

NATIONAL Assessment Centre Services [ref: JAR05]

Date In: 20/08/18	Job description	Date & Time Completed	Done by
Ref No: NA/INC18015057/13	SAS e-filing		
Veh No: GBA1809Z	E-mail (within 8hrs, A/C 2hrs)		
D.O.A: 27/07/2018 JWS	i-Motor Claim Form	MT/1007826-001	
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: 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

Claimant's Particulars :-	Invoice Preparation Checklist	Amt (\$)	Amt (\$)
		In Bill	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		
C. Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments :-	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
U. 1:	7) NI: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
U. 2/3:	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: Idao 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	20/08/2018 09:03
Date Of Accident	27/07/2018 22:45
Exact Location Of Accident	CAPITOL PIAZZA BASEMENT CARPARK EXIT DRIVEWAY
Country/State of Loss	SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA1809Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ASSA ABLOY ENTRANCE SYSTEMS SINGAPORE PTE LTD
Co Reg No	198401374E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67456228

#### Vehicle Particulars

Manufacturer	FIAT
Model	DOBLO 1.3
Exact Purpose for which vehicle was being used at time of accident	GO BACK TO OFFICE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	

Vehicle Category	COMMERCIAL VEHICLE
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#### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5092729402
Cover Note Number	

#### Driver

Name of Driver	KYI SOE WIN
Passport No/FIN	G5394168R
Date Of Birth	03/06/1980
Occupation	OUTDOOR
Date Of Driving Pass	17/12/2013
Driving Experience	4 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93693981
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 275 TAMPINES ST 22 #11-78
Postcode	520275
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	HIT BY FALLEN TREE / OTHER OBJECTS
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

I WAS EXITING CARPARK AT CAPITOL PIAZZA BASEMENT CARPARK EXIT DRIVEWAY. WHILE EXITING BASEMENT 3 MY VEH HIT ONTO THE WALL.

#### 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	WALL
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.

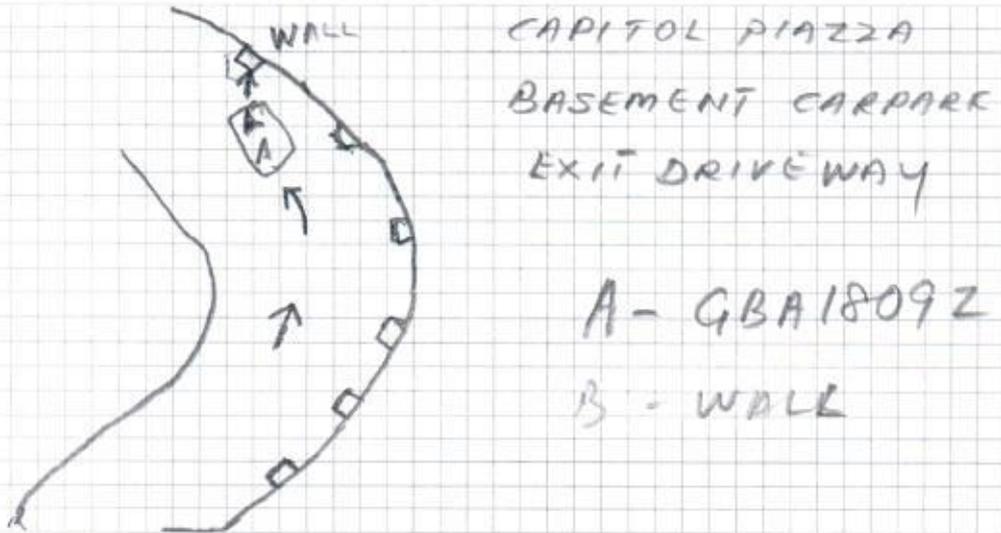
**ASSA ABLOY ENTRANCE SYSTEMS SINGAPORE PTE LTD**  
**CO REG NO:198401374E**

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

*[Signature]*  
7/8/18 4:00 PM  
\_\_\_\_\_  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

*[Signature]* 20/08/18  
\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

P/s refer to the statement.

