

NATIONAL Assessment Centre Services

Date In: 25/06/18	Job description	Date & Time Completed	Done by
Ref No: NA/INC18011459/13	SAS e-filing		
Veh No: 5KE3850L	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 24/06/18 1000	i-Motor Claim Form	MT/0999838 - 001	
<input checked="" type="radio"/> 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: WALL	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

NA1803964	Invoice Preparation Checklist	Amt (\$) 1st 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)		
Cat 1:	6) TR : Re-inspection \$75		
Cat 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 30		
	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	25/06/2018 09:56
Date Of Accident	24/06/2018 10:00
Exact Location Of Accident	BLK 13A UPP BOON KENG RD MSCP
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKE3850L
Insured/Policyholder	
Name Of Registered Owner	NG YEO TIONG
NRIC No	S7037276B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81136967
Alternative Phone No	OTHERS-93707508

Vehicle Particulars

Manufacturer	TOYOTA
Model	ESTIMA
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5061666989-04
Cover Note Number	

Driver

Name of Driver	IAN NG YI LE
NRIC No	S9731119F
Date Of Birth	10/09/1997
Occupation	INDOOR
Date Of Driving Pass	12/10/2017
Driving Experience	0 YEAR AND 8 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-93707508
Fax Number	
Contact Number	
Email Address	NGYILE@GMAIL.COM

Address	BLK 13 UPPER BOON KENG ROAD #09-943
Postcode	380013
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PROPERTY
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

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	
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	NA/UNKNOWN
Name of Driver	
NRIC/Passport Number	
Contact Number	
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:

 25/06/18

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

UP OUT

BLK 13A UPP BOON KEN
MSCA

A - SKE 3850L

The diagram shows a corner formed by two perpendicular lines. Two rectangular objects are positioned near the corner. Object A is tilted and has two asterisks and an arrow pointing towards the corner. Object B is horizontal and has an arrow pointing away from the corner. Two arrows point upwards along the vertical wall. The text 'UP OUT' is at the top left, 'BLK 13A UPP BOON KEN MSCA' is at the top right, and 'A - SKE 3850L' is in the middle right.

I was exiting the carpark and another vehicle was travelling towards me on my right. To give my vehicle more space to turn, I shifted towards the left and the left side of my vehicle collided into the wall.

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

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

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9731119F



Name

IAN NG YI LE

黄以乐

Race

CHINESE

Date of birth

10-09-1997

Sex

M

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S9731119F

IAN NG YI LE

Birth Date: 10 Sep 1997

Issue Date: 12 Oct 2017



6053415

NRIC No: S9731119F



Date of issue

25-06-2012

Address

APT BLK 13 UPPER BOON KENG ROAD
#09-943
SINGAPORE 380013

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

EFFECTIVE DATE

Class 3A Motor cars without clutch pedals (Auto) with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight \leq 2500kg 12 Oct 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

24/06/2018 10:00

Vehicle No.(For Motor)

SKE3850L

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="checkbox"/>	5061666989-04	NG YEO TIONG	S7037276B	GPC	drivo CLASSIC	SKE3850L	SKE3850L	25/09/2017	24/09/2018

Claim Handling

Accident MT/0999838

Policy No.	5061666989-04	Vehicle No.	SKE3850L	GST Registration No.	
Policyholder Name	NG YEO TIONG			Policyholder NRIC	570372768
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	81136967	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
KFK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	50	Private Hire	No

▼ Accident Details

Report Date	25/06/2018 11:23	Accident Report Within 24 hrs	Yes	Accident Type	Others
Date of Accident	24/06/2018	Time of Accident hh:mm	10:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	BLK 13A UPP BOON KENG RD MSCP				

▼ Benefits

Coverage		Sum Insured	
Excess Waiver		99999999.99	
Transport Allowance		99999999.99	

▼ Excess

Own damage Excess	0.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	0.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

