

# NATIONAL Assessment Centre Services.

(part 1 Jan 2008)

Date In: 21/05/2018 17:37

Ref No: NA/INC 18009192/K4

Veh No: SDN 6848K

D.O.A: 17/03/2018 22:15

OD / TP / Reporting Only

TP Insured:

Job description

SAS e-billing

E-mail (within 3hrs, A/C 3hrs)

I-Motor Claim Form

I-Motor W/O (within: OD 3hrs, TP 4hrs)

I-Photo Uploaded

Assessment/Survey Report

Ass'l Report by Fax/ Hand to Owner/Wksp

Date & Time Completed

Done by

MT/0992996-003/22/5/18 09:46

Preferred Wksp / INC Assign Wksp / QW:

TP Particulars:

Veh No:

FBE 6174S

INC ( ) / Non-INC ( )

Tel:

Fax:

Owner / Driver: (

Policy No: (

Period: (

Tel:

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: (UNP box life 6788 0000)

1) Apply for Transport Allowance ( ) / Courtesy Car ( )

2) QC Check / Post Repair Inspection ( )

3) Upload Resurvey Photo [Repair Cost > \$3000] ( )

Injury:

Date/Time

Actions

NA1803189

Human's Particulars:

Driver/Owner:

Contact No:

Insured Portion:

Checked by (Engr-In-Charge):

Notes/Comments:

1

2 / 3:

Invoice Preparation Credits:

1) AR: Accident Reporting (330)

2) DA: Damage Assessment (3100)

3) TP: Towing Fee

4) FT: Follow-Through Survey

5) FT: Follow-Through Survey (Resurvey)

Forfeiting against INC Only (wef 10 Jan 2008)

6) TR: Re-inspection

7) NI: Idau DA + SMRT Survey

8) NTUC Additional Services

9) Q11

\*N3: Courtesy Car / Tpl Allowance

\*N6: Repair Coordination

\*N7: Post Repair Inspection

\*N8: DY / Collect Excess Coordination

TP (N11): TP (Non INC) against INC

9) N22: Idau Mobile

Invoice dated

Invoice dated

Fee Charged

Fee Charged

Invoice

Invoice



## 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	21/05/2018 17:37
Date Of Accident	17/03/2018 22:15
Exact Location Of Accident	PUNGGOL ROAD ( SHELL PATROL STATION )
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDN6848K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SUNSHINE CAR RENTAL AND SERVICES
Co Reg No	53318074X
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92398116
Alternative Phone No	OFFICE-92398116

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER 1.5 MIVEC GLX AT ABS D/AB 2WD 4DR
Exact Purpose for which vehicle was being used at time of accident	WORK
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	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5097130736
Cover Note Number	

### Driver

Name of Driver	GOH SENG KOON
NRIC No	S0054659C
Date Of Birth	26/11/1953
Occupation	OUTDOOR
Date Of Driving Pass	06/08/1974
Driving Experience	43 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92398116
Fax Number	
Contact Number	OTHERS-92398116
EMail Address	NOEMAIL

Address	17 TAMPINES STREET 86 #03-38
Postcode	628591
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	SIDE SWIPE
Weather Conditions	CLEAR
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?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	PUNGGOL N.P.C
Police Station Address	ROAD: 21A TEBING LANE , POSTCODE: 828837 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20180317/2180

#### 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	FBE6174S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	SUN BO
NRIC/Passport Number	G2859146U
Contact Number	88698422
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)



## 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:



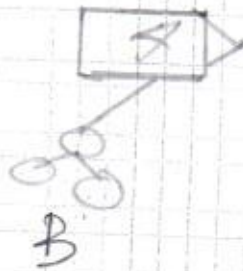
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

21/5/2018

SKETCH PLAN

PUNGGOL ROAD  
Shell Patrol station



A. SDN 6848  
B. 7REG1748

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT. - T/20180317/2180

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.:

