NATIONAL Assessment Centre St	ervices per mon	MMA 118108358.		
annual contract of the contrac	b description	Date & Time Completed	Don	e by
	AS e-filing			
	E-mail (within Shrs, AIC 2hrs)			
	-Motor Claim Form	M711008396 002	23 18118	17:16.
	-Motor W/O (Within: OD 2)			
D' TP .' Reporting Only	Photo Uploaded			
	ssessment/Survey Report			
TP Insurer:	ss't Report by <u>Fax / Hand</u>	to Owner/Wksp		
Preferred Wksp / INC Assign Wksp / GW: (Tel: F	ax:)
TP Particulars: Vch No: 565	1016R 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: 30-1	00%]	
	nty: YES ()/NO ()		
Excess: (\$) Loading: \$1,000 (e nalestan errele	
General Remarks;-			Set Til	15
() Walk-In Customer: Customer's information	n strictly Confidential & S	trictly NO refer of repairer.		
() Total Loss Case : to e-mail Insurer UR	GENTLY.			
Drive-In () / Towed-In (); Invoice: YES	S()/NO();	Towing Co: ()
Remarks:- (INC hotline: 6788 6616)		Date&Time Completed	Done	e by
Apply for Transport Allowance ()/Courte	sy Car ()			
2) QC Check / Post Repair Inspection .	()			
3) Upload Resurvey Photo [Repair Cost > \$3000]	()			
Injury:		N		
	Variable Control of the Control of t		77 30 77 37	
Date/Time Actions	Berg Handlich er	tion of the state	Sharkens er	
The state of the s	1	eparation Checklist	Anit (\$)	(\$) Amt (\$)
MAIS	5671	STREET, STATE OF STREET,	30.00	Add Bill
laimant's Particulars :-		Assessment (\$100); INC (\$80	80.00	
river/Owner:	3) TF : Towing 4) FT : Follow-		120	
ontact No:	5) kT : Follow-	Through Survey (Resurvey)	\$30	
	6) TR: Re-insp	against INC Only (wef 10 Jan 2005) ection	\$75	
amaged Portion:	7) N1 : Idno DA	+ SMRT Survey 5	160	
Checked by Oferm In Charman	8) NTUC Addit OD:			
C Checked by (Engr-In-Charge):	*N5: Courtes *N6: Repair	y Car / Tpt Allowance	\$10	
uditors' Comments :-	*N7: Fost Re	pair Inspection	\$25	
L. L.		ollect Excess Coordination P (Nan INC) against INC	\$20	
	9) N12: Idae M	Charles and the second	30	ALTERNATION APPROXIMATION
1.2/3.	Invoice dated	Fee Charged		A STATE OF THE PARTY AND A STATE OF THE PARTY

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
 Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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.

atoresaid.	
And the second of the second o	ACCIDENT STATEMENT
Date Of Report	21/08/2018 14:20
Date Of Accident	21/08/2018 08:15
Exact Location Of Accident	PAYA LEBAR RD TWDS GUILLEMARD RD
Country/State of Loss	SINGAPORE
Contract of the Contract of th	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLC9983X
Insured/Policyholder	
Name Of Registered Owner	SOH KOK CHUEN
NRIC No	S1749063Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-85691813
Alternative Phone No	OFFICE-85691813
Vehicle Particulars	
Manufacturer	TOYOTA
Model	WISH 1.8 A
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	5097269161
Cover Note Number	€
Driver	

Driver	
Name of Driver	SOH KOK CHUEN
NRIC No	S1749063Z
Date Of Birth	24/10/1966
Occupation	INDOOR
Date Of Driving Pass	05/09/1985
Driving Experience	32 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-85691813
Fax Number	
Contact Number	OFFICE-85691813
EMail Address	NOEMAIL

Address BLK 408 JURONG WEST ST 42 #02-675

Postcode 640408

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 COLLISION - HEAD TO REAR

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? N

Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

NO

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

I WAS TRAVELLING ALONG PAYA LEBAR RD TWDS GUILLEMARD RD WHILE APPROACHING A TRAFFIC JUNCTION. VEH B (BEARING NO SGS1016R) WHICH WAS INFRONT OF ME SUDDENLY JAMMED BRAKE, I MANAGE MY BRAKE BUT CANNOT STOP IN TIME, AS THE RESULT, MY VEH COLLIDED ONTO VEH B REAR PORTION.