▼ GST Registered Information

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

▼ Policyholder Mailing Address

Address 1	BLK 13 #09-943	Address 2	UPPER BOON KENG ROAD	Address 3	SINGAPORE 380013
Address 4		Address Type	Singapore address	Post Code	380013
Unit No.	09-943	Related Policy Number	5061666989-04		

▼ OI Driver Info

Driver Name	IAN NG YI LE	Driver Type	Named Driver		
Unnamed driver Name		Driver NRIC	S9731119F	Driver DOB	10/09/1997
Register Date of Driver License	12/10/2017	Driver Age	20	Driving Experience	0
Contact No.(Mobile)	93707508	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 13	Address 2	UPPER BOON KENG ROAD	Address 3	SINGAPORE 380013
Address 4		Address Type	Foreign address	Post Code	380013
Unit No.	#09-943				
Does he own a Singapore Registered car?	Yes <input type="radio"/> No <input type="radio"/>	Driver Vehicle No.		Driver Insurer Company	

Declaration

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

Claim 001 OD-MD

New

Claim Type *	OD-MD	Insured Name	NG YEO TIONG	Insured NRIC	S70372768
Contact No.(Mobile)	81136967	Contact No.(Home)	67474998	Contact No.(Office)	
Email Address	YEOTIONG@PCRM.COM	OI Vehicle Number	SKE3850L	TP Vehicle Number	WALL
Claim Description	SKE3850L / WALL ON 24 Jun 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault		
Require Finalisation	Yes	Preferred Repair Option	income to assign workshop	GIA report	Received
Date Registered	25/06/2018 11:29	Claim Close Date		Date Received	25/06/2018 00:00
Report Taken By	ROSINDA	Workshop Repairer		Total Loss but Repaired	
<input checked="" type="checkbox"/> Print AK letter				OD Excess Collected by Workshop	

Save

Submit

Attachment

Accident No.	MT/0999838	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	25/06/2018 00:00
Path *		Category *	Confidential
		Urgency *	Descr

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

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	
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 25 Jun 2018 11:29	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-6-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Jun 2018 11:28	SAS	Normal	SAS 2018-6-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Jun 2018 11:28	Photos	Normal	Photos 2018-6-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Jun 2018 11:28	Photos	Normal	Photos 2018-6-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Jun 2018 11:28	Photos	Normal	Photos 2018-6-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Jun 2018 11:28	Photos	Normal	Photos 2018-6-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Jun 2018 11:28	Photos	Normal	Photos 2018-6-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Jun 2018 11:27	Photos	Normal	Photos 2018-6-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Jun 2018 11:27	Photos	Normal	Photos 2018-6-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Jun 2018 11:27	Photos	Normal	Photos 2018-6-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Jun 2018 11:27	Photos	Normal	Photos 2018-6-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Jun 2018 11:27	Photos	Normal	Photos 2018-6-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Jun 2018 11:27	Photos	Normal	Photos 2018-6-25

Video List

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

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) Govn. 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: SKE 380 L Yr Regn: 25 Sep 2008
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover (MPV)
 / Truck / Trailer or _____
 Make & Model: Toyota Estima 2.4X C.C. 2362
 Colour: Silver Transmission Type: Auto / Manual
 Eng/No: _____ Sp. Reading: 194387
 C/No: ACR50 7067359
 Gen. Cond: Good / Fair / Poor / Burnt or _____
 Steering: In order / Jammed / Leaked / Burnt or _____
 Brake: In order / Jammed / Leaked / Burnt or _____
 Mod: Nil / S/Rim / STD A/Rim or _____
 Tyre Size: F: 245/45 R17
 R: _____
 BS / DUN / EXNOVA / GY / FS / LIZA (MIC) OHTSU / PIR / SUMI /
 TOYO / YOKO or _____
 Front Rear
 R/Bal. 4 mm R/Bal. 4 mm
 L/Bal. 4 mm L/Bal. 4 mm
 Parallel Import: Yes / No Towed-In: Yes / No
 Repair Type: LS I.B.I Towing Required: Yes / No
 No of Repair Days: 5 Vehicle in Idac: Yes / No
 D.O.I. 25/6/2018 Time: 2.20pm

