NATIONAL Assessment Centre Services (wef 1 Jan'05) MNAI8057677

Date In: 3/5/18 - 12 : 07	Job description	Date & Time Completed	Done by
Ref No: NA/INC18008079/D24	SAS e-filing		
Veh No: SKP2170P	E-mail (within 5hrs, AIC 2hrs)		
D.O.A.: 29/4/18 - 02:50	i-Motor Claim Form	MT/0992812-001	3/5/18 13:58
(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: 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 :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

Invoice Preparation Checklist		Amt ($) 1st Bill	Amt ($) Add Bill
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) 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*			
*N5: Courtesy Car / Tpt Allowance	$5		
*N6: Repair Co-ordination	$10		
*N7: Post Repair Inspection	$25		
*N8: DV / Collect Excess Coordination	$5		
TP (N11) : TP (Non INC) against INC	$20		
9) N12: Idac Mobile	30		
Invoice dated	*Fee Charged*		
Invoice dated	*Fee Charged*		

Your NCD will be affected due to late reporting
Actual e-Filling Submission Date & Time: 03/05/2018 12:29

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 witholding 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	03/05/2018 12:07
Date Of Accident	29/04/2018 02:50
Exact Location Of Accident	ALONG NORTH-SOUTH EXPY TWDS SEREMBAN
Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKP2170P
Insured/Policyholder	
Name Of Registered Owner	CARWAY LEASING & RENTAL
Co Reg No	53264813K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999
Vehicle Particulars	
Manufacturer	TOYOTA
Model	VELLFIRE 2.4Z A
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5069958322-03
Cover Note Number	
Driver	
Name of Driver	GOH WEI XIAN
Passport No/FIN	G2055527R
Date Of Birth	25/01/1991
Occupation	OUTDOOR
Date Of Driving Pass	20/03/2018
Driving Experience	0 YEAR AND 1 MONTH
Gender	MALE
Mobile Number	(FOREIGN) 017-6859097
Fax Number	(FOREIGN) 017-6859097
Contact Number	
EMail Address	NOEMAIL

Address	LOT 1426/46 TAMAN LINGGI NEGERI SEMBILAN
Postcode	71150
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	FIRE, EXPLOSION OR LIGHTNING
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

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

Details of Police Action

Was the accident reported to the police?	YES
If Yes,Please state which Police Station	
Police Station Name	KLUANG (MALAYSIA)
Police Station Address	**ROAD**: KLUANG MALAYSIA , **POSTCODE:** S66270 , **COUNTRY**: MALAYSIA
Police Station Contact	**TEL NO**: 029-1193885 - **FAX NO**:
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

ON STATED DATE AND TIME, I WAS TRAVELLING ALONG NORTH-SOUTH EXPY. SUDDENLY MY VEHICLE ENGINE WAS ON FIRE. AFTER THAT I NOTIFY THE FIREMAN THAT MY VEHICLE WAS BURNING.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

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.

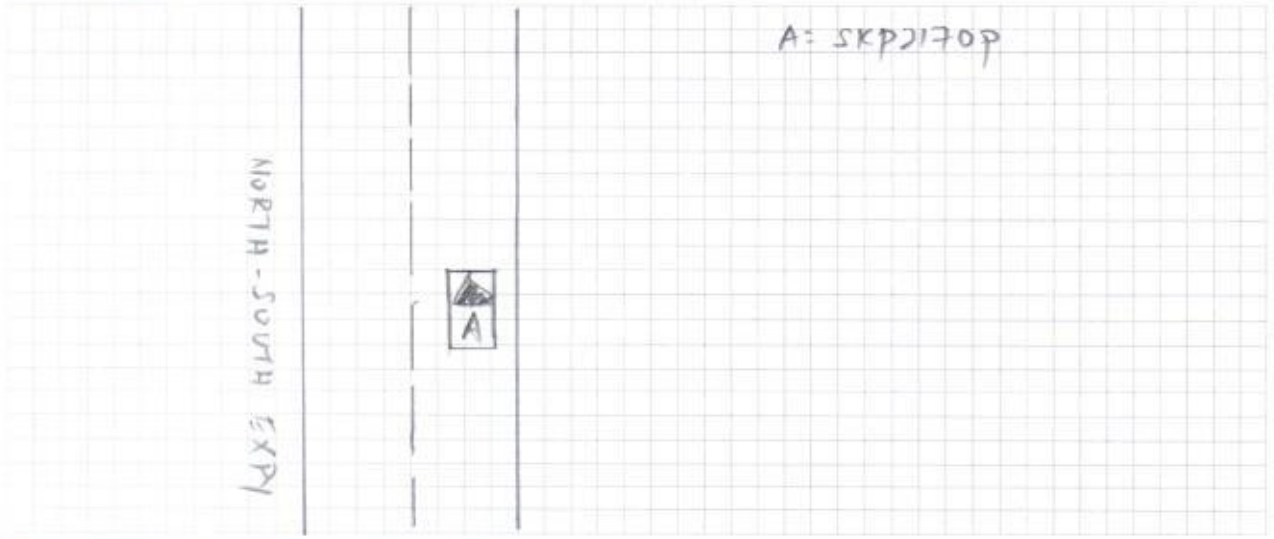
CARWAY LEASING & RENTAL

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 that the following particulars are true in every respect.