21/5/2018





**SINGAPORE  
POLICE FORCE**



T/20180317/2180

1 of 3

Police Station Of Origin:  
Punggol N.P.C  
21A Tebing Lane SINGAPORE 828837  
Tel No: 1800-6049999

Report No T/20180317/2180

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 17/03/2018 23:49		Vide Report No.:		Station Diary No.: 109	
<b>Informant's Particulars</b>					
Name of Informant: GOH SENG KOON			Address: 17 TAMPINES STREET 86 #03-38 SINGAPORE 528591		
ID Type / ID No.: NRIC NO / S0054659C			Contact No.: Home/Office: Mobile: 92398116		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 64	Date of Birth: 26/11/1953	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 17/03/2018 22:15	Type of Location: Straight Road
Location: Along Road 1 PUNGGOL ROAD				
Shell Patrol Station				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control:		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
FBE6174S	Motorcycle					0
SDN6848K	Car					0

**Details of Person Involved**

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



**SINGAPORE  
POLICE FORCE**



T/20180317/2180

2 of 3

Report No. T/20180317/2180

Police Station Of Origin:  
Punggol N.P.C  
21A Tebing Lane SINGAPORE 828837  
Tel No: 1800-6049999

**CONTINUATION OF REPORT**

<b>Rider</b>			
Name	Sun Bo	ID No.	G2859146U
Related Vehicle	FBE6174S (Motorcycle)	Contact No.	88698422
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
<b>Driver</b>			
Name	GOH SENG KOON	ID No.	S0054659C
Related Vehicle	SDN6848K (Car)	Contact No.	92398116
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 17/03/2018 at about 2215hrs, I was driving my vehicle registration number SDN6848K and came to a stop at Shell Petrol Station located at 821 Punggol Road to pump petrol. I checked both the rear and side mirrors and ensure that it was clear before I opened my car door. While I was about to alight from my vehicle, all of a sudden, a motorcycle registration number FBE6174S hit onto my opened car door. Both the motorcycle and the rider fell onto the road. Immediately, I came down from my vehicle and made a check on the rider. I discovered that the rider fingers were bleeding but did not require to be conveyed to the hospital. The rider informed that he will go see a doctor and will be lodging a police report after which. Both the rider and myself then exchanged particulars and left the incident site.

I wish to inform that police and ambulance were not called and that I have no in-built camera installed in my vehicle. Also, I wish to inform that there is CCTV operation at the petrol station at that time of the incident.





**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Punggol N.P.C  
21A Tebing Lane SINGAPORE 828837  
Tel No: 1800-6049999



T/20180317/2180

3 of 3

Report No. T/20180317/2180

**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 2 TAN XIAO HUI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

17/03/2018 23:49

Officer In Charge Of Case:

TP / AEIT /

SSI 2 YEO GEAK ENG CECILIA

Contact No.: 65476404

Classification Of Case:

SN 085

Authentication Stamp  
NP168



Signature

Singapore Police Force



# HS AUTOMOTIVE SERVICES

Bik 2 KAKI BUKIT AVE 2 @ KAKI BUKIT AUTOHUB #02-25 SINGAPORE 417921.

TEL: 6538 1368 FAX: 6538 1367 Email add: hsautomotives@yahoo.com

VEHICLE NO: SDV0848K MAKE/MODEL: BMW CANCER  
 DATE OF ACCIDENT 17/03/2018 TIME 23 HR 47 MIN AM PM  
 LOCATION OF ACCIDENT PUNONGOC 23 PROE KIOBK.  
 EXACT PURPOSE USE DURING ACCIDENT WORKING

## CAR OWNER

NAME OF CAR OWNER SUNSHINE CAR RENTAL.  
 CONTACT NO 81222218  
 NRIC \_\_\_\_\_  
 CLAIM TYPE ☐ OD ☐ THIRD PARTY ☒ REPORTING ONLY  
 INSURANCE COMPANY N.T.A.  
 TYPE OF COVERAGE ☒ COMPREHENSIVE ☐ THIRD PARTY ☐ THIRD PARTY FIRE & THEFT  
 POLICY NO \_\_\_\_\_