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. Govn 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 (LH)

Left Portion

NAC	INC	Item	CON	AC	Qty
1255	995326	Frt LH Door	BR	✓	
1256	995140	Frt LH Door Protector			
1257	995104	Frt LH Door Hinge			
1258	995142	Frt LH Door Wing Mirror	BR	✓	
1259	995102	Frt LH Door Garnish Lower		?	
1260	991593	Frt LH Door Glass Outer Moulding			
1261	991588	Frt LH Door Glass Inner Moulding			
1262	995103	Frt LH Door Glass			
1263	991595	Frt LH Door Glass Regulator			
1264	991596	Frt LH Door Glass Regulator Motor			
1265	991662	Frt LH Door Rubber		?	
1266	991636	Frt LH Door Outer Handle	BR	✓	
1267	991607	Frt LH Door Inner Handle			
1268	991625	Frt LH Door Lock w/Key			
1269	991624	Frt LH Door Lock		?	
1270	991562	Frt LH Door Central Lock			
1271	991675	Frt LH Door Switch			
1272	991617	Frt LH Door Inner Trim Board			
1273	991568	Frt LH Door Checker			
1274	991575	Frt LH Door Felt			
1275	991688	Frt LH Door Wire Harness			
1276	991683	Frt LH Door Window Glass Pillar			
1277	991640	Frt LH Door Outer Pillar			
1278	991613	Frt LH Door Inner Pillar			
1279	991646	Frt LH Door Pillar Inner Garnish			
1280	990554	Centre Pillar LH			
1281	990542	Centre Inner Pillar LH			
1282	990517	Centre Pillar Upper Garnish LH			
1283	990564	Centre Pillar Lower Garnish LH			
1284	991670	Frt LH Door Step Garnish			
1285	994052	Rocker Panel LH			
1286	994049	Rocker Panel Inner Panel LH			
1287	994046	Rocker Panel Garnish LH			
1288	994055	Rocker Panel Outer Side Skirt LH			
1004	991300	Frt Bumper	SCR		
1006	991325	Frt Bumper Bracket			
1007	991462	Frt Bumper Side Retainer			
1008	991433	Frt Bumper Reinforcement			
1010	991468	Frt Bumper Sponge			
1011	991427	Frt Bumper Protector			
1014	991301	Frt Bumper Moulding			
1015	991407	Frt Bumper Lower Spoiler			
1029	995153	Frt LH Headlamp Assy			
1031	995088	Frt LH Side Lamp			
1096	995070	Frt LH Fender			
1098	995147	Frt LH Fender Lamp			
1099	995148	Frt LH Fender Protector			

Vehicle No: SKE 3800 L

NAC	INC	Item	CON	AC	Qty
1289	995156	Rear LH Door	BR	✓	
1290	993282	Rear LH Door Protector			
1291	995194	Rear LH Door Hinge			
1292	993228	Rear LH Door Garnish			
1293	993278	Rear LH Door Glass Outer Moulding			
1294	993231	Rear LH Door Glass Inner Moulding			
1295	995190	Rear LH Door Glass			
1296	993238	Rear LH Door Glass Regulator			
1297	995192	Rear LH Door Glass Regulator Motor			
1298	993294	Rear LH Door Rubber		?	
1299	993275	Rear LH Door Outer Handle	BR	✓	
1300	993250	Rear LH Door Inner Handle			
1301	993261	Rear LH Door Lock			
1302	993256	Rear LH Door Inner Trim Board			
1303	993218	Rear LH Door Checker			
1304	993230	Rear LH Door Glass Channel			
1305	993242	Rear LH Door Glass Triangle Garnish			
1306	993285	Rear LH Door 1/4 Glass			
1307	993288	Rear LH Door 1/4 Glass Rubber			
1308	993287	Rear LH Door 1/4 Glass Pillar			
1309	993305	Rear LH Door Step Garnish			
1310	993309	Rear LH Door Switch			
1311	994070	Roof Top Panel			
1312	994098	Roof Top Moulding			
1313	994085	Roof Top Air-bag			
1314	994084	Roof Top Air-bag Sensor			
1315	994083	Roof Top Air-bag Control Unit			
1141	992958	Rear Bumper			
1147	992976	Rear Bumper Bracket			
1148	993068	Rear Bumper Side Retainer			
1149	993045	Rear Bumper Reinforcement			
1151	993077	Rear Bumper Sponge			
1153	993040	Rear Bumper Protector			
1155	993026	Rear Bumper Moulding			
1157	993023	Rear Bumper Lower Spoiler			
1163	993851	Rear LH Taillamp			
1218	993436	Rear LH Fender			
1219	993449	Rear LH Fender Protector			
1136	990247	Sticker			