CARWAY LEASING & RENTAL

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.:

POLIS DIRAJA MALAYSIA

REPOT POLIS

Balai : SIMPANG RENGAM
Daerah : KLUANG
Kontinjen : JOHOR
No Repot : SPG RENGAM/002398/18
Tarikh : 29/04/2018
Waktu : 0625 AM
Bahasa Diterima : B. Malaysia

Butir-butir Penerima Repot

Nama : NORSAHANA BT MOHD RAMLI **No Personel :** R137153 **Pangkat :** KPL

Butir-butir Jurubahasa (Jika Ada)

Nama : --- **No K/P (Baru) :** --- **No Polis/Tentera:** ---

No Paspot: --- **Bahasa Asal :** ---

Alamat: ---

Butir-butir Pengadu

Nama : GOH WEI XIAN

No K/P (Baru) : 910125055105 **No Polis/Tentera :** --- **No Paspot :** ---

No Sijil Beranak : ---

Jantina : Lelaki **Tarikh Lahir :** 25/01/1991 **Umur :** 27 tahun 3 bulan

Keturunan : Cina **Warganegara :** Malaysia

Pekerjaan : JURUTEKNIK AIRCOND

Alamat Tempat Tinggal : LOT 1424/46, TAMAN LINGGI, 71150 LINGGI, NEGERI SEMBILAN.

Alamat Ibu/Bapa : ---

Alamat Pejabat : ---

No Tel (Rumah) : --- **No Tel (Pejabat) :** --- **No Tel (HP) :** 017-6859097

Emel : ---

Pengadu Menyatakan:-

PADA JAM LEBIH KURANG 0100 HRS 29/04/2018 SAYA BERSAMA KAKAK SAYA DALAM PERJALANAN DARI SINGAPURA MAHU BALIK KE SEREMBAN, NEGERI SEMBILAN DENGAN MEMANDU M/KAR SEWA NO. PENDAFTARAN: SKP2170P JENIS TOYOTA VELLFIRE . SEMASA SAMPAI DI KM 60.1 LEBUHRAYA UTARA SELATAN (ARAH UTARA) TIBA-TIBA ENJIN DEPAN BERASAP. KEMUDIAN SAYA BERHENTI DI TEPI LEBUH RAYA, TURUN DARI KERETA DAN TERUS BUKA BONET DEPAN. MASA ITU, SAYA LIHAT ADA PERCIKAN API DI BAWAH ENJIN. SELEPAS ITU, SAYA TERUS BERITAHU KAKAK SAYA SUPAYA KELUAR DARI KERETA DAN JAUHKAN DIRI DARI KERETA TERSEBUT. SELEPAS ITU, KERETA SEWA TERSEBUT TERUS TERBAKAR DAN BARANG-BARANG PERIBADI MILIK SAYA DAN KAKAK SAYA TIDAK DAPAT DISELAMATKAN.
ANTARA BARANG DAN DOKUMEN YANG MUSNAH TERBAKAR IALAH:-
1. DOKUMEN SIJIL MILIK KAKAK SAYA NAMA: GOH LING SI KPT: 900202-05-5354
-SIJIL UPSR
-SIJIL PMR
-SIJIL SPM
-SIJIL STPM
- SIJIL UNIVERISIT TUNKU ABDUL RAHMAN
2. (1) UNIT PENGHAWA DINGIN JENAMA DAIKIN
3. TILAM SINGLE
4. (3) BEG PAKAIAN DAN (1) BEG KASUT
5. (5) BEG GALAS
6. (1) PERALATAN KOSMETIK
7.(1) UNIT LAPTOP CHARGER DAN (4) UNIT TELEFON CHARGER
8. (1) POWERBANK DAN PENDRIVE HARDISK
9. (1) UNIT BAGASI YANG MENGANDUNGI IRON PAKAIAN, PEMANAS AIR, STEAMER,

