2029
06XBAAA78901234567890	MRS JKL	05-10-2

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

Address 1	48 CHARLTON LANE	Address 2	SINGAPORE 539688	Address 3
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Address 1	48 CHARLTON LANE	Address 2	21000 ONE 559000	Post Code	539688
Address 4		Address Type	Singapore address		
Unit No.		Related Policy Number	5090727473-01		

Device Name	Unnamed Driver	Driver Type	Unnamed Driver
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Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	18/01/1985
Unnamed driver Name	HO KAH WENG	Driver NRIC	S8576147A	Driving Experience	4
Register Date of Driver License	29/07/2013	Driver Age	33	Contact No.(Home)	
Contact No.(Mobile)	96330827	Contact No.(Office)		Address 3	SINGAPORE 328689
Address 1	8 MAR THOMA ROAD	Address 2	#01-03 BEACON HEIGHTS	Post Code	328689
Address 4		Address Type	Singapore address		
Unit No.	01-03				
Does he own a Singapore Registered car?	Yes = No	Driver Vehicle No.		Driver Insurer Company	

Any injury?	yes = no
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Claim 001 New

Claim Type *	OD-MX	Insured Name	E-CUBE VEHICLE RENTAL PTE LT	Insured NRIC	201607761H
Contact No.(Mobile)	83681881	Contact No.(Home)	NIL	Contact No.(Office)	62353368
Email Address		OT Vehicle Number	SLC3102L	TP Vehicle Number	SHA4645M
Claim Description	SLC3102L / SHA4645M ON 26 Apr 2018			Name of Preferred Workshop	0
Preferred Workshop Contact No.	0	Insured Liability *	Fully at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	28/04/2018 00:00
Date Registered	28/04/2018 10:12	Claim Close Date			
Report Taken By	LIEW SHAN HUI				
<input checked="" type="checkbox"/> Print AK letter					

Save Submit

Accident No.	MT/0992192	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	28/04/2018 10:13

Path *		Category *	Confidential	Urgency *	Description
Choose File	No file chosen	Please Select	NO	Normal	
Choose File	No file chosen	Please Select	NO	Normal	
Choose File	No file chosen	Please Select	NO	Normal	

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 28 Apr 2018 10:13	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-4-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 28 Apr 2018 10:13	SAS	Normal	SAS 2018-4-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 28 Apr 2018 10:13	Photos	Normal	Photos 2018-4-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 28 Apr 2018 10:13	Photos	Normal	Photos 2018-4-28
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 28 Apr 2018 10:12	Photos	Normal	Photos 2018-4-28
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Video List

Uploaded By/Date	Folder Date	File Name	Source
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