No of Items: _____

Assessor: _____

Claim Handling

Task Transfer Exit

Accident MT/0999838

LOS SAL SUB

Policy No.	5061666989-04	Vehicle No.	SKE3850L	GST Registration No.	
Policyholder Name	NG YEO TIONG			Policyholder NRIC	S7037276B
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	81136967	Contact No.(Office)	0	Contact No.(Home)	0
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(%)	50	Private Hire	No

Accident Details

Report Date	25/06/2018 11:23	Accident Report Within 24 hrs	Yes	Accident Type	Others
Date of Accident	24/06/2018	Time of Accident hh:mm	10:00	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	ICM No.	
Accident Location	BLK 13A UPP BOON KENG RD MSCP				

Benefits

Coverage	Sum Insured
Excess Waiver	99999999.99
Transport Allowance	99999999.99

Excess

Own damage Excess	0.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	0.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

GST Registered Information

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

Policyholder Mailing Address

Address 1	BLK 13 #09-943	Address 2	UPPER BOON KENG ROAD	Address 3	SINGAPORE 380013
Address 4		Address Type	Singapore address	Post Code	380013
Unit No.	09-943	Related Policy Number	5061666989-04		

OI Driver Info

Driver Name	IAN NG YI LE	Driver Type	Named Driver		
Unnamed driver Name		Driver NRIC	S9731119F	Driver DOB	10/09/1997
Register Date of Driver License	12/10/2017	Driver Age	20	Driving Experience	0
Contact No.(Mobile)	93707508	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 13	Address 2	UPPER BOON KENG ROAD	Address 3	SINGAPORE 380013
Address 4		Address Type	Foreign address	Post Code	380013
Unit No.	#09-943				
Does he own a Singapore Registered car?	Yes <input checked="" type="radio"/> No <input type="radio"/>	Driver Vehicle No.		Driver Insurer Company	

Declaration

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

Investigation

Claim 001 OD-MD

Claim Case Officer Teng Ken Leong

LOS SAL SUB

Claim Type	OD-MD	Insured Name	NG YEO TIONG	Insured NRIC	S7037276B
Contact No.(Mobile)	81136967	Contact No.(Home)	67474998	Contact No.(Office)	
Email Address	YEO TIONG@PCRIM.COM	O1 Vehicle Number	SKE3850L	TP Vehicle Number	WALL
Claim Description	SKE3850L / WALL ON 24 Jun 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability	Fully at fault		
Require Finalisation	Yes	Preferred Repair Option	Income to assign workshop	GIA report	Received
Date Registered	25/06/2018 11:30	Claim Close Date		Date Received	26/06/2018 09:42
Report Taken By	ROSLINDA	Workshop Repairer		Total Loss but Repaired	
<input checked="" type="checkbox"/> 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	ESTJMA	Engine Capacity	
Date of Registration	25/09/2008	Classis No.	ACR507067359		
Towing Required *	<input checked="" type="radio"/> Yes <input type="radio"/> No	Vehicle in IDAC *	<input checked="" type="radio"/> Yes <input type="radio"/> No	Parallel Import *	<input checked="" type="radio"/> Yes <input type="radio"/> No
Type of Tender *	Own Damage	Assessor Name *	SIMON	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 *	<input type="radio"/> Yes <input checked="" type="radio"/> No		
Market Value(\$)		Scrape Value(\$)		Economical Repair Value(\$)	