## ACCIDENT DRIVER

NAME OF DRIVER 8104 SENG KOON  
 NRIC 80054659C NO OF PASSENGER/S 0  
 DATE OF BIRTH 26-11-1953  
 OCCUPATION ☒ OUTDOOR ☐ INDOOR  
 DATE OF DRIVING PASS 06 AUG 1974  
 GENDER ☒ MALE ☐ FEMALE  
 CONTACT NO 92398116  
 ADDRESS 17 PAMPIN 86 #03-38 (8) 62859,

DRIVER OWN ANY VEHIC NO/ IF YES- REGISTRATION NO \_\_\_\_\_

RELATIONSHIP EMPLOYEE/ IF NOT: HURER.  
 WEATHER CONDITION ☒ CLEAR ☐ RAINING OTHER: \_\_\_\_\_  
 ROAD SURFACE ☒ DRY ☐ WET OTHER: \_\_\_\_\_

ANY INJURIES NO/ IF YES- NAME: \_\_\_\_\_  
 CONTACT NO \_\_\_\_\_  
 POLICE REPORT NO/ IF YES- LOCATION: \_\_\_\_\_  
 VIDEO FOOTAGE NO/ YES \_\_\_\_\_

## 3RD PARTY INFO

VEHICLE B NO 87BE6145 NO OF PASSENGER/S ☐  
 NAME \_\_\_\_\_  
 CONTACT NO \_\_\_\_\_  
 VEHICLE C NO \_\_\_\_\_ NO OF PASSENGER/S ☐  
 VEHICLE D NO \_\_\_\_\_ NO OF PASSENGER/S ☐  
 VEHICLE E NO \_\_\_\_\_ NO OF PASSENGER/S ☐  
 VEHICLE F NO \_\_\_\_\_ NO OF PASSENGER/S ☐  
 ANY WITNESS \_\_\_\_\_  
 WITNESS CONTACT NO \_\_\_\_\_

*\*Private Hire*



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licensee's Name: **GOH SENG KOON**

NRIC No: **S0054659C**

Birth Date: **26 Nov 1953**

Issue Date: **03 Feb 2016**

002525153G

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S0054659C**

Name: **GOH SENG KOON**

吴成坤

Race: **CHINESE**

Date of birth: **26-11-1953**

Country/Place of birth: **SINGAPORE**

Sex: **M**

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

Class	Description	EFFECTIVE DATE
Class 3	Motor cars with unladen weight $\leq 3000\text{kg}$ with $\leq 7$ passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$	06 Aug 1974

5557252

NRIC No: **S0054659C**

Date of issue: **02-02-2016**

17 TAMPINES STREET 86 #03-38  
SINGAPORE 628591

NRIC No: **S0054659C** Date: **24/11/2017**

NP 428A



Hello, NAC\_PAYA\_UBI\_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

## Policy Query

Policy No.

Date of Accident

17/05/2018 22:15

Vehicle No. (For Motor)

SDN6848K

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5097130736	SUNSHINE CAR RENTAL AND SERVICES	53318074X	GPC	Third Party, Fire & Theft	SDN6848K	SDN6848K	03/01/2018	02/01/2019



## ▼ Policy Information

Policy No.	5097130736	Policyholder Name	SUNSHINE CAR RENTAL AND SE	Policyholder NRIC	53318074X
Address	BLK 170C #14-697 PUNGGOL FIELD SINGAPORE 823170				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	03/01/2018	Effective Date	03/01/2018 00:00	Expiry Date	02/01/2019 23:59
Third Party Excess	1500	Own damage Excess	0	Windscreen Excess	0
Additional Excess		OS Premium	0		
Outside Singapore OD Excess	0	Outside Singapore TP Excess	1500		
Agent	INXURE NETWORK SERVICES	Agent Tel.	62956108	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

## ▼ Policyholder Mailing Address

Address 1	BLK 170C #14-697	Address 2	PUNGGOL FIELD	Address 3	THE NAUTILUS @ PUNGGOL
Address 4	SINGAPORE 823170	Address Type	Singapore address	Post Code	823170
Unit No.	14-697	Related Policy Number	5093374018-01		