DECLARATION

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

ASSA ABLOY ENTRANCE SYSTEMS SINGAPORE PTE LTD  
CD REG NO: 198401374E

Policyholder's Signature  
Date & Time:

Driver's Signature  
(If driver is not the policyholder)

Date & Time: 7/8/18  
4:00 Pm

Reporting Centre Personnel's Signature  
Name:

NRIC/FIN No.:

# ACCIDENT STATEMENT

ACCIDENT DATE: (27/07/2018) (DD/MM/YYYY), TIME: (22:45) (HH:MM)

LOCATION: CAPITOL PIAZZA BASEMENT CARPARK EXID DRIVE WAY

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: G6A 1809 Z  
b) INSURANCE COMPANY: INCOME  
c) POLICY NUMBER: 5092729402-01  
d) POLICY TYPE: (COMPREHENSIVE) THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: DAEWOO T3 MITO & FIAT  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: GO BACK TO OFFICE  
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES) / NO)  
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- A) NAME: A33A ABLOY (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 67456228  
c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: KYI JOE WIN (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: G 539A168 R CONTACT: 98693381  
c) ADDRESS: \* 11-78, BLK 275 TAMPINES STREET 22 SINGAPORE 520275  
\*d) DATE OF BIRTH: (08/06/1980) (DD/MM/YYYY)  
e) OCCUPATION: (INDOOR / OUTDOOR)  
f) YEARS OF DRIVING EXPERIENCE: 5 Years

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: \_\_\_\_\_

5. a) WEATHER CONDITION: (CLEAR) / RAINING / OTHERS \_\_\_\_\_  
b) ROAD SURFACE: (DRY) / WET / OTHERS \_\_\_\_\_  
6. WAS ANYBODY INJURED (YES / NO)  
7. a) REPORTED TO POLICE (YES / NO)  
IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: WALL MODEL: \_\_\_\_\_  
b) DRIVER'S NAME: \_\_\_\_\_  
c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
e) DRIVER'S NAME: \_\_\_\_\_  
f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

\* No of passengers  
(Including driver)  
(1)

\* No of passenger  
(Including driver)  
( )

\* No of passenger  
(Including driver)  
( )

AUTO DYNAMIC  
MR RAYMOND  
97288661

email =  
fax =

DRIVER  
07/08/18  
waiting for veh

**REPUBLIC OF SINGAPORE** DRIVING LICENCE

65394168R

NAME: KYI SOE WIN

Birth Date: 03 Jun 1980

Issue Date: 17 Dec 2013

Valid Till: 16 Dec 2018

00225 7019H

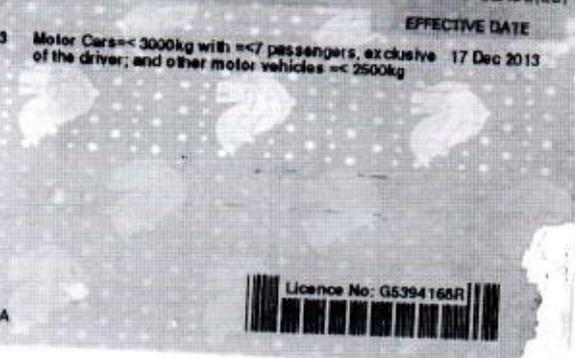


**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)**

	EFFECTIVE DATE
Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg	17 Dec 2013

NP 428A

Licence No: 65394168R





Enquire - Application/Pass Status

PEPOLENQM009

**Requestor's Particulars**

NRIC No / FIN / Malaysian : G5394168R  
 New IC No  
 Name : KYI SOE WIN

**Foreigner's Particulars**

Request made on 31/07/2018 09:24 AM

FIN	: G5394168R
Name	: KYI SOE WIN
Application No.	: R190618038002
Date of Application	: 19/06/2018
Pass Expiry Date	: 19/07/2019
Pass Type	: S PASS
Status	: Issued

**Disclaimer**

The status shown is accurate as at day of enquiry and is subjected to changes without prior notification from WPD.