10. (3) BALDI BERSAMA PERALATAN MANDI
11. (2) BANTAL
12. (2) UNIT SKALA TIMBANG
13. ALAT TULIS

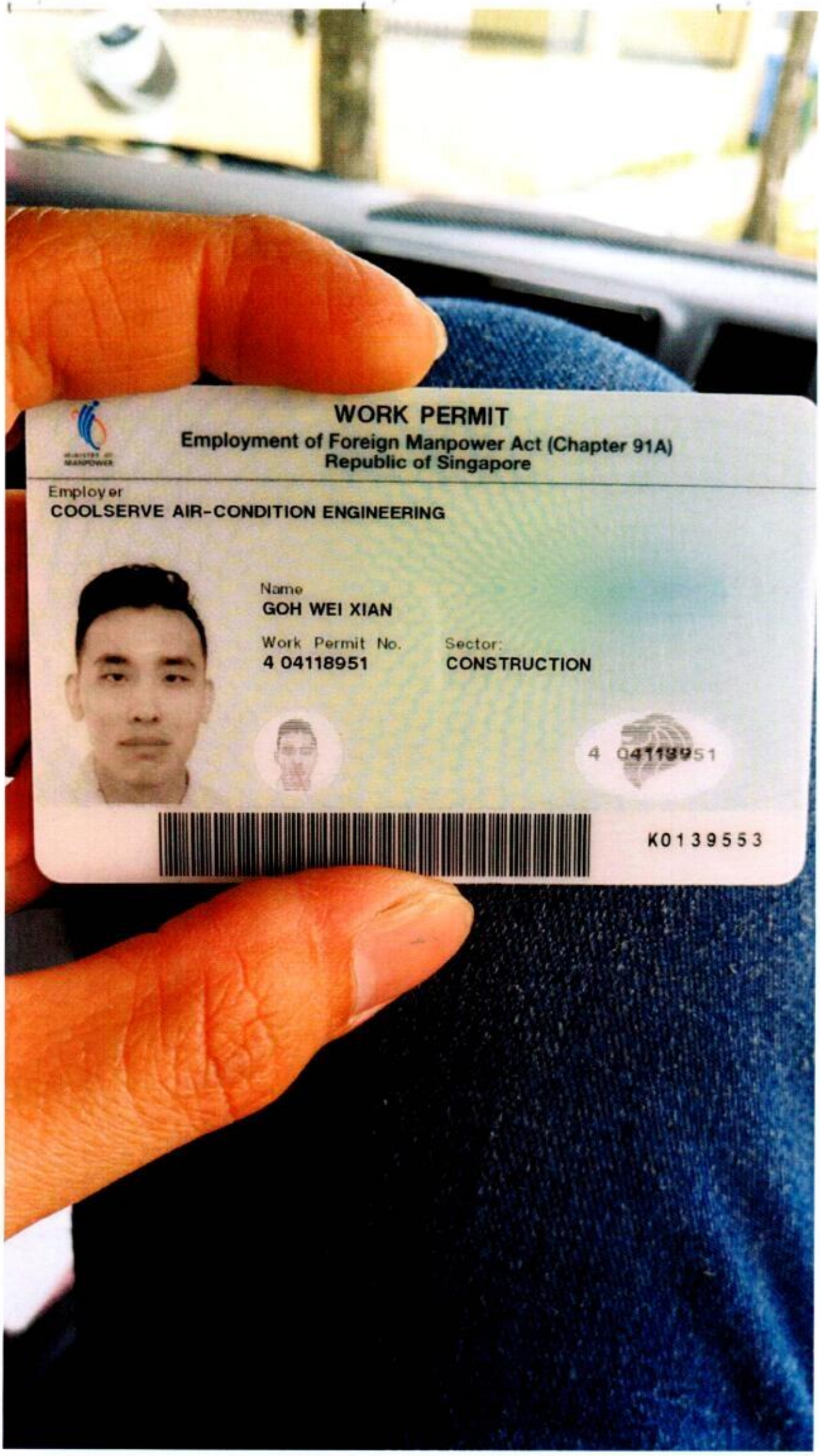
DALAM KEJADIAN INI SAYA DAN KAKAK SAYA TIDAK MENGALAMI KECEDERAAN. TUJUAN LAPORAN DI BUAT MAHU RUJUK PIHAK INSURANS DAN SAYA JUGA MAHU DAPATKAN SEMULA SALINAN DOKUMEN KAKAK SAYA YANG SUDAH TERBAKAR.
SEKIAN LAPORAN SAYA.

Tandatangan Pengadu:

Tandatangan Jurubahasa(Jika ada) :

Tandatangan Penerima Repot:

Salinan Repot Pertama



WORK PERMIT

Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer
COOLSERVE AIR-CONDITION ENGINEERING

