

**NATIONAL Assessment Centre Services** [wef 1 Jan'05] MNA118076506

Date In: 13/6/18-09:35	Job description	Date & Time Completed	Done by
Ref No: NA/INC 1801 07 65 / 24	SAS e-filing		
Veh No: 5LD1289P	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 13/6/18-18:40	i-Motor Claim Form	MTB998506-001	13/6/18 11:57
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: 6X2855C 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

NA1803746	Invoice Preparation Checklist	Amt (\$) In Bill	Amt (\$) Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:-	For claiming against INC Only (wef 10 Jan 2005)		
Dat. 1:	6) TR: Re-inspection \$75		
Dat. 2/3:	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 \$0		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

### ACCIDENT STATEMENT

Date Of Report	13/06/2018 09:55
Date Of Accident	12/06/2018 18:40
Exact Location Of Accident	CTE (CITY) BEFORE PIE (TUAS) EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLD1289P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SWIFT-AIRE ENGINEERING SERVICES
Co Reg No	52831534W
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98800408
Alternative Phone No	OFFICE-98800408

### Vehicle Particulars

Manufacturer	NISSAN
Model	TEANA 2.0 XL CVT
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?	YES
If No, Please state action to be taken	
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	5080456734-02
Cover Note Number	

### Driver

Name of Driver	TAN GEOK SENG
NRIC No	S1747903B
Date Of Birth	29/10/1966
Occupation	INDOOR
Date Of Driving Pass	26/07/1989
Driving Experience	28 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90028710
Fax Number	
Contact Number	OFFICE-90028710
EMail Address	NOEMAIL

Address 142E LORONG J TELOK KURAU  
 Postcode 425972  
 Was driver an employee of the Insured's Company YES  
 If No, Relationship of the Driver with the Insured  
 Vehicle Registration Number of Driver's Own Vehicle -  
 -  
 -  
 Insurance Company of Driver's Own Vehicle -  
 -  
 -

**General Information of the Accident**

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

**Other Information**

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

**Details of Police Action**

Was the accident reported to the police? NO  
 If Yes, Please state which Police Station  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

**Circumstances of Accident**

ON STATED DATE AND TIME, I WAS TRAVELLING ALONG LANE 4 CTE (CITY). SUDDENLY VEHICLE B BRAKE HIS VEHICLE. IN A RESULT, I COULDN'T BRAKE MY VEHICLE IN TIME AND HIT ONTO VEHICLE B REAR RIGHT 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 GX2855C  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category COMMERCIAL VEHICLE  
 Name of Driver MANI GOVINDARAJ  
 NRIC/Passport Number G8169594L  
 Contact Number  
 Address  
 Postcode  
 Insurance Company Name  
 Nature Of Damage  
 No. Of Passenger (Including Driver) 2  
 Passenger 1  
 NAME: :  
 GENDER: :