To print this result page for your reference, please click

[Print Result](#)

To make another enquiry under the same requestor's particulars, please click

[New Enquiry](#)



### Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

**Certificate Number** : 5092729402-01

**Cover** : Comprehensive

- |   |   |
|---|---|
| 1. Index mark and Registration Number of Vehicle  | : <b>GBA1809Z</b>                               |
| Chassis Number  | : ZFA22300005499247                             |
| 2. Name of Policyholder   | : ASSA ABLOY ENTRANCE SYSTEMS SINGAPORE PTE LTD |
| 3. Effective Date of Insurance  | : 28 Jul 2018                                   |
| 4. Expiry Date of Insurance   | : 27 Jul 2019                                   |
| 5. Persons or Classes of Persons entitled to drive#   |   |
| (a) The Policyholder.   |   |
| (b) Any other person who is driving on the Policyholder's order or with his/her permission.   |   |
| Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. |   |
| 6. Limitations as to Use#   |   |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.   |   |
| (b) Use for the carriage of passengers or goods in connection with the Policyholder's business.   |   |

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : NLE INSURANCE AGENCIES PTE LTD (00000614580)

Date of Issue : 29 Jun 2018 17:57 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

\_\_\_\_\_  
Authorised Officer



\_\_\_\_\_  
Chief Executive

## Register New Vehicle (Acknowledgement)

### Vehicle Particulars

Vehicle No.:	GBA1809Z	Vehicle Scheme:	Normal
Vehicle Type:	A50 - Goods (Closed) Van/Van Panel (Delivery)	Vehicle Model:	DOBLO 1.3MJTD
Vehicle Make:	FIAT	Engine No.:	199A20001817560
Chassis No.:	ZFA22300005499247	Trailer Chassis No.:	-
Motor No.:	-	Passenger Capacity:	1
Propellant:	Diesel	Power Rating:	-
Engine Capacity:	1248 cc	Maximum Laden Weight:	2000 kg
Unladen Weight:	1300 kg	Secondary Colour:	-
Primary Colour:	White	Original Registration Date:	27 Mar 2007
First Registration Date:	27 Mar 2007	Open Market Value:	\$18,657.00
Manufacturing Year:	2007	Minimum PARF Benefit:	\$0.00
PARF Eligibility:	No		
No. of Transfers:	0		

### Owner Particulars

Owner Name:	BESAM (MANUFACTURING) PTE LTD
Owner ID Type:	Company
Owner ID:	198401374E
Registered Address Type:	Private Condo / Shopping / Office Complexes
Registered Block/House No.:	152
Registered Street Name:	UBI AVE 4
Registered Unit No.:	# 02 - 02
Registered Building Name:	ARMORCOAT TECHNOLOGIES BLDG
Registered Postal Code:	408826
COE No. / Expiry Date:	2007010105000910G / 26 Mar 2017
COE Bid Category:	C - Goods Vehicle & Bus
QP Paid:	\$1.00

### Transaction Details

Business Transaction Ref. No.:	20070327144206241981
Business Transaction Date:	27 Mar 2007
Business Transaction Time:	14:42:06

### Message

The above vehicle has been successfully registered.

There will be a delay of notification delivery to the recipient due to need for validation with the source agency.

OK

Land Transport Authority

Please read through the Privacy Policy, Conditions of Use and Disclaimer.  
Please do not use the **Back** or **Forward** buttons on your browser as this may alter the results of the transactions.  
Best viewed with IE 5.5 SP2 and above, 800 X 600 resolution  
Copyright © 2005 LTA | Privacy Policy | Conditions of Use | Disclaimer

**Claim Handling**

**Accident MT/1007826**

Policy No.	5092729402	Vehicle No.	GBA1809Z	GST Registrat
Certificate No.				
Policyholder Name	ASSA ABLOY ENTRANCE SYSTEMS SINGAPORE PTE LTD			Policyholder I
Product Code	FLEET INSURANCE	Cover Type	Comprehensive	Loading
Contact No.(Mobile)	0	Contact No.(Office)	67456228	Contact No.(F
Email Address		Special Remark		eCode
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reaso
NCD Protection	No	NCD Entitlement(%)	0	Private Hire

**Accident Details**

Report Date	20/08/2018 09:35	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	27/07/2018	Time of Accident hh:mm	22:45	Country of Ac
Reporting Centre		Orange Force		ICM No.
Accident Location	CAPITOL PIAZZA BASEMENT CARPARK EXIT DRIVEWAY			

**Benefits**

**Excess**

Own damage Excess	600.00	Additional Excess	Windscreen E
Unnamed Driver Excess		Outside Singapore OD Excess	
Third Party Excess	0.00	Outside Singapore TP Excess	

**GST Registered Information**

GST Registered	Yes	GST Registration Date	01/
GST Registration No.	M200644123	GST Status Verified	Yes
Modification History			

