

NATIONAL Assessment Centre Services

Form: NA-001

Date In: 10/07/2018 10:16	Job description	Date & Time Completed	Done by
Ref No: NA/INC18012504/P4	SAS e-filing		
Veh No: SJJ5596T	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 05/07/2018 16:40	i-Motor Claim Form	MT/1002363-001	10/7/18 12:45
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: SJG 70.48L 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: NA1900395

Date/Time	Actions
10/7/18 12:55	I have already Email to Mr. Clarence (NTUC) for expected outcome...
10/7/18 14:10	I spoken to Mr. Clarence and he said just keep it because the vehicle was drive away by driver.
10/7/2018	Mr. Clarence spoke to me on phone that just bill them as 1518 HRS Report only - because the driver going to other place to do the

19/7/2018 Mr. Clarence inform just put as 1507 HRS. Report only

Claimant's Particulars:- do not change anything	Invoice Preparation Checklist		Am't (\$) In Bill	Am't (\$) Add Bill
Driver/Owner:	1) AR: Accident Reporting (\$30);			
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)			
Damaged Portion:	3) TF: Towing Fee \$40/\$45			
QC Checked by (Engr-In-Charge):	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:-			
	On:			
	*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			
Cat. 1:	Invoice dated	Fee Charged		
Cat. 2/3:	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	10/07/2018 10:16
Date Of Accident	05/07/2018 16:40
Exact Location Of Accident	TAMPINES STREET 81
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJJ5596T
Insured/Policyholder	
Name Of Registered Owner	OOI GAIK CHOO
NRIC No	S7074898C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90085493
Alternative Phone No	OTHERS-90085493

Vehicle Particulars

Manufacturer	TOYOTA
Model	CAMRY 2.4 AUTO ABS AIRBAG
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	5051208822-06
Cover Note Number	

Driver

Name of Driver	CHOW KIA JOO
NRIC No	S12090121
Date Of Birth	05/02/1956
Occupation	INDOOR
Date Of Driving Pass	11/07/1977
Driving Experience	40 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90085493
Fax Number	
Contact Number	OTHERS-90085493
Email Address	NOEMAIL

Address	BLK 468A FERNVALE LINK #13-535
Postcode	791468
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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	
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	MARINE PARADE NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 74 MARINE DRIVE #01-35 , POSTCODE: 440074 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4409999 - FAX NO: 64474182
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20180705/2148

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	SJG7048L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
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.

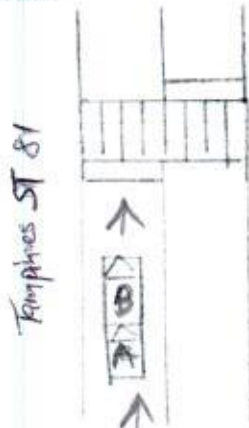
Policyholder's Signature
Date & Time:

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

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

Accident Sketch Plan

SKETCH PLAN



BSJG7048L
A: SJJ5596T

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - T/20180705/2148

[The remaining lines of the form are crossed out with a diagonal line.]

DECLARATION

(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.:

10/7/2018



**SINGAPORE
POLICE FORCE**



T/20180705/2148

Police Station Of Origin:
Marine Parade NPP
74 Marine Drive #01-35 SINGAPORE 440074
Tel No: 1800-4409999

1 of 3

Report No. T/20180705/2148

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/07/2018 19:34	Vide Report No.:	Station Diary No.: 27
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Informant's Particulars

Name of Informant: CHOW KIA JOO			Address: APT BLK 468A FERNVALE LINK #13-535 SINGAPORE 791468		
ID Type / ID No.: NRIC NO / S12090121			Contact No.: Home/Office: Mobile: 90085493		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 62	Date of Birth: 05/02/1956	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: Sales and marketing manager			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 05/07/2018 16:40	Type of Location: Straight Road
Location: Along Road 1 TAMPINES STREET 81				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control:	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJG7048L	Car				Slightly Damaged	0
SJJ5596T	Car				Slightly Damaged	0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20180705/2148

Police Station Of Origin:
Marine Parade NPP
74 Marine Drive #01-35 SINGAPORE 440074
Tel No: 1800-4409999

2 of 3

Report No. T/20180705/2148

CONTINUATION OF REPORT

Driver				
Name	TOH CHIN PENG		ID No.	S1357440E
Related Vehicle	SJG7048L (Car)		Contact No.	NIL
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
Driver				
Name	CHOW KIA JOO		ID No.	S1209012I
Related Vehicle	SJJ5596T (Car)		Contact No.	90085493
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

Brief Details.