## 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.

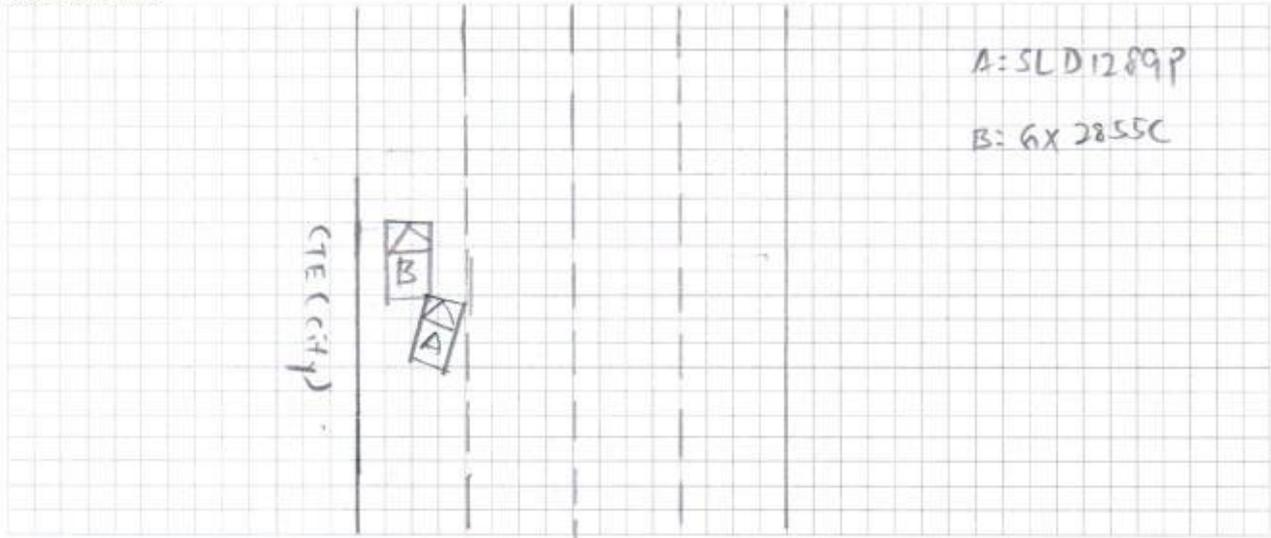
SWIFT-AIRE ENGINEERING SERVICES

\_\_\_\_\_  
Policyholder's Signature  
Date & Time: .....

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

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

**SKETCH PLAN**



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

Refer to statement.

**DECLARATION**

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

**SWIFTFARE ENGINEERING SERVICES**

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

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

**REPUBLIC OF SINGAPORE DRIVING LICENCE**



Licence Number **S1747903B**  
 Name  
**TAN GEOK SENG**  
 Birth Date **29 Oct 1966**  
 Issue Date **08 May 2003**

1000465409H

**REPUBLIC OF SINGAPORE**

**IDENTITY CARD NO. S1747903B**



Name  
**TAN GEOK SENG**  
**陳 玉 星**  
 Race  
**CHINESE**  
 Date of birth **29-10-1966** Sex **M**  
 Country/Place of birth  
**SINGAPORE**

**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES**

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

PASS DATE  
**26 Jul 1989**

NP 428A

Licence No: S1747903B

5251975

NRIC No **S1747903B**

Date of issue  
**30-12-2013**

Address  
**142E LORONG J TELOK KURAU  
SINGAPORE 425972**

Hello, NAC\_PAYA\_UBI\_800601

Change Language Change Password Log Out

My Desktop

Notice of Loss

Policy Query

Policy No.  Date of Accident

Vehicle No. (For Motor)

Search

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5080456734-02	SWIFT-AIRE ENGINEERING SERVICES	52831534W	GCV	Comprehensive	SLD1289P	SLD1289P	16/05/2018	15/05/2019

Continue

Policy Information

Policy No.	5080456734-02	Policyholder Name	SWIFT-AIRE ENGINEERING SER	Policyholder NRIC	52831534W
Address	142E LORONG J TELOK KURAU SINGAPORE 425972				
Product Name	COMMERCIAL VEHICLE INSURAI Plan	Group Policy Flag	N		
Policy issue Date	18/04/2018	Effective Date	16/05/2018 00:00	Expiry Date	15/05/2019 23:59
Excess Type		All Claim Excess			
Third Party Excess	2000	Own damage Excess	2000	Windscreen Excess	100
Additional Excess		OS Premium	0		
Outside Singapore OD Excess		Outside Singapore TP Excess		Young/Inexperience Driver Excess	
Agent	AON SINGAPORE PTE LTD	Agent Tel.	62397608	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

Policyholder Mailing Address

Address 1	142E LORONG J TELOK KURAU	Address 2	SINGAPORE 425972	Address 3	
Address 4		Address Type	Singapore address	Post Code	425972
Unit No.		Related Policy Number	5080456734-02		

