

NATIONAL Assessment Centre Services. (wef 1 Jan 05) **NA118101477**

Date In: 6/8/18-15:42	Job description	Date & Time Completed	Done by
Ref No: NA/INC18014287/24	SAS e-filing		
Veh No: 5J0730734	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 5/8/18 - 01:10	i-Motor Claim Form	M7/1006170-001	6/8/18 17:27
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: JK25678U	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

NA1804924	Invoice Preparation Checklist		Am't (\$) Inc Bill	Am't (\$) 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			
	5) FT : Follow-Through Survey (Resurvey) \$30			
	For claiming against INC Only (wef 10 Jan 2005)			
	6) TR : Re-inspection \$75			
	7) N1 : Idao DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
	Q1:			
	*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: Idao Mobile 30			
	Invoice dated	Fee Charged		
	Invoice dated	Fee Charged		

Auditors' Comments:-

Pat. 1:

Pat. 2 / 3:

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	06/08/2018 15:42
Date Of Accident	05/08/2018 01:10
Exact Location Of Accident	JUNC SEMBAWANG RD & SEMBAWANG PL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM3073H
Insured/Policyholder	
Name Of Registered Owner	H & H CAR RENTAL & LEASING
Co Reg No	53331980C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999

Vehicle Particulars

Manufacturer	HYUNDAI
Model	HD AVANTE 1.6 A
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5078818993-02
Cover Note Number	

Driver

Name of Driver	MUHAMMAD FIRDAUZ BIN ZAINAL ABIDIN
NRIC No	S8508539E
Date Of Birth	29/03/1985
Occupation	OUTDOOR
Date Of Driving Pass	25/06/2007
Driving Experience	11 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-93384647
Fax Number	
Contact Number	OFFICE-93384647
Email Address	NOEMAIL

Address	BLK 689 JURONG WEST CENTRAL 1 #02-217
Postcode	640689
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	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?	YES
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)	2
Passenger 1	NAME: : - GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BISHAN NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 20 BISHAN STREET 23 , POSTCODE: 579757 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5529999 - FAX NO: 65561905
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20180806/2027.

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	SKZ5678U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TOH JUN HONG, KENNETH
NRIC/Passport Number	S8848684F
Contact Number	93687157
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

DETAILS OF INJURED PERSON 1

Name

MUHAMMAD FIRDAUZ BIN ZAINAL ABIDIN

Approximate Age

Injuries Sustain

RIGHT HAND AND NECK

Injured person in which vehicle?

SJM3073H

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

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.:

SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - 7/20/54506/2027

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.:



SINGAPORE POLICE FORCE



T/20180806/2027

1 of 3

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

Report No. T/20180806/2027

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/08/2018 11:29		Vide Report No.:		Station Diary No.: 65	
Informant's Particulars					
Name of Informant: MUHAMMAD FIRDAUZ BIN ZAINAL ABIDIN			Address: APT BLK 689 JURONG WEST CENTRAL 1 #02-217 SINGAPORE 640689		
ID Type / ID No.: NRIC NO / S8508539E			Contact No.: Home/Office: Mobile: 93384647		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 33	Date of Birth: 29/03/1985	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 2B,3,4 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 05/08/2018 01:10	Type of Location: Straight Road
Location: Along Road 1 SEMBAWANG ROAD				
Along Sembawang Road towards Canberra Road				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		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
SJM3073H	Car	HYUNDAI	HD AVANTE 1.6 A	Silver	Seriously Damaged	1
SKZ5678U	Car	HONDA	VEZEL 1.5X CVT	Black	Slightly Damaged	0

Details of Person Involved

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



Police Station Of Origin:

Bishan N.P.C

20 Bishan Street 23 SINGAPORE 579757

Tel No: 1800-5529999

Report No. T/20180806/2027

CONTINUATION OF REPORT

Driver			
Name	MUHAMMAD FIRDAUZ BIN ZAINAL ABIDIN	ID No.	S8508539E
Related Vehicle	SJM3073H (Car)	Contact No.	93384647
Hospital/Clinic	SIN MIN CLINIC	Class of Driving Licence & Expiry Date	Class: 2B,3,4 Date of Expiry: NIL
Date Treatment	06/08/2018	Date Discharge	06/08/2018
No. of Days granted Medical Leave	07	Degree of Injury	Slight
Driver			
Name	Toh Jun Hong, Kenneth	ID No.	S8848684F
Related Vehicle	SKZ5678U (Car)	Contact No.	93687157
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 05/08/2018 at around 01:10am, I was driving vehicle: SJM3073H along Sembawang Road towards Canberra Road near to T-Junction of Sembawang Road and Sembawang Place when I saw a vehicle in front of me slowing down. I proceeded to slow down and suddenly a vehicle: SKZ5678U hit my rear causing my vehicle to be pushed forward. Due to the strong impact, my vehicle was pushed forward about a few meters away from the incident location. I also noticed that the vehicle had knocked into my rear causing my rear bumper to be dented and my rear right taillight to be smashed and out of place.