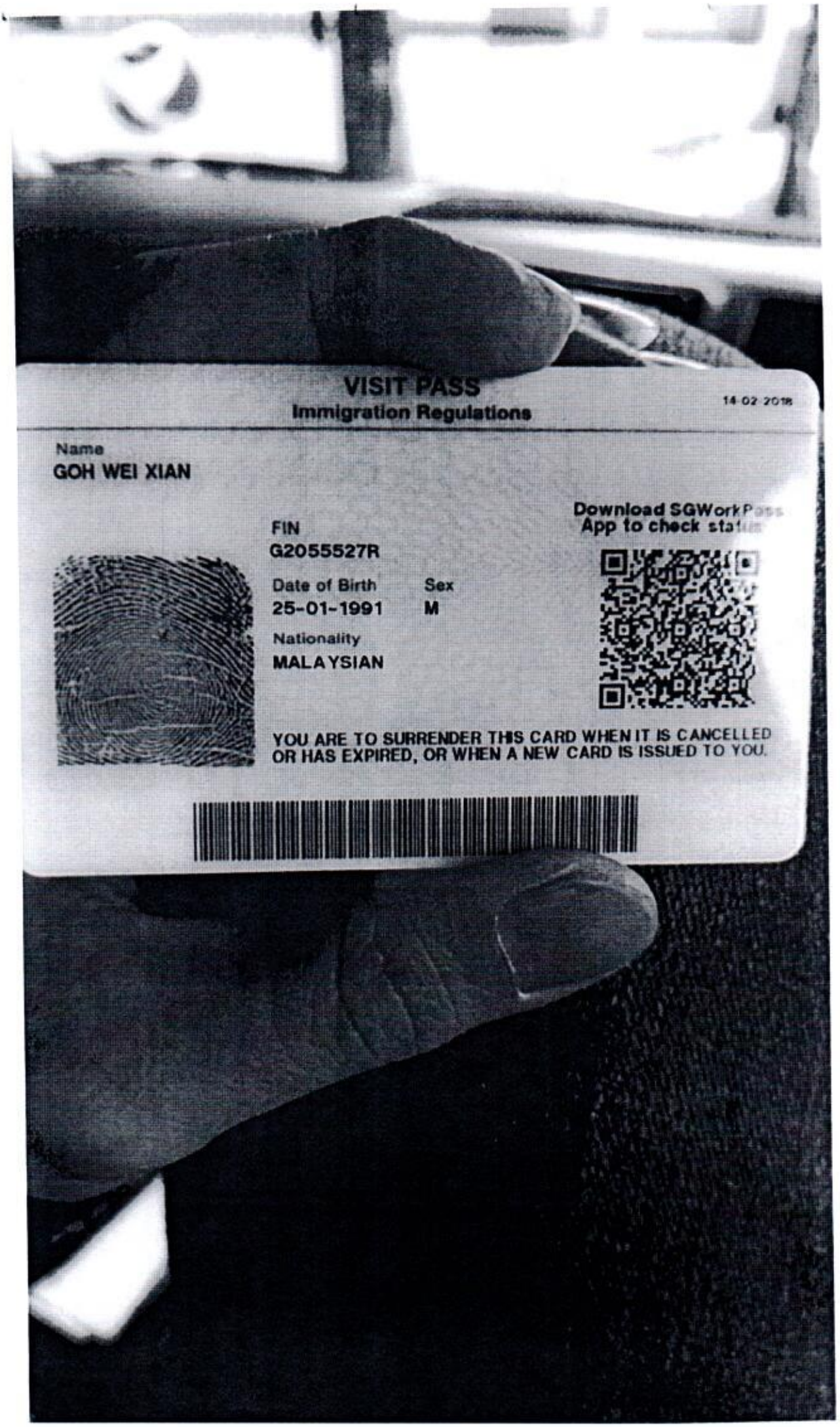
Name
GOH WEI XIAN

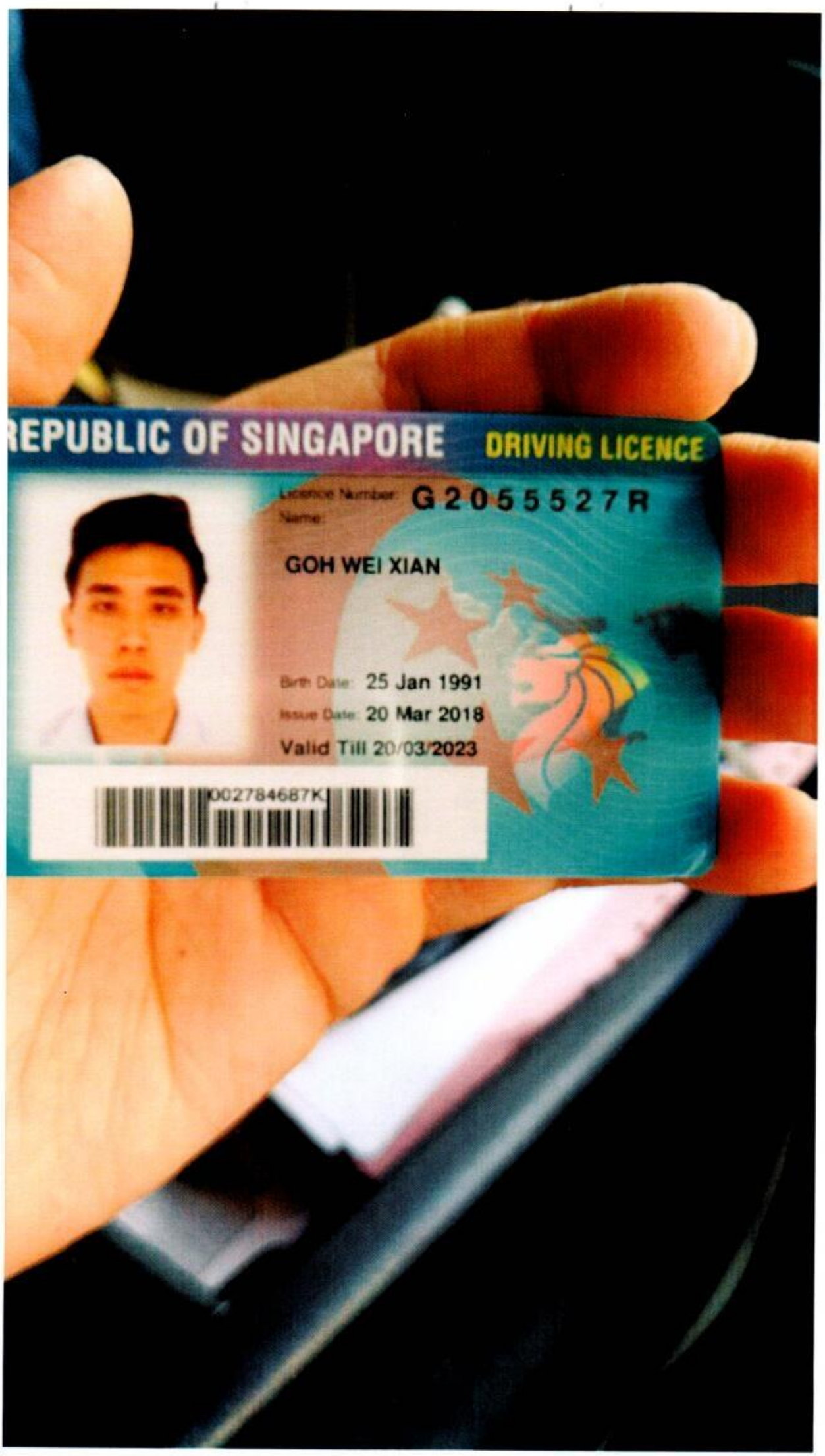
Work Permit No.
4 04118951

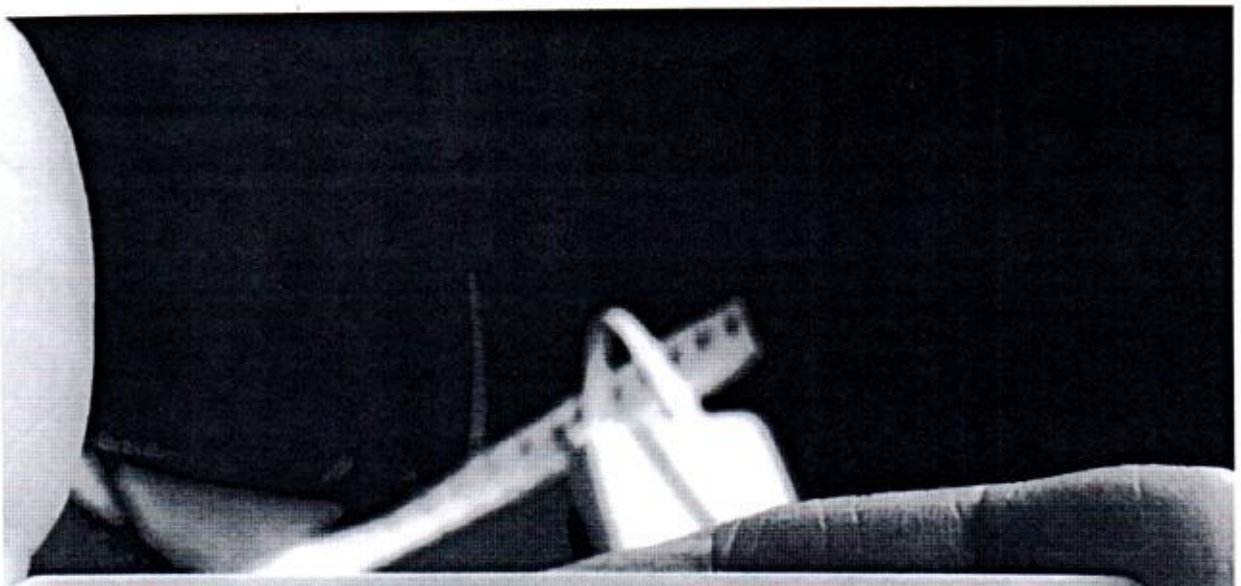
Sector:
CONSTRUCTION

4 04118951

K0139553


VISIT PASS
Immigration Regulations
14-02-2018
Name
GOH WEI XIAN
FIN
G2055527R
Date of Birth
25-01-1991
Sex
M
Nationality
MALAYSIAN
Download SGWorkPass
App to check status
YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.


REPUBLIC OF SINGAPORE
DRIVING LICENCE
Licence Number: G2055527R
Name:
GOH WEI XIAN
Birth Date: 25 Jan 1991
Issue Date: 20 Mar 2018
Valid Till 20/03/2023
002784687K