Insured Object: SLD1289P

Endorsements

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

Continue Cancel

Claim Handling

Exit

Accident HT/0998506

Policy No.	5080456734-02	Vehicle No.	SLD1289P	GST Registration No.	
Policyholder Name	SWIFT-AIRE ENGINEERING SERVICES	Cover Type	Comprehensive	Policyholder NRIC	S2631534W
Product Code	COMMERCIAL VEHICLE INSURAI	Contact No.(Office)	0	Loading	0
Contact No.(Mobile)	98800408	Special Remark		Contact No.(Home)	0
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	Full
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	20	eCode Reason	
NCD Protection	No			Private Hire	Yes
<b>Accident Details</b>					
Report Date	13/06/2018 11:54	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	12/06/2018	Time of Accident hh:mm	18:40	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	CTE (CITY) BEFORE PIE (TUAS) EXIT				
<b>Benefits</b>					
<b>Excess</b>					
Own damage Excess	2,000.00	Additional Excess		Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	2,000.00	Outside Singapore TP Excess			
<b>GST Registered Information</b>					
GST Registered	No	GST Registration Date		GST Status Verified	No
GST Registration No.					
Modification History					

Policyholder Mailing Address

Address 1	142E LORONG 3 TELOK KURAU	Address 2	SINGAPORE 425972	Address 3	
Address 4		Address Type	Singapore address	Post Code	425972
Unit No.		Related Policy Number	5080456734-02		

OT Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	29/10/1966
Unnamed driver Name	TAN GEOK SENG	Driver NRIC	S1747903B	Driving Experience	28
Register Date of Driver License	26/07/1989	Driver Age	51	Contact No.(Home)	0
Contact No.(Mobile)	90028710	Contact No.(Office)	0	Address 3	
Address 1	142E LORONG 3 TELOK KURAU	Address 2	SINGAPORE 425972	Post Code	425972
Address 4		Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

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

Modification History

Claim 001 **New**

Claim Type *	CO-MD	Insured Name	SWIFT-AIRE ENGINEERING SER	Insured NRIC	S2631534W
Contact No.(Mobile)	90028710	Contact No.(Home)		Contact No.(Office)	NIL
Email Address		OT Vehicle Number	SLD1289P	TP Vehicle Number	GX2855C
Claim Description	SLD1289P / GX2855C ON 12 Jun 2018				
Preferred Workshop Contact No.		Insured Liability *	Fullly at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Income to assign workshop	GIA report	Received
Date Registered	13/06/2018 11:57	Claim Close Date		Date Received	13/06/2018 00:00
Report Taken By	Jackson				

Print AK letter

Save Submit

Attachment

Accident No.	HT/0998506	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	13/06/2018 12:00

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



ASSIGNMENT (IDAC)

By CSO- Nature of Accident:

- 1) Vehicle hit Vehicle:
  - a) Motorcar ( )
  - b) M/cycle ( )
  - c) Bicycle ( )
- 2) Vehicle hit ??
  - a) Pedestrian ( )
  - b) Animal ( )
- 3) Vehicle hit Road Side Objects:
  - a) Govrn. Property ( )  
(Eg: signboard, barrier, tree etc)
  - b) Road Work Object ( )
  - c) Private Property ( )
- 4) Vehicle drop into drain ( )
- 5) Damage due to Act of God:
  - a) Fallen Object ( )
  - b) Flood ( )
  - c) Other, \_\_\_\_\_
- 6) Parked & Found Damaged:
  - a) Vandalism ( )
  - b) Hit by Moving Object ( )
- 7) Theft Case
  - a) Stolen ( )
  - b) Damage found when recovered. ( )
- 8) Fire
  - a) Whilst driving ( )
  - b) Parked ( )
- 9) Accident date more than 24hrs ( )

Remarks for internal information

Remarks to appear in Works Order & Assessment report

- 1) Potential Total Loss ( )
- 2) SRS Light on ( )
- 3) ABS Light on ( )