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 SGS1016R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver ROGER

NRIC/Passport Number

Contact Number 90049951

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
 - 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:
 - 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.:

			A = 5	LC 9983 X	
	B		8: 5	95 1016 K	
		Paya Leban Ro	x two/s	Guillemard 6	10/

Pleusc	Refer	to	statement	
			/	

DECLARATION

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

an

Policyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name:

Name: NRIC/FIN No.:



SINGAPORE ARMED FORCES IDENTITY CARD

SOH KOK CHUEN

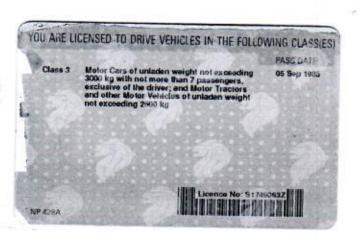
NRIC NO

S1749063Z



REPUBLIC **DRIVING LICENCE** SOH KOK CHUEN 24 Oct 1966 a Day 11 Jun 2004





eBaoTech GeneralClaim Hello, NAC_PAYA_UBI_800601 Change Password · Change Language Log Out My Desktop **Policy Query** Notice of Loss Policy No. Date of Accident 21/08/2018 14:10 Vehicle No.(For Motor) Certificate Number SLC9983X Search Certificate Number Policyholder Name Policyholder NRIC Vehicle Insured Commence Date Policy No. Select Product Cover Type Expiry Date Object SOH KOK CHUEN drivo CLASSIC 5097269161 S1749063Z SLC9983X SLC9983X GPC 11/01/2018 10/01/2019 Continue

Claim Handling Accident MT/1008396 GST Registration No. 5097269161 Vehicle No. SLC9983X Policyholder NRIC \$17491 Policyholder Name SOH KOK CHUEN Cover Type Loading drivo CLASSIC 0 Product Code PRIVATE CAR INSURANCE Contact No. (Office) Contact No.(Home) Contact No.(Mobile) 85691813 Special Remark eCode No * Email Address eCode Reason KEK » No Yes TÇA NCD Entitlement(%) 50 Private Hire NCD Protection Yes Accident Details Accident Report Within 24 hrs Accident Type Report Date 23/08/2018 15:05 Yes Time of Accident hh:mm Country of Accident Singap Date of Accident 21/08/2018 08:15 ICM No. Orange Force Reporting Centre Accident Location PAYA LEBAR RD TWDS GUILLEMARD RD ⇒ Benefits Additional Excess Windscreen Excess 100.00 Own damage Excess 600,00 Outside Singapore OD Excess 600,00 Unnamed Driver Excess 0.00 Outside Singapore TP Excess 0.00 Third Party Excess 0.00 GST Registered Information GST Registered **GST Registration Date** GST Status Verified Yes GST Registration No. Modification History Policyholder Mailing Address Address 3 SINGA Address 2 JURONG WEST STREET 42 Address 1 BLK 408 #02-675 640401 Address Type Singapore address Post Code Address 4 Related Policy Number 5097269161 OI Driver Info Driver Name SOH KOK CHUEN Driver Type Main Driver Driver NRIC S1749063Z Driver DOB 24/10/ Unnamed driver Name Driving Experience Register Date of Driver License 05/09/1985 Contact No.(Home) Contact No.(Office) Contact No.(Mobile) BLK 408 #02-675 Address 2 JURONG WEST STREET 42 Address 3 SINGA Address 1 Address 4 Address Type Singapore address Post Code 640401 Unit No. Does he own a Singapore Registered car? Driver Vehicle No. Driver Insurer Company Yes - No Breathalyser or Blood Test Any injury? Yes w No 0 mg Modification History Claim 002 New ▼ Insured SOH KOK CHUEN OD-MD Claim Type * Contact No. (Home) 68963378 Contact No.(Mobile) 91592355 01 Vehicle SLC9983X Number Email Address Claim Description SLC9983X / SGS1016R ON 21 Aug 2018 Preference Liability Fully at Fault Repair Income to assign worksho Preferred Workshop Remiet No. Yes Finalisation Yes GIA Received income to assign workshop Date Registered 23/08/2018 17:15 Report Taken By LIEW SHAN HUI Print AK letter Save Submit Attachment