I exchanged particulars with the other party before we left the scene. I wish to state that I do not have any in-car camera in my vehicle. I also wish to state that I have a passenger in my vehicle at that point of time but she did not complain of any pain. I also wish to state that on 06/08/2018, I felt some pain in my right hand and neck area as such I went to see a doctor and got 7 days MC.

I am lodging this report for insurance claims.



**SINGAPORE
POLICE FORCE**



T/20180806/2027

3 of 3

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

Report No. T/20180806/2027

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:

E /

Sgt 2 KHAIRUL SYAZWAN BIN SAHAK

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

06/08/2018 11:29

Officer In Charge Of Case:

TP / AEIT /

Sr Staff Sgt MOHAMAD ZULFAZDLI BIN
ABDULLAH

Contact No.: 65475367

Authentication Stamp


NP168

**SINGAPORE
POLICE FORCE**


SN 061

SIGNATURE

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8508539E





Name: MUHAMMAD FIRDAUZ BIN ZAINAL ABIDIN
 محمد فريدوز بن زائل شالين
 Race: MALAY
 Date of birth: 29-03-1985 Sex: M
 Country of birth: SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8508539E
 Name: MUHAMMAD FIRDAUZ BIN ZAINAL ABIDIN

Birth Date: 29 Mar 1985
 Issue Date: 21 Sep 2015

002475257A

SG 50

4522768



NRIC No: S8508539E




Date of issue: 19-01-2010


Address: APT BLK 689 JURONG WEST CENTRAL 1
 #02-217
 SINGAPORE 640689

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

	EFFECTIVE DATE
Class 2B Motorcycles ≤ 200 cc	19 Apr 2004
Class 3 Motor Cars ≤ 3000kg with ≤ 7 passengers, exclusive of the driver; and other motor vehicles ≤ 2500kg	25 Jun 2007
Class 4 *Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg	26 Apr 2010



Licence No: S8508539E



NP 428A

eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI_800601

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

Policy Query

Policy No. Date of Accident

Vehicle No. (For Motor) Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5078818993-02		H & H CAR RENTAL & LEASING	53331980C	GFT	drive CLASSIC	SJM3073H	SJM3073H	28/03/2018	

Policy Information

Policy No.	5078818993-02	Policyholder Name	H & H CAR RENTAL & LEASING	Policyholder NRIC	53331980C				
Certificate No.									
Address	61 UBI AVENUE 2 #04-12 AUTOMOBILE MEGAMART SINGAPORE 408898								
Product Name	FLEET INSURANCE	Plan	Group Policy Flag N						
Policy issue Date	26/03/2018	Effective Date	28/03/2018 00:00	Expiry Date	27/03/2019 23:59				
Excess Type	All Claims Excess								
Third Party Excess	1500.00	Own damage Excess	2000.00	Windscreen Excess	100.00				
Additional Excess	0	OS Premium	0						
Outside Singapore OD Excess	2000.00	Outside Singapore TP Excess	1500.00	Young/Inexperience Driver Excess					
Agent	S & M ALLIANCE PTE LTD	Agent Tel.	96354288	GST Flag	Y				
Co-insurance Flag	No								
Open Policy Info									
Certificate Info									

Policyholder Mailing Address

Address 1	61 UBI AVENUE 2	Address 2	#04-12 AUTOMOBILE MEGAMART	Address 3	SINGAPORE 408898
Address 4			Address Type	Singapore address	Post Code
Unit No.	04-12	Related Policy Number	5078818993-02		

Insured Object: SJM3073H

Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	28/03/2018 00:00	Basic Information Endorsement	000001286783202	Endorsement Take Effective	<p>Thank you for giving us the opportunity to serve you. We confirm that the following vehicle(s) has/have been deleted from this policy: VEHICLE NUMBER CANCELLATION DATE REFUND PREMIUM (INCL GST) 1. SLH503G 28-03-2018 \$1,176.42 2. SLN731H 28-03-2018 \$1,076.30 3. SGY385A 28-03-2018 \$1,076.30 4. SGY4788U 28-03-2018 \$1,076.30 5. SLS5380C 28-03-2018 \$1,176.42 In view of this amendment, a refund of \$5,581.74 (inclusive of GST) will be adjusted against the outstanding premium.</p> <p>Thank you for giving us the opportunity to serve you. We confirm that the following vehicle(s) has/have been deleted from this policy: VEHICLE NUMBER CANCELLATION DATE REFUND PREMIUM (INCL GST) 1. SJE6937M 02-05-2018 \$1,063.61 In view of this amendment, a refund of \$1,063.61 (inclusive of GST) will be adjusted against the outstanding premium.</p> <p>Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover the following vehicle(s) as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. SLR8973E 10-05-2018 \$949.50 In view of this amendment,</p>
2	03/05/2018 00:00	Basic Information Endorsement	000001286809556	Endorsement Take Effective	<p>Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover the following vehicle(s) as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. SLR8973E 10-05-2018 \$949.50 In view of this amendment,</p>