By Assessor- 1) Vehicle Information

Veh No: SLD 1289 P Yr Regn: 16 May 2016  
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / MPV / Truck / Trailer or  
 Make & Model: Nissan Teana 2.0 <sup>X2 CVT</sup> <sub>1997</sub>  
 Colour: Black Transmission Type: Auto / Manual  
 Eng/No: \_\_\_\_\_ Sp. Reading: 187813  
 C/No: MNTBBAL33Z0005703  
 Gen. Cond: Good / Fair / Poor / Burnt or  
 Steering: Inorder / Jammed / Leaked / Burnt or  
 Brake: Inorder / Jammed / Leaked / Burnt or  
 Modi: Nil / S/Rim / STD A/Rim or  
 Tyre Size: F: 215/55 R17  
 R: \_\_\_\_\_  
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or  
 Front Rear  
 R/Bal. 4 mm R/Bal. 5 mm  
 L/Bal. 4 mm L/Bal. 5 mm  
 Parallel Import: Yes No Towed-In: Yes / No  
 Repair Type: LS / I.B.I Towing Required: Yes / No  
 No of Repair Days: 7 Vehicle in Idac: Yes / No  
 D.O.I. 13/6/2018 Time: 2.05 pm

By Assessor- 2) Comments

- 1) Damages not due to recent accident.
- 2) Damages do not seem hit onto:
  - a. Vehicle ( ) b. Motorcycle ( ) c. Bicycle ( ) d. Pedestrian ( )
  - e. Animal ( ) f. Govrn Object ( ) g. Road Work Object ( )
  - h. Private Property ( ) i. Drain ( ) j. Road Kerb/Grass Verge ( )
- 3) Vehicle does not seem damaged as a result of:
  - a. Fallen Object ( ) b. Flood ( ) c. Vandalism ( ) d. Fire ( )
  - e. Moving Object ( ) f. Stolen ( ) g. Stolen & Recovered ( )

Time Started:

Time completed:

1) CSO

2) ASS

3) Entire Operation Completed Time:

**MOTOR CAR (Pri)**

**Front Portion**

Vehicle No: **SLD 1289 P**

NAC	INC	Item	CON	AC	Qty
1001	991886	Frt Number Plate			
1002	991887	Frt Number Plate Base			
1003	991889	Frt Number Plate Garnish			
1004	991300	Frt Bumper			
1005	992341	Frt Bumper Clips	DD		
1006	991325	Frt Bumper Bracket	NFC		6
1007	991462	Frt Bumper Side Retainer			
1008	991433	Frt Bumper Reinforcement	DIS		
1009	991318	Frt Bumper Beam			
1010	991468	Frt Bumper Sponge			
1011	991427	Frt Bumper Protector			
1012	991420	Frt Bumper Pad			
1013	991363	Frt Bumper Grille			
1014	991301	Frt Bumper Moulding			
1015	991407	Frt Bumper Lower Spoiler			
1016	991438	Frt Bumper Sensor LH			
1017	995100	Frt LH Bumper Fog Lamp Cover	CUT		
1018	991355	Frt RH Bumper Fog Lamp Cover	DIS		
1019	995079	Frt LH Bumper Fog Lamp			
1020	995080	Frt RH Bumper Fog Lamp			
1021	991793	Frt Grille			
1022	991328	Frt Grille Emblem			
1023	991799	Frt Grille Chrome Moulding			
1024	991222	Frt Apron Panel			
1025	992013	Frt Support Panel			
1026	992025	Frt Support Panel Top Garnish Cover			
1027	992416	Horn			
1028	991277	Frt Brace Panel			
1029	995153	Frt LH Headlamp Assy			
1030	991821	Frt RH Headlamp Assy	CRA		
1031	995088	Frt LH Side Lamp			
1032	995089	Frt RH Side Lamp			
1033	990248	Bonnet			
1034	991328	Bonnet Emblem	BUC		
1035	990287	Bonnet Lock			
1036	990285	Bonnet Insulator			
1037	990273	Bonnet Hinge LH	CUT		
1038	990261	Bonnet Damper	BT		
1039	990305	Bonnet Rubber			
1040	990252	Bonnet Cable	CUT		
1041	990311	Bonnet Stand			
1042	990119	Air Con Condenser			
1043	990122	Air Con Fan Assy			
1044	990134	Air Con Suction Pipe (Low Pressure)			
1045	990118	Air Con Suction Hose			
1046	990133	Air Con Discharge Pipe (High Pressure)			
1047	990114	Air Con Discharge Hose			
1048	990149	Air Con Liquid Pipe			
1049	995066	Air Con Receiver Drier			
1050	990111	Air Con Compressor Assy			
1051	995294	Air Con Belt			
1052	995074	Radiator			
1053	992738	Radiator Cowling			
1054	992742	Radiator Fan Assy			
1055	992745	Radiator Fan Clutch			
1056	992758	Radiator Hose Top			
1057	992757	Radiator Hose Bottom			
1058	992741	Radiator Expansion Tank			
1059	990151	Air Duct			
1060	990070	Air Cleaner Assy			
1061	990056	Air Cleaner Hose			
1062	990089	Air Cleaner Resonator			
1063	991712	Frt Exhaust Manifold			
1064	991713	Frt Exhaust Manifold Cover			
1065	991054	Frt Exhaust Manifold Sensor (Oxygen)			
1066	991714	Front Exhaust Pipe			
1067	990219	Battery			
1068	990224	Battery Cover			
1069	990223	Battery Bracket			
1070	990229	Battery Tray			