**Policyholder Mailing Address**

Address 1	33 UBI AVENUE 3	Address 2	#03-52 VERTEX	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	03-52	Related Policy Number	5092729402-01	

**OI Driver Info**

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	KYI SOE WIN	Driver NRIC	G5394168R	Driver DOB
Register Date of Driver License	17/12/2013	Driver Age	38	Driving Expe
Contact No.(Mobile)	93693981	Contact No.(Office)	0	Contact No.(I
Address 1	BLK 275	Address 2	TAMPINES STREET 22	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	#11-78			
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insure

**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-MX**

**New**

Claim Type *	OD-MX	Insured Name	[A]
Contact No.(Mobile)		Contact No. (Home)	[ ]
Email Address		OI Vehicle Number	[C]
Claim Description	GBA1809Z / WALL ON 27 Jul 2018		
Preferred Workshop	[ ]	Insured Liability	Fully at Fault
Finalisation	Yes	Repair Option	Income to assign workshop
Date Registered	20/08/2018 09:40	GIA report	Received
Report Taken By		Claim Close Date	[ ]
		Workshop Repairer	[ ]

Print AK letter

Save Submit

Attachment

Accident No. MT/1007826 Claim No. 001  
 Last Doc. Received:  Yes  No Upload Date 20/08/2018 00:00

Path *	Category *	Confid
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select	NO
<input type="button" value="Message Read"/>	<input type="button" value="Clear"/> Please Select	NO

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Confid
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:40		NRIC/ Driving License	Normal	NRIC/ Dr
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:40		NRIC/ Driving License	Normal	NRIC/ Dr
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:40		SAS	Normal	
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:40		Photos	Normal	P
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:40		Photos	Normal	P
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:40		Photos	Normal	P
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:40		Photos	Normal	P
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:40		Photos	Normal	P
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:40		Photos	Normal	P
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:40		Photos	Normal	P
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:40		Photos	Normal	P
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:39		Photos	Normal	P
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:39		Photos	Normal	P
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:39		Photos	Normal	P
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:39		Photos	Normal	P
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:39		Photos	Normal	P
 NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 20 Aug 2018 09:39		Photos	Normal	P

Video List

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**ASSIGNMENT (IDAC)**

COE Expired = 26 Mar 2022

**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: GBA 1F09 Z Yr Regn: 27 Mar / 2007  
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / M/T  
 / Truck / Trailer or \_\_\_\_\_  
 Make & Model: Fiat Doble 1.3M C.C. 1248  
 Colour: White Transmission Type: Auto / Manual  
 Eng/No: \_\_\_\_\_ Sp. Reading: No Power Supply  
 G/No: ZFA 22300005499247  
 Gen. Cond: Good / Fair / Poor / Burnt or \_\_\_\_\_  
 Steering: In order / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Brake: In order / Jammed / Leaked / Burnt or \_\_\_\_\_  
 Modi: Nil / S/Rim / STD A/Rim or \_\_\_\_\_  
 Tyre Size: F: 185 / 6R R15  
 R: \_\_\_\_\_  
 BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /  
TOYO / YOKO or \_\_\_\_\_  

Front		Rear
R/Bal.	<u>4</u> mm	R/Bal. <u>5</u> mm
L/Bal.	<u>4</u> mm	L/Bal. <u>5</u> mm

 Parallel Import: Yes  No  
 Repair Type: LS / I.B.I  
 No of Repair Days: 8  
 D.O.I. 20/8/2018  
 Towed-In: Yes / No  
 Towing Required: Yes / No  
 Vehicle in Idac: Yes / No  
 Time: 11.25am

**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 (UC)**

(07)Deformed (08)Shifted (09)Buckled (10)Broken (11)Necessary  
(12)Missing (13)Tom (14)Unconfirmed (15)Not Working

(4)Not Consistent (NC)