On the above mentioned date place and time, I am driving my vehicle SJJ5596T along Tampines Street 81. The traffic was slowing down as there is traffic light and the vehicle in front of me SJG7048L stopped, I then stopped behind him. Shortly after I release my brake as I thought that the traffic started to move, to my surprise, I had bump into the vehicle in front of mine.

We both get off the vehicle, took photograph and exchange particulars and decided to claim insurance

Both vehicle suffered slight scratches and dent on the bumper.



**SINGAPORE
POLICE FORCE**



T/20180705/2148

Police Station Of Origin:
Marine Parade NPP
74 Marine Drive #01-35 SINGAPORE 440074
Tel No: 1800-4409999

3 of 3

Report No. T/20180705/2148

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:
G /
Sgt 2 LIM XI HAO, NICHOLAS

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No.: 65476151

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
05/07/2018 19:34

Classification Of Case:

Driver

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S12090121



Name
CHOW KIA JOO
郭家裕
Race
CHINESE
Date of Birth
05-02-1956
Sex
M
Country of Birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S12090121
Name
CHOW KIA JOO
Birth Date: 05 Feb 1956
Issue Date: 29 Oct 2003



3358725



NRIC No: S12090121




Blood Group: - Date of issue
09-04-2003

APT BLK 488A FERNVALE LINK #13-535
SINGAPORE 791468
NRIC No: S12090121 Date: 16/09/2016

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

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

PASS DATE
11 Jul 1977



Licence No: S12090121
NP 428A

OWNER

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7074898C



Name

OOI GAIK CHOO

黄玉珠

Race

CHINESE

Date of Birth

25-12-1970

Sex

F

Country of Birth

MALAYSIA

S7074898C

8450904



NRIC No: S7074898C

Nationality

MALAYSIAN

Blood Group

O+

Date of issue

19-04-2002

APT BLK 488A FERNVALE LINK #13-535
SINGAPORE 791468

NRIC No: S7074898C

Date: 16/08/2016

[> Back to OneMotoring](#)

Enquire Transfer Fee

Vehicle Details

Vehicle No. :	SJJ5596T
Vehicle Type :	P10 - Passenger Motor Car
Vehicle Attachment 1 :	No Attachment
Vehicle Scheme :	Normal
Vehicle Make :	TOYOTA
Vehicle Model :	CAMRY 2.4 AUTO ABS AIRBAG
Chassis No. :	MR053BK4007030096
Propellant :	Petrol
Engine No. :	2AZE115934
Engine Capacity :	2362 cc
Maximum Power Output :	123.0 kW (164 bhp)
Maximum Laden Weight :	1970 kg
Unladen Weight :	1540 kg
Year Of Manufacture :	2008
Original Registration Date :	18 Sep 2008
Lifespan Expiry Date :	-
COE Category :	E - Open Category
Quota Premium :	\$14,858.00
COE Expiry Date :	17 Sep 2018
Road Tax Expiry Date :	17 Sep 2018
PARF Eligibility Expiry Date :	17 Sep 2018
Inspection Due Date :	17 Sep 2019
Intended Transfer Date :	10 Jul 2018
CO2 Emission :	-
CO Emission :	-
HC Emission :	-
NOx Emission :	-
PM Emission :	-

Late renewal fee(s) will be imposed if road tax / lay up has expired. Please use Enquire Road Tax Payable for fee(s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

Amount Payable

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Total Amount Payable :			25.00

You may print this page for reference.

OK

Print

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)

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5051208822-06	OOI GAIK CHOD	S7074898C	GPC	drivo CLASSIC	SJJ5596T	SJJ5596T	18/09/2017	17/09/2018

▼ Policy Information

Policy No.	5051208822-06	Policyholder Name	OOI GAIK CHOO	Policyholder NRIC	S7074898C
Address	BLK 468A #13-535 FERNVALE LINK FERNVALE LEA SINGAPORE 791468				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	08/09/2017	Effective Date	18/09/2017 00:00	Expiry Date	17/09/2018 23:59
Third Party Excess	0	Own damage Excess	0.0	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	0.0	Outside Singapore TP Excess	0		
Agent	TAN KOK HO EDMUND	Agent Tel.	96673188	GST Flag	Y
Co-Insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	BLK 468A #13-535	Address 2	FERNVALE LINK	Address 3	FERNVALE LEA
Address 4	SINGAPORE 791468	Address Type	Singapore address	Post Code	791468
Unit No.		Related Policy Number	5051208822-06		