NAC	INC	Item	CON	AC	Qty
1071	992205	Fuse Box			
1072	994011	Relay Box			
1073	995053	Wiper Washer Tank			
1074	995052	Wiper Washer Tank Motor			
1075	990159	Alternator Assy			
1076	990160	Alternator Belt			
1077	992688	Power Steering Pump			
1078	992669	Power Steering Belt			
1079	994431	Power Steering Cooler Pipe			
1080	992692	Power Steering Hose			
1081	990010	ABS Pump Control Unit			
1082	990427	Brake Master Pump Assy			
1083	990403	Brake Booster Pump Assy			
1084	991005	Engine Top Cover			
1085	991011	Engine Under Cover			
1086	990946	Engine Mounting			
1087	990949	Engine Mounting Frt			
1088	990950	Engine Mounting LH			
1089	990952	Engine Mounting RH			
1090	990951	Engine Mounting Rear			
1091	992234	Gear Box Mounting			
1092	991520	Frt LH Chassis Member			
1093	991520	Frt RH Chassis Member			
1094	990728	Frt Vertical Cross Member			
1095	991863	Frt Lower Cross Member			
1096	995070	Frt LH Fender			
1097	995072	Frt LH Fender Lower Panel	BUC		
1098	995147	Frt LH Fender <del>Trim</del>	BT		
1099	995148	Frt LH Fender Protector	DIS		
1100	991740	Frt LH Fender Inner Shield			
1101	995179	Frt LH <del>Wheel</del> Door	CRA		
1102	995170	Frt LH Wheel <del>Rim</del> Dr Rubber	BT		
1103	994025	Frt LH Rim <del>Cover</del> Dr Moulding			
1104	995065	Frt LH Tyre			
1105	995071	Frt RH Fender			
1106	991739	Frt RH Fender Inner Panel			
1107	991744	Frt RH Fender Lamp			
1108	991752	Frt RH Fender Protector			
1109	991740	Frt RH Fender Inner Shield			
1110	991884	Frt RH Mudflap			
1111	992087	Frt RH Wheel Rim			
1112	994025	Frt RH Rim Cover			
1113	995065	Frt RH Tyre			
1114	992093	Frt Windscreen Glass			
1115	992117	Frt Windscreen Rubber			
1116	992108	Frt Windscreen Moulding			
1117	992098	Frt Windscreen Sealant			
1118	991019	ERP Bracket			
1119	991020	ERP Unit			
1120	992140	Frt Wiper Arm			
1121	992142	Frt Wiper Blade			
1122	995045	Wiper Panel Garnish			
1123	991126	Firewall Panel	CUT		
1124	990753	Dashboard Assy			
1125	992282	Glove Box Cover			
1126	992281	Glove Box Compartment			
1127	994483	Steering Wheel Airbag			
1128	994485	Steering Wheel Airbag Sensor			
1129	990749	Dashboard Airbag			
1130	990750	Dashboard Airbag Sensor			
1131	990029	Airbag Control Unit			
1132	990864	Frt Driver Seat			
1133	991922	Frt RH Seat Belt Assy			
1134	991899	Frt Passenger Seat			
1135	995182	Frt LH Seat Belt Assy			
1136	990247	Sticker			
		Headlamp Washer Cover M.S			
		LH Day Running Light			