MT/1008396

Last Doc. Received

● Yes □ No

Upload Date

23/09/2018 17:16



Display in New Window Scan and uploading

Remarks to appear in Works Order & Assessment report

1) Potential Total Loss

SRS Light on
 ABS Light on

1 1	- 9/10/505
By Assessor- 1) Vehicle Info	
Veh No SLC 9913 X	Yr Regn. 9 0 200 (/ Lorry / Taxi / Prime Mover / MPV
/ Truck / Trailer or	r Corry r East i Frime Wover / mr. i
	1150 12016
Make & Model: ToyotaWis	sh 1.8A 00 1794
	ransmission Type: Auto Manual
Eng/No. ₹	Sp.Reading: 159244
CINO: ZNEID 0	
Gen. Cond. Good / Fair / Poor / Bu	
Steering: Inforder / Jammed / Leak	
Brake: Inorder / Jammed / Leak	
Modi: Nil /S/Rim / STD A/Rin	
Tyre Size: F: 1 & Z) Z Z	RIG
R:	
BS / DUN / EXNOVA / GY / FS / L	
TOYO/YOKO OF Han	kok
Front	Rear
R/Bal. 6 mm	R/Bal. mm
L/Bal. 6 mm	L/Bal. mm
Parallel Import Yes / No	Towed-In: Yes / No
Repair Type: LS / I.B.I	Towing Required: Yes / No
No of Repair Days:	Vehicle in Idac: Yes No
, , , ,	
0.01. 23 8 2018	Time: 1,45 pm
By Assessor- 2) Comments	
1) Damages not due to recent ac	
2) Damages do not seem hit ont	o:
a.Vehicle () b.Motorcycle () c.Bicycle () d.Pedestrian ()
e.Animal () f.Govm Object (
	i() j.Road Kerb/Grass Verge()
Vehicle does not seem damage	Millio Me.
	ensulation of the control of the con
) c.Vandalism() d.Fire()
e.Moving Object () 1.Stolen	() g.Stolen & Recovered ()
Time Started:	Time completed:
1) CSO	

3) Entire Operation Completed Time:

NAC		Item	Too	NAC	100	7
1001		Frt Number Plate		MAL	QE	4
1002	991887	Frt Number Plate Base	20	-		1
1003	991880	Frt Number Plate Gamish	CRA	1		1
1004		Frt Bumper	70			-
1005		Frt Bumper Clips	19		1	1
1006		Frt Bumper Bracket	W.E.	-	6	-
1007	001467	E + Dumper Bracket	-			
1008	001477	Frt Bumper Side Retainer	DIS	-	2	+
		Frt Bumper Reinforcement	BT	-		1.
1009		Frt Bumper Beam		10		1
1010	991468	Frt Bumper Sponge	CRF	1		-
1011	991427	Frt Bumper Protector	10.15.1	-		1
1012	991420	Frt Bumper Pad	-			1
1013	991363	Frt Bumper Grille	-	-	-	
1014	991301	Frt Bumper Moulding	-	-		
1015		Prt Bumper Lower Spoiler	-	+		
1016	991438	Frt Bumper Sensor	-	-	-	
1017	995100	Frt LH Bumper Fog Lamp Cover		1		
1018		Frt RH Bumper Fog Lamp Cover		1		1
1019	995079	Frt LH Bumper Fog Lamp		1		1
1020		E- Dir D				
1021		Frt RH Bumper Fog Lamp		1		
1021	001700	Frt Grille	CRA	/		-
1023	001505	Frt Grille Emblem				
	1991799	Frt Grille Chrome Moulding				
1024	991222	Frt Apron Panel			915	
1025	992013	Fri Support Panel	BT	1	-	,
1026	992025	Frt Support Panel Top Garnish Cover	CRA	1		
1027	992416	Hom	- F. M	17		-
1028	991277	Frt Brace Panel	BT	1	-	1
1029	995153	Frt LH Headlamp Assy	CRA		-	-
1030	991821	Frt R.H Headlamp Assy	100		-	-
1031	995088	Frt LH Side Lamp	KE		-	
1032	995089	Fri RH Side Lamp			-	
1033	990248	Bonnet	Buc		-	,
1034	991328	Bonnet Emblem	100		-	
1035	990287	Bonnet Lock	WEL	-	-	۲.
1036	990285	Bonnet Insulator	RI	5		′.
1037	990273	Bonnet Hinge	projective .	-	_	6
1038	990261	Bonnet	BI	-	1	-
1039	990305	Bonnet Rubber				
1040	990252	Bonnet Cable		(-
1041	000211	Bonnet Stand				
042	000110	Bonner Stand				
043	990119	Air Con Condenser	TZ	-		-
044	000124	Air Con Fan Assy	-18	J.		
045	990134	Air Con Suction Pipe (Low Pressure)		3		/
	990116	Air Con Suction Hose				
046	440133	Air Con Discharge Pipe (High Pressure)		1		1
047	990114	Air Con Discharge Hose				
048	990149	Air Con Liquid Pipe		2		,
049	995066	Air Con Receiver Drier		-		-
050	990111	Air Con Compressor Assv			-	
051	995294	Air Con Belt			-	
052	995074	Radiator		7		
053	992738	Radiator Cowling		4	-	,
054	992742 [Cadiator Fan Assy		1	-	
055	992745	Radiator Fan Clutch	_	1	-	,
osa !	997758	Radiator Hose Top	-	1		
057	992757 1	Radiator Hose Bottom				
058	992741 1	Codinton Page 15000001				
-	000101	Radiator Expansion Tank				
060	990151 /	Ur Dust				
WHITE I	950070 /	Air Cleaner Assy				
	990056 /	dr Cleaner Hose	-	300	-	
06.1	990089 [4	vir Cleaner Resonator			-	
06.1	001212 0	rt Exhaust Manifold		-	-	
062	262011112-5014	THOUSE IT BUILDING				
061 062 063	9917121	PT in victories foliage factor years				
061 062 063 064	991711 F	rt Exhaust Manifold Cover				
061 062 063 064 065	991713 F 991054 F	rt Exhaust Mourfold Seneor (Owners)				
061 062 063 064 065 066	991713 F 991054 F 991714 F	rt Exhaust Manrfold Sensor (Oxygon)				
061 062 063 064 065 066	991713 F 991054 F 991714 F 990219 B	ri Exhaust Manifold Sensor (Oxygea) ront Exhaust Pipe atteny				
061 062 063 064 065 066 067	991711 F 991054 F 991714 F 990219 B 990224 B	rt Exhaust Manifold Sensor (Oxygon) font Exhaust Pipe attesy attery Caver				
063 062 063 064 065 067 067	991711 F 991054 F 991714 F 990219 B 990224 B 990223 B	ri Exhaust Manifold Sensor (Oxygea) ront Exhaust Pipe atteny				