## ▶ Insured Object: SDN6848K

## ▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
1	03/01/2018 00:00	Basic Information Endorsement	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that from 03 Jan 2018, the following amendment(s) is/are made to this policy: PREMIUM: S\$1,798.37 (inclusive of GST) In view of this amendment, you will receive a refund of \$74.45 (inclusive of GST). Please collect this refund from your agent/broker after seven business days from the date of this letter at the following address: Agent/Broker: INXURE NETWORK SERVICES (00000614975) Agent/Broker Address: BLK 535 #08-179 SERANGOON NORTH AVENUE 4 SINGAPORE 550535 Contact Number: 62956108 Email: cs@inxure.com.sg
2	03/01/2018 00:00	Basic Information Endorsement	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that from 03 Jan 2018, the following amendment(s) is/are made to this policy: The Policy is extended to cover use for hire

## Claim Handling

Accident MT/0992996

Policy No.	5097130736	Vehicle No.	SDN6848K	GST Registration No.	
Policyholder Name	SUNSHINE CAR RENTAL AND SERVICES			Policyholder NRIC	533
Product Code	PRIVATE CAR INSURANCE	Cover Type	Third Party, Fire & Theft	Loading	0
Contact No.(Mobile)	NA	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	Not

## ▼ Accident Details

Report Date	04/05/2018 16:07	Accident Report Within 24 hrs	Yes	Accident Type	Other
Date of Accident	17/03/2018	Time of Accident hh:mm	22:15	Country of Accident	Sing
Reporting Centre		Orange Force		ICM No.	
Accident Location	PUNGGOL ROAD (SHELL PETROL KIOSK)				

## ▼ Benefits

## ▼ Excess

Own damage Excess	0.00	Additional Excess		Windscreen Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess	0.00		
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	07/05/2018 10:04:47 Nur Shahira Hassan changed GST Status Verified from No to Yes		

## ▼ Policyholder Mailing Address

Address 1	BLK 170C #14-697	Address 2	PUNGGOL FIELD	Address 3	THE
Address 4	SINGAPORE 823170	Address Type	Singapore address	Post Code	823
Unit No.	14-697	Related Policy Number	5093374018-01		

## ▼ OI Driver Info

Driver Name		Driver Type		Driver DOB	
Unnamed driver Name		Driver NRIC		Driving Experience	
Register Date of Driver License		Driver Age		Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	
Address 1		Address 2		Post Code	
Address 4		Address Type	Foreign address		
Unit No.					
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Modification History

Claim 003 OD-MX

New

Claim Type *	OD-MX	Insured Name	SUNSHINE CAR RENTAL AND SE	Insured NRIC	533
Contact No.(Mobile)	81122218	Contact No.(Home)	NIL	Contact No.(Office)	NIL
Email Address		OI Vehicle Number	SDN6848K	TP Vehicle Number	FBE6
Claim Description	SDN6848K / FBE6174S ON 17 Mar 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Partially at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Rec
Date Registered	22/05/2018 10:56	Claim Close Date		Date Received	22/0
Report Taken By	KRISHNASAMY	Workshop Repairer		Total Loss but Repaired	

☒ Print AK letter

Save Submit

## Attachment



Accident No.	MT/0992996	Claim No.	003
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	22/05/2018 09:46
Path *		Category *	Confidential
		Urgency *	



Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

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Choose File No file chosen

Message Read

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

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Descr
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 May 2018 10:56	NRIC/ Driving License	Normal	NRIC/ Driving License
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 May 2018 10:55	SAS	Normal	SAS 2018
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 May 2018 09:46	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 May 2018 09:46	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 May 2018 09:46	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 May 2018 09:46	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 May 2018 09:45	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 May 2018 09:45	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 May 2018 09:45	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 May 2018 09:45	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 May 2018 09:45	Photos	Normal	Photos 2018
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