No of Items: \_\_\_\_\_

Accessories: \_\_\_\_\_

**Claim Handling**

[Task Transfer](#) [Exit](#)

**Accident MT/0998506**

[LOG](#) [SAL](#) [SUB](#)

Policy No.	5080456734-02	Vehicle No.	SLD1289P	GST Registration No.	
Policyholder Name	SWIFT-AIRE ENGINEERING SERVICES			Policyholder NRIC	52831534W
Product Code	COMMERCIAL VEHICLE INSURAT	Cover Type	Comprehensive	Loading	0
Contact No.(Mobile)	98800408	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	<input type="text" value=""/>
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	20	Private Hire	Yes

**Accident Details**

Report Date	13/06/2018 11:54	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	12/06/2018	Time of Accident H:mm	18:40	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	ICM No.	
Accident Location	CTE (CITY) BEFORE PIE (TUAS) EXIT				

**Benefits**

**Excess**

Own damage Excess	2,000.00	Additional Excess		Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	2,000.00	Outside Singapore TP Excess			

**GST Registered Information**

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	yes
Modification History	13/06/2018 14:37:09 Emily Tan changed GST Status Verified from No to Yes		

**Policyholder Mailing Address**

Address 1	142E LORONG 3 TELOK KURAU	Address 2	SINGAPORE 425972	Address 3	
Address 4		Address Type	Singapore address	Post Code	425972
Unit No.		Related Policy Number	5080456734-02		

**OI Driver Info**

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	29/10/1966
Unnamed driver Name	TAN GECK SENG	Driver NRIC	S1747903B	Driving Experience	28
Register Date of Driver License	26/07/1989	Driver Age	51	Contact No.(Home)	0
Contact No.(Mobile)	90028710	Contact No.(Office)	0	Address 3	
Address 1	142E LORONG 3 TELOK KURAU	Address 2	SINGAPORE 425972	Post Code	425972
Address 4		Address Type	Singapore address		
Unit No.		Driver vehicle No.		Driver Insurer Company	
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No				

**Declaration**

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

Modification History

**Investigation**

**Claim 001 OD-MD**

**Claim Case Officer Ng Hak Joo**

[LOG](#) [SAL](#) [SUB](#)

Claim Type	OD-MD	Insured Name	SWIFT-AIRE ENGINEERING SER	Insured NRIC	52831534W
Contact No.(Mobile)	90028710	Contact No.(Home)		Contact No.(Office)	NIL
Email Address		OI Vehicle Number	SLD1289P	TP Vehicle Number	GX2855C
Claim Description	SLD1289P / GX2855C ON 12 Jun 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability	Fully at Fault	GIA report	Received
Require Finalisation	Yes	Preferred Repair Option	Income to assign workshop	Date Received	14/06/2018 10:57
Date Registered	13/06/2018 12:01	Claim Close Date		Total Loss but Repaired	
Report Taken By	Jackson	Workshop Repairer		OD Excess Collected by Workshop	

Print AK letter

Modification History

**Special Claim Creation Approval**

Approval	Reason
Remarks	

**damage assessment Attachment**

**Vehicle Info**

Vehicle Make	NISSAN	Vehicle Model	OTHERS	Engine Capacity	1.99
Date of Registration	16/05/2016	Class No.	MNTBBAL3320005703	Parallel Import *	<input type="radio"/> Yes <input checked="" type="radio"/> No
Towing Required *	<input checked="" type="radio"/> Yes <input type="radio"/> No	Vehicle in IDAC *	<input checked="" type="radio"/> Yes <input type="radio"/> No	Survey Current Status	
Type of Tender *	Own Damage	Assessor Name *	SIMON		
IDAC/Workshop Name	NATIONAL ASSESSMENT CENTR	IDAC/Workshop Location	51 LBS AVENUE 1 #01-25 PAYA		
Windscreen Parts & Labour Cost		Total Loss *	<input type="radio"/> Yes <input checked="" type="radio"/> No		
Market Value(\$)		Scrape Value(\$)		Economical Repair Value(\$)	