NO OF REPAIR:5 DAYS,FRT LH DOOR GARNISH LOWER-UNCONFIRM,FRT LH DOOR LOCK-UNCONFIRM,

Remark

Damage Listing

Find a Part	No.	Part No.	Description	Qty *	Repair Code *	
root						
Not Applicable	1	23300201	DOOR (FRONT LEFT)	1	Replace	X
ABS	2	23304102	DOOR MIRROR (FRONT LEFT)	1	Replace	X
ABSORBER	3	23306101	DOOR RUBBER (FRONT LEFT)	1	Unconfirm	X
ACCELERATOR	4	16000101	BUMPER (FRONT)	1	Repair	X
ACTUATOR	5	23302801	DOOR HANDLE (OUTER) (FRONT LEFT)	1	Replace	X
ADVERTISEMENT STICKER	6	23300203	DOOR (REAR LEFT)	1	Replace	X
	7	23306103	DOOR RUBBER (REAR LEFT)	1	Unconfirm	X
	8	23302803	DOOR HANDLE (OUTER) (REAR LEFT)	1	Replace	X

Save Submit



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: SEE3850L Date In: 21/10/2014 Time In: 10:00 with Keys: Yes / No

For Office use

Attended by: _____

Workshop Collection of Vehicle

Workshop: City Auto Pte Ltd.

Collection Date: 21/10/2014 Time: 10:00 with Keys: Yes / No ☒

Tow Truck No: _____ Tow Man: Danny NRIC: 92373709

Signature: _____

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: _____

LKK Paya Ubi

From: Teng Ken Leong <kenleong.teng@income.com.sg>
Sent: Tuesday, 26 June 2018 5:31 PM
To: City Auto Pte Ltd
Cc: NAC Paya Ubi; Teng Ken Leong
Subject: Vehicle No SKE3850L - Successful Tender for Repair : OD Claim No MT/0999838-001 (DOA : 24/6/18)

Dear Mrs Quak

Please be informed that City Auto is successful in the tender to repair the above-mentioned vehicle.

The vehicle is currently at Idac Paya Ubi.

We have informed the owner, Mr Ng Yeo Tiong that transport allowance of S\$50/- per day, subject to maximum of 7 days is payable to him. Please arrange the payment to Mr Yeo.

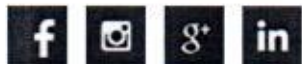
Please make arrangement to tow back the vehicle and proceed with the repair.

Upon completion of repair, please contact the owner's spouse, Mrs Ng @ 9452 8352 to collect the vehicle.

Please note that no supplementary will be approved.

With Regards

Teng Ken Leong
Assistant Manager
Motor Insurance
T +65 6430 7881
www.income.com.sg



Our Ref: MT/CA/OD/051/0999838-001/TKL

26 Jun 2018

CITY AUTO PTE LTD
BLK 8 #01-58 TO 66
SIN MING INDUSTRIAL EST SECTOR C
SINGAPORE 575643

Dear Sir

CLAIM NUMBER: MT/0999838-001

REPAIR OF VEHICLE NUMBER: SKE3850L

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

Award Date: 26 Jun 2018

Make: TOYOTA

Model: ESTIMA

Estimated Repair Days: 4

Location: NATIONAL ASSESSMENT CENTRE (PAYA UBI)

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

Benefits Applicable: Transport Allowance and Excess Waiver

Excess Applicable: 0.00

Please note that supplementary items will not be allowed.

If you have any queries, please contact Teng Ken Leong at 64307881 or email us at motor@income.com.sg.

Yours sincerely
Low Choo Mee
Senior Manager
Motor Insurance

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