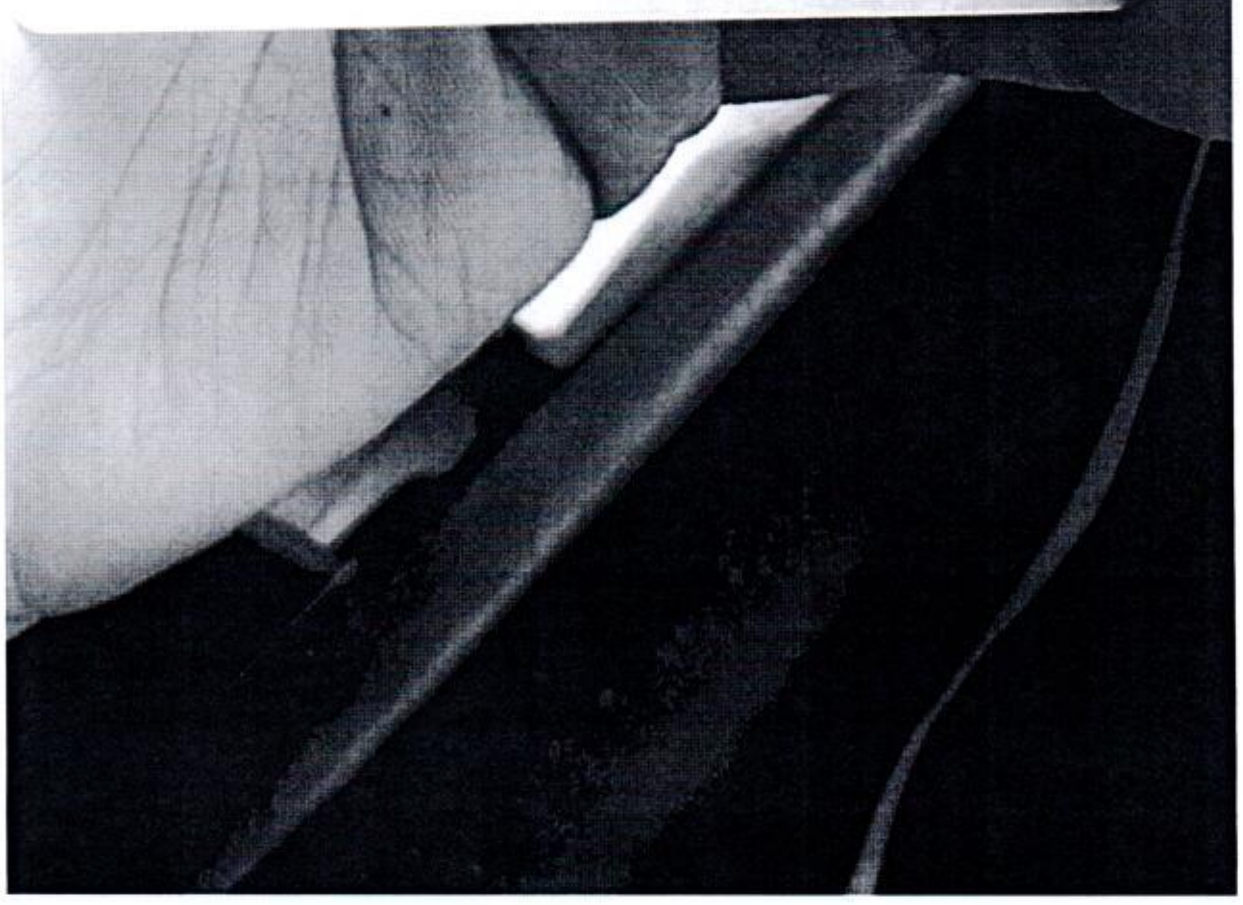


YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

		EFFECTIVE DATE
Class 2B	Motorcycles =< 200 cc	21 Mar 2013
Class 3C	Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver	20 Mar 2018

Licence No:G2055527R

NP 428A




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
29/04/2018 02:50
Vehicle No.(For Motor)
SKP2170P
Search
Select
Policy No.
Policyholder Name
Policyholder NRIC
Product
Cover Type
Vehicle No.
Insured Object
Commence Date
Expiry Date
5069958322-03
CARWAY LEASING & RENTAL
53264813K
GPT
drivo CLASSIC
SKP2170P
SKP2170P
27/06/2017
Continue

Policy Information

Policy No.	5069958322-03	Policyholder Name	CARWAY LEASING & RENTAL	Policyholder NRIC	53264813K
Address	53 UBI AVENUE 1 #03-01 PAYA UBI INDUSTRIAL PARK SINGAPORE 408934				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	23/06/2017	Effective Date	27/06/2017 00:00	Expiry Date	26/06/2018 23:59
Excess Type		All Claim Excess			
Third Party Excess	1500.00	Own damage Excess	2000.00	Windscreen Excess	100.00
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	2000.00	Outside Singapore TP Excess	1500.00		Young/Inexperience Driver Excess
Agent	INSMART (INSURANCE) AGENC	Agent Tel.	68420766	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

Policyholder Mailing Address

Address 1	53 UBI AVENUE 1	Address 2	#03-01 PAYA UBI INDUSTRIAL I	Address 3	SINGAPORE 408934
Address 4		Address Type	Singapore address	Post Code	408934
Unit No.		Related Policy Number	5094683034		

Insured Object: SKP2170P

Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	19/07/2017 00:00	Basic Information Endorsement	000001286602004	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover 1 additional vehicle as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. SJK8982L 19-07-2017 $1,538.82 In view of this amendment, an additional premium of $1,538.82 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque in favour of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash or NETS.
2	08/09/2017 00:00	Basic Information Endorsement	000001286650213	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover 1 additional vehicle as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. SJQ6708U 08-09-2017 $1,235.87 In view of this amendment, an additional premium of $1,235.87 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would

Claim Handling

Exit

Accident MT/0992812

Policy No.	SD69958222-03	Vehicle No.	SKP2170P	GST Registration No.	
Policyholder Name	CARWAY LEASING & RENTAL			Policyholder NRIC	S3264813K
Product Code	FLEET INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	0	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	
KFK	(•) No ( ) Yes	TCA	(•) No ( ) Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