Claim Handling

Accident MT/1006170

Policy No.	5078818993-02	Vehicle No.	SJM3073H	GST Registration No.	
Certificate No.					
Policyholder Name	H & H CAR RENTAL & LEASING			Policyholder NRIC	53331900C
Product Code	FLEET INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	0	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	<div><div></div><div></div></div>
WPK	<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(%)	0	Private Hire	Yes
<div><div></div> Accident Details</div>					
Report Date	06/08/2018 17:25	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	05/08/2018	Time of Accident (hh:mm)	01:10	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	JUNG SEMBAWANG RD & SEMBAWANG PL				
<div><div></div> Benefits</div>					
<div><div></div> Excess</div>					
Own damage Excess	2,000.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		
<div><div></div> GST Registered Information</div>					
GST Registered	No	GST Registration Date		Yes	
GST Registration No.		GST Status Verified			
Modification History					
<div><div></div> Policyholder Mailing Address</div>					
Address 1	61 UBI AVENUE 2	Address 2	#04-12 AUTOMOBILE MEGAMALL	Address 3	SINGAPORE 408898
Address 4		Address Type	Singapore address	Post Code	408898
Unit No.	04-12	Related Policy Number	5078818993-02		
<div><div></div> 01 Driver Info</div>					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	29/03/1985
Unnamed driver Name	MUHAMMAD FIRDAUZ BIN ZAIN	Driver NRIC	S8508539E	Driving Experience	11
Register Date of Driver License	25/05/2007	Driver Age	33	Contact No.(Home)	0
Contact No.(Mobile)	93384947	Contact No.(Office)	0	Address 3	SINGAPORE 640689
Address 1	BLK 689	Address 2	JURONG WEST CENTRAL 1	Post Code	640689
Address 4		Address Type	Singapore address		
Unit No.	02-217				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	
<div><div></div> Declaration</div>					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No		

Modification History

Claim 001 New

Claim Type *	DD-MIX	Insured Name	H & H CAR RENTAL & LEASING	Insured NRIC	S3331980C
Contact No. (Mobile)		Contact No. (Home)		Contact No. (Office)	+
Email Address		OI Vehicle Number	SIM3073H	TP Vehicle Number	SKZ5678U
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select		
Claimant Name *		Claimant NRIC *			
Claim Description	SIM3073H / SKZ5678U ON 5 Aug 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	06/08/2018 17:27	Claim Close Date		Date Received	06/08/2018 00:00
Report Taken By	Jackson				
<input checked="" type="checkbox"/> Print A4 letter					

Save Submit

Attachment

Accident No.	MT/1006170	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	06/08/2018 17:30

Path *	Category *	Confidential	Urgency *	Description *
<input type="text"/>	<input type="button" value="Browse..."/> <input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/> <input type="button" value="YES"/>	<input type="button" value="Normal"/> <input type="button" value="Urgent"/>	<input type="text"/>
<input type="text"/>	<input type="button" value="Browse..."/> <input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/> <input type="button" value="YES"/>	<input type="button" value="Normal"/> <input type="button" value="Urgent"/>	<input type="text"/>
<input type="text"/>	<input type="button" value="Browse..."/> <input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/> <input type="button" value="YES"/>	<input type="button" value="Normal"/> <input type="button" value="Urgent"/>	<input type="text"/>
<input type="text"/>	<input type="button" value="Browse..."/> <input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/> <input type="button" value="YES"/>	<input type="button" value="Normal"/> <input type="button" value="Urgent"/>	<input type="text"/>

Browse...

Browse...

Clear

Please Select

NO

Normal

☐ Send Message

Upload

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Mag Sent? (CO)	Action
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 06 Aug 2018 17:30	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-8-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 06 Aug 2018 17:30	SAS	Normal	SAS 2018-8-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 06 Aug 2018 17:28	Photos	Normal	Photos 2018-8-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 06 Aug 2018 17:28	Photos	Normal	Photos 2018-8-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 06 Aug 2018 17:28	Photos	Normal	Photos 2018-8-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 06 Aug 2018 17:28	Photos	Normal	Photos 2018-8-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 06 Aug 2018 17:28	Photos	Normal	Photos 2018-8-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 06 Aug 2018 17:28	Photos	Normal	Photos 2018-8-6		Edit
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 06 Aug 2018 17:27	Photos	Normal	Photos 2018-8-6		Edit
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 06 Aug 2018 17:27	Photos	Normal	Photos 2018-8-6		Edit

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
<div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="border: 1px solid black; padding: 2px 10px;">Display in New Window</div> <div style="border: 1px solid black; padding: 2px 10px;">Scan and uploading</div> </div>				