NAC	INC	Vehicle No: SLC		MAC	
1071	992205		001	MAC	Qt.
1072	994011	Relay Box			
1073	995053	Wiper Washer Tank			
1074	995052				
1075	990159				
1076	990160				
1077					
	992688				
1078	992669	3			
1079	994431	0			
1080	992692				
1081	990010	ABS Pump Control Unit			-
1082	990427	Brake Master Pump Assy			
1083	990403	Brake Booster Pump Assy		-	
1084	991005	Engine Top Cover	-		
1085	991011	Engine Under Cover	1		
1086	990946	Engine Mounting	-	1 1	
1087	990949		-		
1088	990950		-		
1089	990952	The Person Street Street Williams			
1090	990951	Engine Mounting RH			
1091	992234	Engine Mounting Rear		1	
092	001606	Gear Box Mounting			
-	991520				
093	991520	Frt RH Chassis Member			
094	990728				T V
095	991863	Frt Lower Cross Member			
096	995070	THE RESERVE OF THE PARTY OF THE			
097	995072	Frt LH Fender Inner Panel			
.098	995147.	Frt LH Fender Lamp			
099	995148	Frt LH Fender Protector			
100	991740			7	
101	995179	Frt LH Mudflap			
102		Frt LH Wheel Rim			
103	994025	Frt LH Rim Cover			
104	995065	Frt LH Tyre		1	
105	995071	Frt RH Fender		-	
106	991739	Frt RH Fender Inner Panel			
107	991744	Frt RH Fender Lamp			
108	991752	Frt RH Fender Protector			
109	991740	Frt RM Fender Inner Shield	100	7	-
110	991884	Frt RH Mudflap	-	-	-
111	992087	Prt RH Wheel Rim			-
112	994025	Frt RH Rim Cover			-
113	995065	Frt RH Tyre			-
114	992093	Frt Windscreen Glass		-	
115	992117	Frt Windscreen Rubber			-
116	801298	Frt Windscreen Moulding			-
117		Frt Windscreen Sealant		-	
118		ERP Bracket	-		
119	991020	ERP Unit			_
120		Frt Wiper Arm	-		
121		Frt Wiper Blade			
122		Wiper Panel Garnish	-		_
123			-		
124		Pirewall Panel			
		Dashboard Assy			
196		Glove Box Cover			
		Glove Box Compartment			
		Steering Wheel Airbag			
-		Steering Wheel Airbay Sensor			
	990749	Dashboard Airbag			
	990750	Dashboard Airbag Sensor			
31	990029	Airbag Control Unit	- 270		
		Fr: Driver Seat			-
		Frt RH Seat Belt Assy	-		
	The state of the s				
		Frt Passenger Seat			
		Fit LH Seat Belt Assu			
36	990247	Sticker			
110	100	The second secon			
		HAROLINE THE SERVER THE SERVER	- 3	-	

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	9063Z
Vehicle Details	= 2005, Miles
Vehicle No.:	SLC9983X
Vehicle to be Exported:	No
Intended De-registration Date:	24 Aug 2018
Vehicle Make:	TOYOTA
Vehicle Model:	WISH 1.8 A
Primary Colour:	Silver
Manufacturing Year:	2006
Engine No.:	1ZZ2695834
Chassis No.:	ZNE100328670
Maximum Power Output:	97.0 kW (130 bhp)
Open Market Value:	\$18,144.00
Original Registration Date:	09 Oct 2006
First Registration Date:	09 Oct 2006
Transfer Count:	2
Actual ARF Paid: Intended PARF Rebate Details	\$19,959.00
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00
COE Expiry Date:	08 Oct 2021
COE Category:	B - Car (1601cc & above)
COE Period(Years):	5
PQP Paid:	\$28,376.00
COE Rebate Amount:	\$17,715.00
otal Rebate Amount: Message	\$17,715.00
A CONTRACTOR OF THE PARTY OF TH	be further renewed. The vehicle must be de-registered upon COE expiry or when the thever is earlier.