Accident Details

Report Date	03/05/2018 13:51	Accident Report Within 24 hrs	Yes	Accident Type	Fire, explosion or lightning
Date of Accident	29/04/2018	Time of Accident hh:mm	02:50	Country of Accident	Outside Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG NORTH-SOUTH EXPY TWDS SEREMBAN				

Benefits

Excess

Own damage Excess	2,000.00	Additional Excess	0	Windscreen Excess	100.00
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	51 UBI AVENUE 1	Address 2	#03-01 PAYA UBI INDUSTRIAL I	Address 3	SINGAPORE 408934
Address 4		Address Type	Singapore address	Post Code	408934
Unit No.		Related Policy Number	5094683034		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	GOH WEI XIAN	Driver NRIC	G2055527R	Driver DOB	25/01/1991
Register Date of Driver License	20/01/2018	Driver Age	27	Driving Experience	0
Contact No.(Mobile)	8659097	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	LOT 1426/46 TAMAN LINGGI	Address 2	NEGERI SEMBILAN	Address 3	
Address 4		Address Type	Foreign address	Post Code	000000
Unit No.					
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

Modification History

Claim 001 **New**

Claim Type *	OD-MD	Insured Name	CARWAY LEASING & RENTAL	Insured NRIC	S3264813K
Contact No.(Mobile)	98627777	Contact No.(Home)		Contact No.(Office)	65744077
Email Address		OI Vehicle Number	SKP2170P	TP Vehicle Number	
Claim Description	SKP2170P ON 29 Apr 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault		
Require Finalisation	Yes	Preferered Repair Option	Income to assign workshop	GIA report	Pending
Date Registered	03/05/2018 13:58	Claim Close Date		Date Received	03/05/2018 00:00
Report Taken By	Jackson				

[x] Print AK letter

Save Submit

Attachment

Accident No.	MT/0992812	Claim No.	001
Last Doc. Received	(•) Yes ( ) No	Upload Date	03/05/2018 14:00

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	
	Browse...	Clear	Please Select	NO	Normal	

[ ] Send Message Upload

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	Action
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 May 2018 14:00	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-5-3		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 May 2018 14:00	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-5-3		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 May 2018 14:00	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-5-3		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 May 2018 14:00	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-5-3		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 May 2018 13:59	SAS	Normal	SAS 2018-5-3		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 May 2018 13:59	Photos	Normal	Photos 2018-5-3		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 May 2018 13:59	Photos	Normal	Photos 2018-5-3		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 May 2018 13:59	Photos	Normal	Photos 2018-5-3		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 May 2018 13:59	Photos	Normal	Photos 2018-5-3		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 May 2018 13:58	Photos	Normal	Photos 2018-5-3		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 May 2018 13:58	Photos	Normal	Photos 2018-5-3		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 May 2018 13:58	Photos	Normal	Photos 2018-5-3		Edit
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 May 2018 13:58	Photos	Normal	Photos 2018-5-3		Edit

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action

Display in New Window | Scan and uploading

REF:

ASSIGNMENT

From: Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured: Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value:

IDAC Accident Rport: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repairs: days Res.: Yes or No

Lum Sum: % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: Person Contacted:

Veh No: SKP2170P Yr Regn: 2009 / My

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

Make: Toyota Vellfire c.c 2362

Colour Grey A/C: Insured / Std / NI / NA

Sp.Reading N.A. T/Radio: Insured / Std / NI / NA

Eng/No: 2AZC424195

C/No: ANH208002727

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: - tyre melted

R: - tyre melted

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

Front		Rear	
R/Bal.	- mm	R/Bal.	- mm
L/Bal.	- mm	L/Bal.	- mm

D.O.A. 29/04/2018 D.O.I. 03/05/2018

Survey held at IDAZ Paya Ubi

Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or The vehicle caught fire.

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	Total loss.
	Vehicle badly burnt all around. Unsafe and not economical to repair
	MV 33.5K
	LTA 18.5K
	NL - 15K
	Vehicle 6/7 1 yrs at time of loss. MV obtain by adding ~~PA~~ Rebate plus 1 yrs dep of cost 15K.

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

☐ : Preli. Report

☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Add Fee: ☐ : Site Insp ($)

☐ : Interview ($)

☐ : Tech. Invs ($)

☐ : Weekend ($)

Report Format :

Lump Sum / I.B.I: ($)

Survey Fee:

Transportation: S + RS, SI

Photos

Others

TOTAL

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID:	4813K
Vehicle Details	
Vehicle No.:	SKP2170P
Vehicle to be Exported:	Yes
Intended De-registration Date:	03 May 2018
Vehicle Make:	TOYOTA
Vehicle Model:	VELLFIRE 2.4Z A
Primary Colour:	Grey
Manufacturing Year:	2008
Engine No.:	2AZC424195
Chassis No.:	ANH208002727
Maximum Power Output:	125.0 kW (167 bhp)
Open Market Value:	$32,309.00
Original Registration Date:	21 May 2009
First Registration Date:	21 May 2009
Transfer Count:	7
Actual ARF Paid:	$32,309.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	20 May 2019
PARF Rebate Amount:	$17,769.00
Intended COE Rebate Details	
COE Expiry Date:	20 May 2019
COE Category:	B - Car (1601cc & above)
COE Period(Years):	10
QP Paid:	$7,589.00
COE Rebate Amount:	$793.00
Total Rebate Amount:	**$18,562.00**