▶ Insured Object: SJJ5596T

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
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Continue

Cancel

Claim Handling

Accident MT/1002363

Policy No.	5051208822-06	Vehicle No.	SJJ5596T	GST Registration No.	
Policyholder Name	OOI GAIK CHOO			Policyholder NRIC	S70
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	90085493	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(%)	30	Private Hire	No

▼ Accident Details

Report Date	10/07/2018 12:38	Accident Report Within 24 hrs	Yes	Accident Type	Colli
Date of Accident	05/07/2018	Time of Accident hh:mm	16:40	Country of Accident	Sing
Reporting Centre		Orange Force		ICM No.	
Accident Location	TAMPINES STREET 81				

▼ Benefits

Coverage		Sum Insured	
Excess Waiver		9999999999.99	
Transport Allowance		9999999999.99	

▼ Excess

Own damage Excess	0.00	Additional Excess	0	Windscreen Excess	100.
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 468A #13-535	Address 2	FERNVALE LINK	Address 3	FERNVALE LINK
Address 4	SINGAPORE 791468	Address Type	Singapore address	Post Code	791468
Unit No.		Related Policy Number	5051208822-06		

▼ OI Driver Info

Driver Name	CHOW KIA JOO	Driver Type	Named Driver		
Unnamed driver Name		Driver NRIC	S1209012I	Driver DOB	05/11/1951
Register Date of Driver License	01/01/1984	Driver Age	62	Driving Experience	34
Contact No.(Mobile)	90085493	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 468A	Address 2	FERNVALE LINK	Address 3	
Address 4		Address Type	Singapore address	Post Code	791468
Unit No.	#13-535				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Declaration

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

Claim 001 OD-MD

New

Claim Type *	OD-MD	Insured Name	OOI GAIK CHOO	Insured NRIC	S70	
Contact No.(Mobile)	90013940	Contact No.(Home)	67845020	Contact No.(Office)		
Email Address		OI Vehicle Number	SJJ5596T	TP Vehicle Number	SJJ	
Claim Description:	SJJ5596T / SJJ7048L ON 5 Jul 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	10/07/2018 12:46	Claim Close Date		Date Received	10/07	
Report Taken By	KRISHNASAMY	Workshop Repairer		Total Loss but Repaired		
<input checked="" type="checkbox"/> Print AK letter				OD Excess Collected by Workshop		

Save Submit

Attachment

Accident No.	MT/1002363	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	10/07/2018 12:45
Path *		Category *	Confidential
Choose File	No file chosen	Clear Please Select	NO
Choose File	No file chosen	Clear Please Select	NO
Choose File	No file chosen	Clear Please Select	NO
Choose File	No file chosen	Clear Please Select	NO
Choose File	No file chosen	Clear Please Select	NO
Choose File	No file chosen	Clear Please Select	NO
Choose File	No file chosen	Clear Please Select	NO
Message Read			

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jul 2018 12:45	NRIC/ Driving License	Normal	NRIC/ Driving Lic
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jul 2018 12:44	SAS	Normal	SAS 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jul 2018 12:43	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jul 2018 12:43	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jul 2018 12:43	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jul 2018 12:43	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jul 2018 12:43	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jul 2018 12:43	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jul 2018 12:43	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jul 2018 12:42	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jul 2018 12:42	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jul 2018 12:42	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jul 2018 12:42	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jul 2018 12:42	Photos	Normal	Photos 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jul 2018 12:42	Photos	Normal	Photos 2018

Video List

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

LKK Paya Ubi

From: Clarence Richard Anthony <clarence.anthony@income.com.sg>
Sent: Tuesday, 10 July 2018 1:00 PM
To: LKK Paya Ubi; ODsupport
Subject: RE: VEHICLE NO: SJJ5596T / OD / MT/1002363-001 /
Importance: High

Hi Krishna

Please pick up the damage assessment task from your to do list and key the damage listing as it is still pending at your end.