REMARK: NO OF REPAIR DAY: 7 DAYS. 1 X AIR CON SUCTION PIPE (LOW PRESSURE) - UNCONFIRM. 1 X RELAY BOX - UNCONFIRM. 1 X FRT LH FENDER TOP TRIM - REPLACE. 1 X FRT LH DOOR MOULDING - UNCONFIRM. 3 X HEADLAMP WASHER COVER - REPLACE. 1 X HEADLAMP WASHER - REPLACE. 1 X LH DAY RUNNING LIGHT - REPLACE.

Remark

Damage Listing

Find a Part	No.	Part No.	Description	Qty *	Repair Code *	
root	1	16000101	BUMPER (FRONT)	1	Replace	X
Not Applicable	2	16002401	BUMPER CLIPS (FRONT)	6	Replace	X
ABS	3	16005001	BUMPER REINFORCEMENT (FRONT)	1	Unconfirm	X
ABSORBER	4	16005101	BUMPER RETAINER (FRONT LEFT)	1	Replace	X
ACCELERATOR	5	16005901	BUMPER SPONGE (FRONT)	1	Unconfirm	X
ACTUATOR	6	16005501	BUMPER SENSOR (FRONT)	1	Replace	X
ADVERTISEMENT STICKER	7	16002901	BUMPER FOG LAMP COVER (FRONT LEFT)	1	Replace	X
AIR BAG	8	16002701	BUMPER FOG LAMP (FRONT LEFT)	1	Unconfirm	X
AIR BLOWER	9	27700101	HEAD LAMP (LEFT)	1	Replace	X
AIR BOX	10	149001	BONNET	1	Replace	X
AIR CHAMBER BOX	11	149029	BONNET INSULATOR	1	Replace	X
AIR CLEANER	12	14902201	BONNET HINGE (LEFT)	1	Replace	X
AIR COMPRESSOR	13	14901301	BONNET DAMPER (LEFT)	1	Unconfirm	X
AIR CON	14	149041	BONNET RUBBER (CENTRE)	1	Replace	X
AIR CON (VAN)	15	112023	AIR CON CONDENSER	1	Unconfirm	X
AIR COOLER	16	344001	RADIATOR	1	Unconfirm	X
AIR DISTRIBUTOR	17	141001	BATTERY	1	Unconfirm	X
AIR FILTER	18	26600102	FUSE BOX (CENTRE)	2	Unconfirm	X
AIR FLOW	19	25400102	FENDER (FRONT LEFT)	1	Replace	X
AIR GRILLE	20	25400801	FENDER INNER PANEL (FRONT LEFT)	1	Replace	X
AIR HORN	21	25400901	FENDER INNER SHIELD (FRONT LEFT)	1	Replace	X
AIR INTAKE	22	23300201	DOOR (FRONT LEFT)	1	Replace	X
AIR RESONATOR BOX	23	23306101	DOOR RUBBER (FRONT LEFT)	1	Unconfirm	X
AIR THROTTLE BODY AND SENSOR	24	43600101	TYRE (FRONT LEFT)	1	Unconfirm	X
ALARM	25	454009	WIPER PANEL GARNISH	1	Replace	X
ALTERNATOR						
ALUMINIUM PANEL - SIDE						
AMPLIFIER						
ANTENNA						
ANTI ROLL						
APRON						
ARCH						
ARM REST						
ASH TRAY						
AUTO CLUTCH						
AUTO COOLER PPE						
AUTO CRUISE MOTOR						
AUTO TRANSMISSION						

