

NATIONAL Assessment Centre Services (wef 1 Jan 2005)

Date In 21/08/18	Job description	Date & Time Completed	Done by
Ref No NA/INC18015184/13	SAS e-filing		
Veh No FU2152A	E-mail (w/dm 3hrs, AIC 2hrs)		
D.O.A 20/08/18 1430	i-Motor Claim Form	MT/1008123 -	001
OD (IP) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer	Ass't Report by <u>Fax / Hand to Owner/Wksp</u>		

Preferred Wksp / INC Assign Wksp / QW: (**MO 50 51**) Tel: Fax:)

TP Particulars:	Veh No: GV363D	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

NA1805045	Invoice Preparation Checklist		Amt (\$) Init 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			
	5) FT: Follow-Through Survey (Resurvey) \$30			
	For claiming against INC Only (wef 10 Jan 2005)			
	6) TR: Re-inspection \$75			
	7) NI: Idac 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: Idac Mobile 30			
	Invoice dated	Fee Charged		
	Invoice dated	Fee Charged		

Auditors' Comments :-

11.1:

11.2/3:

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	21/08/2018 11:58
Date Of Accident	20/08/2018 14:30
Exact Location Of Accident	CTE TWDS SLE B4 JLN BAHAGIA
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FU2152A
Insured/Policyholder	
Name Of Registered Owner	LEE KEE YONG
NRIC No	S1229651G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96874303
Alternative Phone No	OTHERS-96874303

Vehicle Particulars

Manufacturer	HONDA
Model	PHANTOM 200
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5096274935
Cover Note Number	

Driver

Name of Driver	LEE KEE YONG
NRIC No	S1229651G
Date Of Birth	16/10/1957
Occupation	OUTDOOR
Date Of Driving Pass	02/09/1983
Driving Experience	34 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96874303
Fax Number	
Contact Number	OTHERS-96874303
Email Address	NOEMAIL

Address	BLK 404 ANG MO KIO AVE 10 #05-645
Postcode	560404
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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	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

PLSR REFER TO THE POLICE REPORT: T/20180820/2188

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	GV363D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBF9439D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	LEE KEE YONG
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	FU2152A
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
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

(A010) FU 2152 A
(B) GV 363 D
(C) GBF 9439 D



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls refer to Police Report No:
T/20180820/2188

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:

 21/08/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20180820/2188

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

1 of 3

Report No. T/20180820/2188

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/08/2018 22:05		Vide Report No.:		Station Diary No.: 197	
Informant's Particulars					
Name of Informant: LEE KEE YONG			Address: APT BLK 404 ANG MO KIO AVENUE 10 #05-645 SINGAPORE 560404		
ID Type / ID No.: NRIC NO / S1229651G			Contact No.: Home/Office: 96874303 Mobile:		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 60	Date of Birth: 16/10/1957	Type of Informant: Rider		
Race: Chinese			Language: Chinese		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 20/08/2018 14:30	Type of Location:
Location: CENTRAL EXPRESSWAY CTE towards SLE before Jln Bahagia				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FU2152A	Motorcycle	HONDA	PHANTOM2 00	Green	Seriously Damaged	0
GBF9439D	Lorry				Slightly Damaged	1
GV363D	Lorry				Seriously Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FU2152A	NTUC Income Insurance Co-Operative Limited	5096274935	01/12/2017	30/11/2018

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	LEE KEE YONG	ID No.	S1229651G
Related Vehicle	FU2152A (Motorcycle)	Contact No.	96874303
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	20/08/2018	Date Discharge	20/08/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On 20/08/2018@2.30pm, I was riding my bike FU2152A along lane 4 of CTE towards SLE. Just before the exit into Jln Bahagia, a white lorry GV363D which was on lane 3 hit onto the rear of another lorry GBF9439D. When vehicle GV363D hit the rear of the vehicle GBF9439D, it swiped into my lane and hit onto the front right side of my motorbike, causing my motorbike to fall. Traffic police attended the accident and I was conveyed by ambulance to Tan Tock Seng Hospital. I received treatment and was given three days of MC. I am lodging this report for insurance claim.



**SINGAPORE
POLICE FORCE**



T/20180820/2188

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

3 of 3

Report No. T/20180820/2188

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 /
SI JASMINE NG HWEI TENG

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
Sr Staff Sgt IRMAN BIN MOHAMAD SAID
Contact No.: 65476365

Authentication Stamp
NP168

BISHAN NPC
20 BISHAN STREET 23
SINGAPORE 579757
TEL: 1800-5529999

Signature Of Informant

Date/Time:
20/08/2018 22:05

Classification Of Case:



SINGAPORE
POLICE FORCE

SN 061

SIGNATURE

Vehicle No.	FU 2152 A	Model / Make	HONDA Phantom 200
Date of Accident	20/08/18		
Time of Accident	1430 HRS		
Location of Accident	CTE towards SLE before Jin Bahagia.		
Exact purpose use during accident	Private Used		
Name of Owner	LEE KEE YONG		
Telephone No.	H/P: 9687 4303	Home :	Office :
NRIC	S 1229651G		
Address	BLK 404, Ang Mo Kio Ave 10 # 05-645 (B) 560404.		
Claim type	OD <u>THIRD PARTY</u>	REPORTING ONLY	
Insurance Company	NJUL		
Type of Coverage	Comprehensive <u>Third Party</u>	Third Party / Fire / Theft	
Policy No.	5096274935		
Name of Driver	<u>As Above</u> If No,		
NRIC		Any Passengers :	N.A.
Date of birth	16/10/1957		
Occupation	<u>Outdoor</u> / Indoor		
Driving License Pass Date	02/09/1983		
Gender	<u>Male</u> / Female		
Contact No.	H/P :	Home :	Office :
Address			
Driver have any own vehicle	No, If yes, Reg No.		
Relationship	Employee, If no, state <u>Owner</u>		
Weather condition	<u>Clear</u> Raining Other		
Road Surface	<u>Dry</u> Wet Other		
Any Injuries	No, <u>If Yes, Who?</u>		
Name And Contact No.	LEE KEE YONG (H/P: 9687 4303)		
Name And Contact No.			
Police Report	No, <u>If Yes, Where?</u> <u>Bishan N.P.C</u>		
Vehicle B No.	GV 363 D	Any Passengers :	01 (m)
Name of Driver		Contact No. :	
Vehicle C No.	GBF 9439 D	Any Passengers :	01 (m)
Vehicle D No.		Any Passengers :	
Vehicle E no.		Any Passengers :	
Vehicle F No.		Any Passengers :	
Vehicle G No.		Any Passengers :	
Witness Name	N.A.	Witness Contact :	
Accident Portion	Right and left side		
Camera Recorder	Yes / <u>No</u>		
Email Address	-		
PARTICULAR WORKSHOP	MOTO 51		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	Jackey		
FAX NO	6741 0510		

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait photo of Lee Kee Yong

License Number: **S1229651G**

Name: **LEE KEE YONG**

Birth Date: **16 Oct 1957**

Issue Date: **21 May 2013**

Barcode: 002181324D

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1229651G

Portrait photo of Lee Kee Yong

Name: **LEE KEE YONG**

Chinese Name: **李紀榮**

Race: **CHINESE**

Date of Birth: **16-10-1957**

Sex: **M**

Country of Birth: **SINGAPORE**

Singapore Coat of Arms

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

	EFFECTIVE DATE
Class 2B Motorcycles =< 200 cc	02 Sep 1983
Class 3 Motor Cars =< 3000kg with =<7 passengers, exclusive of the driver, and other motor vehicles =< 2500kg	31 May 1977

NP 428A

Barcode: Licence No: S1229651G

Barcode

2044782

Portrait photo of Lee Kee Yong

NRIC No: **S1229651G**

Blood Group: **B+**

Date of issue: **22-05-1994**

Address: **APT BLK 404 ANG MO KIO AVENUE 10
#05-645
SINGAPORE 560404**

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 : 5096274935

Cover : Third Party

1. Index mark and Registration Number of Vehicle : **FU2152A**
Chassis Number : TA2000005332
2. Name of Policyholder : LEE KEE YONG
3. Effective Date of Insurance : 01 Dec 2017
4. Expiry Date of Insurance : 30 Nov 2018
5. Persons or Classes of Persons entitled to drive#
(a) Named Driver(s) Only.
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.
This Policy does not cover
(a) Use for hire or reward.
(b) Use for racing, pace-making, reliability trial or speed-testing.
(c) Use for the carriage of goods (other than samples) in connection with any trade or business.
(d) Use for any purpose in connection with the Motor Trade.

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)	: N/A
EXCESS (SECTION 2)	: N/A
INSURE WITH COE	: N/A
NAMED DRIVER (1)	: LEE KEE YONG
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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 : KHOR PEI CHENG (00000602458)
Date of Issue : 27 Nov 2017 12:59 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Claim Handling

Accident MT/1008123

Policy No.	5096274935	Vehicle No.	FU2152A	GST Registrat
Certificate No.				
Policyholder Name	LEE KEE YONG			Policyholder I
Product Code	MOTORCYCLE INSURANCE	Cover Type	Third Party	Loading
Contact No.(Mobile)	96874303	Contact No.(Office)	0	Contact No.(I
Email Address		Special Remark		eCode
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(%)	20	Private Hire

▼ Accident Details

Report Date	21/08/2018 12:22	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	20/08/2018	Time of Accident hh:mm	14:30	Country of Ac
Reporting Centre		Orange Force		ICM No.
Accident Location	CTE TWDS SLE B4 JLN BAHAGIA			

▼ Benefits

▼ Excess

Own damage Excess	0.00	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	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

▼ Policyholder Mailing Address

Address 1	BLK 404 #05-645	Address 2	ANG MO KIO AVENUE 10	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5096274935	

▼ OI Driver Info

Driver Name	LEE KEE YONG	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	S1229651G	Driver DOB
Register Date of Driver License	02/09/1983	Driver Age	60	Driving Exper
Contact No.(Mobile)	96874303	Contact No.(Office)	0	Contact No.(I
Address 1	BLK 404	Address 2	ANG MO KIO AVENUE 10	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	#05-645			
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insure

Declaration

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

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	
Contact No.(Mobile)	96874303	Contact No. (Home)	
Email Address		OI Vehicle Number	
Claim Description	FU2152A / GV363D ON 20 Aug 2018		
Preferred Workshop		Insured Liability	Not at Fault
Contact No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop (refer below)
Date Registered		GIA report	Received
Report Taken By		Claim Close Date	21/08/2018 12:25
		Workshop Repairer	ROSLINDA

☒ Print AK letter

Save Submit

Attachment

Accident No.	MT/1008123	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	21/08/2018 00:00
Path *		Category *	Confidentiality
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		Clear	Please Select ▼ NO

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Aug 2018 12:25	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Aug 2018 12:25	NRIC/ Driving License	Normal	NRIC/ Di
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Aug 2018 12:25	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Aug 2018 12:25	SAS	Normal	
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Aug 2018 12:25	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Aug 2018 12:25	Photos	Normal	p
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 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Aug 2018 12:24	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Aug 2018 12:24	Photos	Normal	p

Video List

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