TASK TRANSFER

No

The pending tasks for this claim are listed below. You can select a task assigned to you

Select	Claim	Task Type	Assign To
	MT/1002363 001 OD-MD	damage assessment	NATIONAL ASSES CENTRE SERVI
	MT/1002363 001 OD-MD	evaluation	Zuraimee Bin Ma

Regards

Clarence Anthony
Manager
Motor Insurance
T +65 6430 7877
www.income.com.sg



From: LKK Paya Ubi [mailto:rspu@lkkauto.com]
Sent: 10 July, 2018 12:55 PM
To: Clarence Richard Anthony <clarence.anthony@income.com.sg>
Subject: VEHICLE NO: SJJ5596T / OD / MT/1002363-001 /

Hi

May I know your advise on the vehicle no: SJJ5596T which he as reported as OD claims and drive is vehicle away from idac.

He did not inform which workshop . I need your expected outcome.

Thank You,

Krishnasamy (Admin)

NATIONAL ASSESSMENT CENTRE SERVICES

51 Ubi Ave 1, #01-25, Paya Ubi Industrial Park,
Singapore 408933 Tel: 68410055 Fax : 68416315



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LKK Paya Ubi

From: Clarence Richard Anthony <clarence.anthony@income.com.sg>
Sent: Wednesday, 11 July 2018 1:06 PM
To: Simon Ho (LKKAuto)
Cc: LKK Paya Ubi
Subject: RE: VEHICLE NO: SJJ5596T / OD / MT/1002363-001

Hi Simon

Thanks for your reply. As you mentioned that 'another customer on the way to send his car for damage assessment'. I believe the other customer had not arrived yet when our policyholder was there. As the damage to our insured's car is minor, I believe it would not have taken more than 20 minutes to complete the assessment.

Regards

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From: Simon Ho (LKKAuto) [mailto:SimonHo@lkkauto.com]
Sent: 11 July, 2018 10:27 AM
To: Clarence Richard Anthony <clarence.anthony@income.com.sg>
Cc: LKK Paya Ubi <rspu@lkkauto.com>
Subject: RE: VEHICLE NO: SJJ5596T / OD / MT/1002363-001

Hi Clarence,

At the time of this customer came in we have another customer on the way to send his car for us to do damaged assessment, thus we explain to this Customer he has to leave his car for 2-3 hours in order for us to do the damaged assessment.

Best Regards
Simon Ho
LKK Auto Consultants

From: LKK Paya Ubi
Sent: Wednesday, 11 July, 2018 9:29 AM

To: Simon Ho (LKKAuto)
Subject: FW: VEHICLE NO: SJJ5596T / OD / MT/1002363-001
Importance: High

Hi

Pls advise

Best Regards,
Roslinda | Admin
National Assessment Centre Services (LKK Group)
Phone: 6841-0055 | email: rspu@lkkauto.com | fax: 6841-6315
Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Clarence Richard Anthony [<mailto:clarence.anthony@income.com.sg>]
Sent: Wednesday, 11 July 2018 9:01 AM
To: LKK Paya Ubi
Cc: ODsupport
Subject: RE: VEHICLE NO: SJJ5596T / OD / MT/1002363-001
Importance: High

Hi Krishnasamy

We received feedback from the owner that when he reported the accident at your centre, he was asked to leave his car there for at least 3 hours so that the damage assessment could be carried out. The OI felt the damage to his car was very minor and to leave his car down for 3 hours was unacceptable.

Could you review this case and let me know what happened.

I need your reply by Tuesday (17 July 2018).

Regards

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Manager
Motor Insurance
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From: Clarence Richard Anthony
Sent: 10 July, 2018 1:00 PM
To: 'LKK Paya Ubi' <rspu@lkkauto.com>; ODsupport <ODsupport@income.com.sg>
Subject: RE: VEHICLE NO: SJJ5596T / OD / MT/1002363-001 /
Importance: High

Hi Krishna

Please pick up the damage assessment task from your to do list and key the damage listing as it is still pending at your end.

TASK TRANSFER

No

The pending tasks for this claim are listed below. You can select a task assigned to you

Select	Claim	Task Type	Assign To
<input type="checkbox"/>	MT/1002363 001 OD-MD	damage assessment	NATIONAL ASSES CENTRE SERVI
<input type="checkbox"/>	MT/1002363 001 OD-MD	evaluation	Zuraimee Bin Ma

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