The information contained herein is correct as at 23 Aug 2018

OK

							LO.	S SAL SUB
Policy No.	5097269161	Vehicle No.	SLC9983X		GST Registration	No.		
Certificate No.								
Policyholder Name	SOH KOK CHUEN				Policyholder NRIC		9063Z	
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC		Loading	0		
Contact No.(Mobile)	85691813	Contact No.(Office)			Contact No. (Home	100	1	
Email Address		Special Remark			eCode	No *	1	
KFK	# No Yes	TCA	* No Yes		eCode Reason			
NCD Protection	Yes	NCD Entitlement(%)	50		Private Hire	No		
	anne se de la company	Accident Report Within 24	(CBSC)		\$1852554175	2020	70 WAY 2 VI 2005	
Report Date	23/08/2018 15:05	hrs	Yes		Accident Type	Collisi	on - Head to Rear	
Date of Accident	21/08/2018	Time of Accident hh:mm	08:15		Country of Accide	nt Singa	pore	
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No		ICM No.			
Accident Location	PAYA LEBAR RD TWDS GUILLEMAR	D RD						
▽ Excess			100			101 8/23/2		
Own damage Excess	600.00	Additional Excess	0		Windscreen Exces	ss 100.0	0	
Unnamed Driver Excess	0.00	Outside Singapore OD Excess		600.00				
Third Party Excess	0.00	Outside Singapore TP Excess		0.00				
♥ Benefits								
	mation							
GST Registered	No		GST Registra	ition Date				
GST Registration No.			GST Status \	Verified	Yes			
Modification History								
	P2 51 30 37							
		Address 2		ner in	Address 3	rme	APORE 640408	
Address 1	BLK 408 #02-675	Address Type	JURONG WEST STR Singapore address	EE1 42	Post Code	6404		
Address 4		Related Policy Number	5097269161		Tust Code	0404		
Unit No. OI Driver Info		Related Policy Hamber	309/209101					
Driver Name	SOH KOK CHUEN	Driver Type	Main Driver					
Unnamed driver Name	**************************************	Driver NRIC	S1749063Z		Driver DOB	24/10	0/1966	
Register Date of Driver	05/09/1985	Driver Age	51		Driving Experience			
License			24		Contact No.(Hom			
Contact No.(Mobile)	85691813	Contact No.(Office)	JURONG WEST STR	CET 43	Address 3	3000	APORE 640408	
Address 1	BLK 408 #02-675	Address 2	Singapore address	EE1 42	Post Code	6404		
Address 4 Unit No.		Address Type	Singapore address		Post Code	0404	00	
Does he own a Singapore	Yes + No	Driver Vehicle No.			Driver Insurer Co	maany		
Registered car?	tes a No	Driver verilde No.			Diver moure Co			
▽ Declaration								
Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes · No					
Modification History								
- Industrial Control of								
▽ Investigation								
Claim 002 OD-MD								
	Ng Hak Joo						1	SAL SI
Claim Type		OD-MD	Insured Name	SOH KOK CHUEN	1r	sured NRIC	S1749063Z	
Contact No.(Mobile)		91592355	Contact No. (Home)	68963378		ontact No. Office)		
Email Address			OI Vehicle Number	SLC9983X	0.0	P Vehicle Number	SGS1016R	
Claim Description		SLC9983X / SGS1016R ON 21 Aug	2018			ame of Preferred lorkshop	0	
Preferred			0223(15)			и капор	955	
Workshop 0 Prefere	red income to Insured at Glability Resolved							
Date Registered	workshop	23/08/2018 17:17	Claim Close Date		D	ate Received	23/08/2018 00:00	
Report Taken By		LIEW SHAN HUI	Workshop Repairer			otal Loss but epaired		
			ryepull 61		o	D Excess ollected by		
Print AK letter						orkshop		
Modification History								
♥ Special Claim Creatio	n Approval							