The information contained herein is correct as at 03 May 2018

OK

Claim Handling

- Task Transfer - Exit

LOS SAL SUB

Accident MT/0992812

Policy No.	5069958322-03	Vehicle No.	SKP2170P	GST Registration No.	
Policyholder Name	CARWAY LEASING & RENTAL			Policyholder NRIC	53264813K
Product Code	FLEET INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	0	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	
KFK	(•) No ( ) Yes	TCA	(•) No ( ) Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes

Accident Details

Report Date	03/05/2018 13:51	Accident Report Within 24 hrs	No	Accident Type	Fire, explosion or lightning
Date of Accident	29/04/2018	Time of Accident hh:mm	02:50	Country of Accident	Outside Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	ICM No.	
Accident Location	ALONG NORTH-SOUTH EXPY TWDS SEREMBAN				

Benefits

Excess

Own damage Excess	2,000.00	Additional Excess	0	Windscreen Excess	100.00
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	51 UBI AVENUE 1	Address 2	#03-01 PAYA UBI INDUSTRIAL	Address 3	SINGAPORE 408934
Address 4		Address Type	Singapore address	Post Code	408934
Unit No.		Related Policy Number	5094683034		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	GOH WEI XIAN	Driver NRIC	G2055527R	Driver DOB	25/01/1991
Register Date of Driver License	20/03/2018	Driver Age	27	Driving Experience	0
Contact No.(Mobile)	6859097	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	LOT 1426/46 TAMAN LINGGI	Address 2	NEGERI SEMBILAN	Address 3	
Address 4		Address Type	Foreign address	Post Code	000000
Unit No.					
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

Modification History
04/05/2018 11:31 s018940 Modify Private Hire(No-->Yes)
04/05/2018 11:31 s018940 Modify Accident Report Within 24 hrs(Yes-->No)

Investigation

Claim 001 OD-MD

LOS SAL SUB

Claim Case Officer Yap Chee Ling

Claim Type	OD-MD	Insured Name	CARWAY LEASING & RENTAL	Insured NRIC	53264813K
Contact No.(Mobile)	98627777	Contact No.(Home)		Contact No.(Office)	65744077
Email Address		OI Vehicle Number	SKP2170P	TP Vehicle Number	
Claim Description	SKP2170P ON 29 Apr 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability	Not at Fault		
Require Finalisation	Yes	Preferered Repair Option	income to assign workshop	GIA report	Pending
Date Registered	03/05/2018 14:02	Claim Close Date		Date Received	03/05/2018 00:00
Report Taken By	Jackson	Workshop Repairer		Total Loss but Repaired	
[✓] Print AK letter				OD Excess Collected by Workshop	

Modification History

Special Claim Creation Approval

Approval		Reason	

Remarks

damage assessment | Attachment

Vehicle Info

Vehicle Make	TOYOTA	Vehicle Model	VELLFIRE	Engine Capcity	2362.00
Date of Registration	21/05/2009	Classis No.	ANH208002727		
Towing Required *	(•) Yes ( ) No	Vehicle in IDAC *	(•) Yes ( ) No	Parallel Import *	( ) Yes (•) No
Type of Tender *	Own Damage	Assessor Name *	BRYAN	Survey Current Status	
IDAC/Workshop Name	NATIONAL ASSESSMENT CENTR	IDAC/Workshop Location	51 UBI AVENUE 1 #01-25 PAYA		
Windscreen Parts & Labour Cost		Total Loss *	(•) Yes ( ) No		
Market Value($) *		Scrape Value($) *		Economical Repair Value($) *	

income
made different

Our Ref: MT/CA/OD/087/0992812-001/TSC/TV

24 May 2018

NATIONAL ASSESSMENT CENTRE SERVICES / Mr Daniel
51 UBI AVENUE 1
#01-25 PAYA UBI INDUSTRIAL PARK
SINGAPORE 408933
Fax: 67564315

Dear Sir/Madam

VEHICLE NUMBER: SKP2170P Toyota Vellfire
CLAIM NUMBER: MT/0992812-001

We have awarded this vehicle to HUA HONG PTE LTD. Please release the vehicle to the assigned dealer's towing agent.

If you have any queries, please contact Tan Slew Choo at 6430 7882 or email us at slewchoo.tan@income.com.sg.

Yours sincerely

Low Choo Mee
Senior Manager
Motor Insurance

HUA HONG PTE LTD

Adele Toh
66619698

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: SKP2170P Date In: _____ Time In: _____ with Keys: Yes / No

For Office use

Attended by: _____

Workshop Collection of Vehicle

Workshop: Hong Army

Collection Date: 9/6/17 Time: 1045 with Keys: Yes / No

Tow Truck No: SLH7717R Tow Man: [illegible] NRIC: 1S0477 1B

Signature: _____ 96787717

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:*** _____