2852

Vehicle No: GBA 1509 Z

**Undercarriage**

NAC	INC	Item	CON	AC	Qty
1372	995163	Frt LH Shock Absorber			
1373	991944	Frt LH Shock Absorber Mounting			
1374	990632	Frt LH Coil Spring			
1375	995198	Frt LH Knuckle Arm			
1376	995199	Frt LH Knuckle Arm Bearing			
1377	995178	Frt LH Lower Arm			
1378	995169	Frt LH Upper Arm			
1379	995183	Frt LH Tie Rod			
1380	995143	Frt LH Drive Shaft			
1381	990661	Frt LH Control Arm			
1382	992062	Frt LH Trailing Arm			
1383	991848	Frt LH Leaf Spring			
1384	991293	Frt LH Brake Disc Rotor			
1385	991281	Frt LH Brake Caliper			
1386	991292	Frt LH Brake Pipe			
1387	991287	Frt LH Brake Hose			
1388	991295	Frt LH Brake Sensor Wire			
1389	991989	Frt Stay Bar Bracket			
1390	994455	Steering Rack & Pinion	BR		
1391	994435	Steering Cross Member		2	
1392	994519	Frt Sub Frame			
1393	992003	Frt Sub Frame Mounting			
1394	991217	Frt Anti Roll Bar		2	
1395	991219	Frt Anti Roll Bar Linkage	RH	2	
1396	990887	Engine Block			
1397	990890	Engine Block Gasket			
1398	990972	Engine Oil Sump			
1399	990960	Engine Oil			
1400	992224	Gear Box Assy			
1401	992229	Gear Box Gasket			
1402	992241	Gear Box Oil Sump			
1403	992257	Gear Oil			
	990534	Centre Exhaust Pipe Assy			
	990532	Centre Exhaust Mounting			
1404	991134	Floor Panel			
1405	993719	Rear LH Shock Absorber			
1406	993723	Rear LH Shock Absorber Mounting			
1407	993170	Rear LH Coil Spring			
1408	993550	Rear LH Knuckle Arm			
1409	993551	Rear LH Knuckle Arm Bearing			
1410	993597	Rear LH Lower Arm			
1411	993884	Rear LH Upper Arm			
1412	995161	Rear LH Drive Shaft			
1413	995216	Rear LH Control Arm			
1414	993881	Rear LH Trailing Arm			
1415	993573	Rear LH Leaf Spring			
1416	992941	Rear LH Brake Disc Rotor			
1417	992937	Rear LH Brake Caliper Assy			
1418	990434	Rear LH Brake Pipe			
1419	992946	Rear LH Brake Hose			
1420	993819	Rear Sub Frame			
1421	993820	Rear Sub Frame Mounting			
1422	992813	Rear Anti Roll Bar			
1423	990168	Rear Anti Roll Bar Linkage			
1424	990202	Axle Beam			
1425	990170	Rear Axle Panhard Rod			
1426	990810	Differential Assy			
1427	992706	Propeller Shaft			

NAC	INC	Item	CON	AC	Qty
1428	991935	Frt RH Shock Absorber	BT		
1429	991944	Frt RH Shock Absorber Mounting		2	
1430	990632	Frt RH Coil Spring			
1431	991844	Frt RH Knuckle Arm	DS		
1432	991845	Frt RH Knuckle Arm Bearing	KEC		
1433	991851	Frt RH Lower Arm	BT		
1434	992064	Frt RH Upper Arm			
1435	992040	Frt RH Tie Rod		2	
1436	991692	Frt RH Drive Shaft			
1437	990661	Frt RH Control Arm			
1438	992062	Frt RH Trailing Arm			
1439	991848	Frt RH Leaf Spring			
1440	991293	Frt RH Brake Disc Rotor			
1441	991281	Frt RH Brake Caliper			
1442	991292	Frt RH Brake Pipe			
1443	991287	Frt RH Brake Hose			
1444	991295	Frt RH Brake Sensor Wire			
1445	993720	Rear RH Shock Absorber			
1446	993723	Rear RH Shock Absorber Mounting			
1447	993173	Rear RH Coil Spring			
1448	993550	Rear RH Knuckle Arm			
1449	993551	Rear RH Knuckle Arm Bearing			
1450	993601	Rear RH Lower Arm			
1451	993885	Rear RH Upper Arm			
1452	993322	Rear RH Drive Shaft			
1453	993178	Rear RH Control Arm			
1454	995117	Rear RH Trailing Arm			
1455	995110	Rear RH Leaf Spring			
1456	992942	Rear RH Brake Disc Rotor			
1457	992938	Rear RH Brake Caliper Assy			
1458	990434	Rear RH Brake Pipe			
1459	992947	Rear RH Brake Hose			

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

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