Remarks

damage assessment Attachment



Remark for Supplementary

a Part	No.	Part No.	Description	Qty +	Repair Code *	
root	1	32200101	NUMBER PLATE (FRONT)	1	Replace	*
Not Applicable	- 62				Replace	•
ABS ABSORBER	2	32200201	NUMBER PLATE BASE (FRONT)	-	70000000	51
ACCELERATOR	3	16000101	BUMPER (FRONT)	1	Replace	*
ACTUATOR	4	16002401	BUMPER CLIPS (FRONT)	1	Replace	*
ADVERTISEMENT STICKER	5	16005101	BUMPER RETAINER (FRONT LEFT)	1	Replace	•
AIR BAG		14005103	BUMPER RETAINER (FRONT RIGHT)	7	Replace	*
AIR BLOWER	- 6	16005102		-		
AR BOX	7	16005001	BUMPER REINFORCEMENT (FRONT)	1	Replace	7
AIR CHAMBER BOX	8	16005901	BUMPER SPONGE (FRONT)	1	Replace	•
AIR CLEANER AIR COMPRESSOR	9	16002901	BUMPER FOG LAMP COVER (FRONT LEFT)	1	Unconfirm	•
AIR COMPRESSOR	10	16002902	BUMPER FOG LAMP COVER (FRONT RIGHT)		Unconfirm	
AIR CON (VAN)						•
AIR COOLER	11	27100101	GRILLE (FRONT)		Replace	1704
AIR DISTRIBUTOR	12	41300101	SUPPORT PANEL (FRONT)	1	Replace	
AIR FILTER	13	28500101	HORN (LEFT)	1	Unconfirm	
AIR FLOW	14	28500102	HORN (RIGHT)	1	Unconfirm	*
AIR GRILLE AIR HORN	15	15600101	BRACE PANEL (FRONT)	1	Replace	*
AIR INTAKE						•
AIR RESONATOR BOX	16	27700101	HEAD LAMP (LEFT)	1	Replace	
AIR THROTTLE BODY AND SENSOR	17	27700102	HEAD LAMP (RIGHT)	1	Replace	*
ALARM	18	149001	BONNET	1	Replace	*
ALTERNATOR	19	149016	BONNET EMBLEM	1	Replace	*
ALUMINIUM PANEL - SIDE					Replace	*
AMPLIFIER ANTENNA	20	14903401	BONNET LOCK (LOWER)	4		-
ANTIROLL	21	149029	BONNET INSULATOR	1	Unconfirm	
APRON	22	14902201	BONNET HINGE (LEFT)	1	Replace	
ARCH	23	14902202	BONNET HINGE (RIGHT)	1	Replace	*
ARM REST	24	149043	BONNET RUBBER (LONG)	1	Unconfirm	. 🕶
ASH TRAY		112023	AJR CON CONDENSER		Replace	*
AUTO CLUTCH AUTO COOLER PIPE	25					•
AUTO CRUISE MOTOR	26	112044	AIR CON DISCHARGE PIPE	1	Unconfirm	
AUTO TRANSMISSION	27	344001	RADIATOR	1	Unconfirm	*
AXLE	28	344005	RADIATOR COWLING	1	Unconfirm	•
BACK REST (M/C)	29	344008	RADIATOR FAN	1	Unconfirm	
BACK SEAT					Unconfirm	•
BALANCER	30	344011	RADIATOR FAN CLUTCH	1		-
BATTERY	31	25400901	FENDER INNER SHIELD (FRONT LEFT)	1	Unconfirm	
	32	25400902	FENDER INNER SHIELD (FRONT RIGHT)	1	Unconfirm	

LKK Paya Ubi

From:

Ng Hak Joo <hakjoo.ng@income.com.sg>

Sent:

Friday, 24 August 2018 2:49 PM

To:

AMKAUTOPOINT

Cc:

LKK Paya Ubi

Subject:

MT/1008396-002, VEHICLE NUMBER: SLC9983X

Dear Autopoint

Please liase with owner Mr Soh Kok Chuen at 85691813 as we have informed him to send for repair ASAP, excess \$642.

Our Ref: MT/CA/OD/051/1008396-002/NHJ

24 Aug 2018

AMK AUTOPOINT PTE LTD

BLK 10 ANG MO KIO INDUSTRIAL PARK 2A

#01-22 AMK AUTOPOINT SINGAPORE 568047

Dear Sir

CLAIM NUMBER: MT/1008396-002

REPAIR OF VEHICLE NUMBER: SLC9983X

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

follows:

Award Date: 24 Aug 2018

Make: TOYOTA Model: WISH

Estimated Repair Days: 4

Location: NATIONAL ASSESSMENT CENTRE SERVICES

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

Benefits Applicable: N/A Excess Applicable: 600.00

Please note that supplementary items will not be allowed.

If you have any queries, please contact Ng Hak Joo at 64307890 or email us at motor@income.com.sg.

Yours sincerely Low Choo Mee Senior Manager Motor Insurance

Thank You

Ng Hak Joo, lata-Uftaa-Itc

Executive Motor Insurance T+65 64307890

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