Save Submit

## LKK Paya Ubi

---

**From:** Ng Hak Joo <hakjoo.ng@income.com.sg>  
**Sent:** Thursday, 14 June 2018 3:54 PM  
**To:** AMKAUTOPOINT  
**Cc:** LKK Paya Ubi  
**Subject:** RE: MT/0998506-001, VEHICLE NUMBER: SLD1289P

Dear Ms Jolle

We spoke, please tow this vehicle from Idac and contact owner Mrs Tan of Swift Aire Engrg Services at 98800408 when the vehicle arrived at your workshop to revert on the repair days, OD excesss included gst is \$2140/-.

Our Ref: MT/CA/OD/051/0998506-001/NHJ  
14 Jun 2018

AMK AUTOPOINT PTE LTD  
BLK 10 ANG MO KIO INDUSTRIAL PARK 2A  
#01-22 AMK AUTOPOINT  
SINGAPORE 568047

Dear Sir

**CLAIM NUMBER: MT/0998506-001**  
**REPAIR OF VEHICLE NUMBER: SLD1289P**

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

Award Date: 14 Jun 2018

Make: NISSAN

Model: OTHERS

Estimated Repair Days: 7

Location: NATIONAL ASSESSMENT CENTRE SERVICES

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

Benefits Applicable: N/A

Excess Applicable: 2000.00

Please note that supplementary items will not be allowed.

If you have any queries, please contact Ng Hak Joo at 64307890 or email us at motor@income.com.sg.

Yours sincerely

Low Choo Mee

Senior Manager

Motor Insurance

---

**From:** AMKAUTOPOINT [mailto:amkautopoint@singnet.com.sg]

**Sent:** Thursday, June 14, 2018 2:11 PM

**To:** Ng Hak Joo <hakjoo.ng@income.com.sg>

**Subject:** Tender (SLD1289P - 0998506)

Hi Hak Joo,

Please note the tender as below:

MT No: 0998506

Vehicle No: SLD1289P

Model: Nissan Others

Parts Listed In Remarks Column:

- Head Lamp Washer Cover – 1X Replace : S\$ 150

Parts: S\$ 150 + S\$ 3107 = S\$ 3257

Labour: S\$ 730

Parts & Labour: S\$ 3987

Number of Repair Days: 7 Days

Thanks and Regards

Joelle Tan

AMK Autopoint Pte Ltd

10 Ang Mo Kio Industrial Park 2A

#01-22

Singapore 568047

Tel: 6484 7928 | Fax: 6484 6923

---

Disclaimer

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



NATIONAL ASSESSMENT CENTRE SERVICES  
(LKK GROUP)

51 Ubi Ave 1, #01-25, Paya Ubi Industrial Park,  
Singapore 408933, TEL: 6841 0055 FAX: 6841 6315



Vehicle Movement Form

Vehicle Check-In

Vehicle No: SLD1289P Date In: \_\_\_\_\_ Time In: \_\_\_\_\_ with Keys: Yes / No

*For Office use*

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

Workshop Collection of Vehicle

Workshop: Bodyfix

Collection Date: 14/06/18 Time: 1630 with Keys: Yes / No

Tow Truck No: YN7944K Tow Man: Jacky NRIC: 1922610C

Signature: \_\_\_\_\_

96691023

*For office use*

Attended by: Sham Hui

Approved by: \_\_\_\_\_

Workshop Return of Vehicle

Workshop: \_\_\_\_\_

Returned Date: \_\_\_\_\_ Time: \_\_\_\_\_ with Key: Yes / No

\* Tow In / Drive In  
Tow Man / Workshop Representative: \_\_\_\_\_ NRIC: \_\_\_\_\_

Signature: \_\_\_\_\_

*For office use*

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

Owner Collection of Vehicle

Collection Date: \_\_\_\_\_ Time: \_\_\_\_\_ with Key: Yes / No

Owner: \_\_\_\_\_ NRIC: \_\_\_\_\_

Signature: \_\_\_\_\_

*For office use*

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

Approved by: \_\_\_\_\_