

NATIONAL Assessment Centre Services (wef 1 Jan 05) NA/8119241			
Date In: 14/09/2008 10:26	Job description	Date & Time Completed	Done by
Ref No: NA/INC/PO/1679314	SAS e-filing		
Veh No: SLV 29382	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 14/09/2008 09:00	i-Motor Claim Form	MT/101527-001	14/09/2008 15:19
☒ 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 <u>Fax / Hand to Owner/Wksp</u>		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: SLK 2474C	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

NA/805894	Invoice Preparation Checklist	Amt (\$)	Amt (\$)
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);	1st Bill	Add Bill
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 : Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	OD*		
	*N5: Courtesy Car / Tpl 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		
QC Checked by (Engr-In-Charge):	Invoice dated	Fee Charged	
Auditors' Comments :-	Invoice dated	Fee Charged	
Cat. 1:			
Cat. 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	14/09/2018 10:26
Date Of Accident	14/09/2018 09:00
Exact Location Of Accident	JUNCTION OF JALAN TUA KONG/UPPER EAST COAST ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLV2938Z
Insured/Policyholder	
Name Of Registered Owner	TAN HOON CHIANG
NRIC No	S1173462F
Email Address	TANHOONCHIANG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92351283
Alternative Phone No	OTHERS-92351283

Vehicle Particulars

Manufacturer	BMW
Model	523i
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	5096189280
Cover Note Number	

Driver

Name of Driver	TAN HOON CHIANG
NRIC No	S1173462F
Date Of Birth	03/12/1955
Occupation	INDOOR
Date Of Driving Pass	31/05/1976
Driving Experience	42 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92351283
Fax Number	
Contact Number	OTHERS-92351283
E-Mail Address	TANHOONCHIANG@GMAIL.COM

Address	23 JEDBURGH GARDEN
Postcode	457089
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 - MAJOR/MINOR RD
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?	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

PLEASE REFER TO SKETCH PLAN (TYPE OF ACCIDENT IS HEAD TO SIDE)

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	SLK2474C
Vehicle Make/Model/Colour	LEXUS 300
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHEAM
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

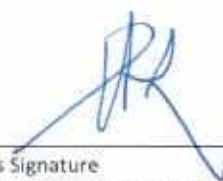
IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

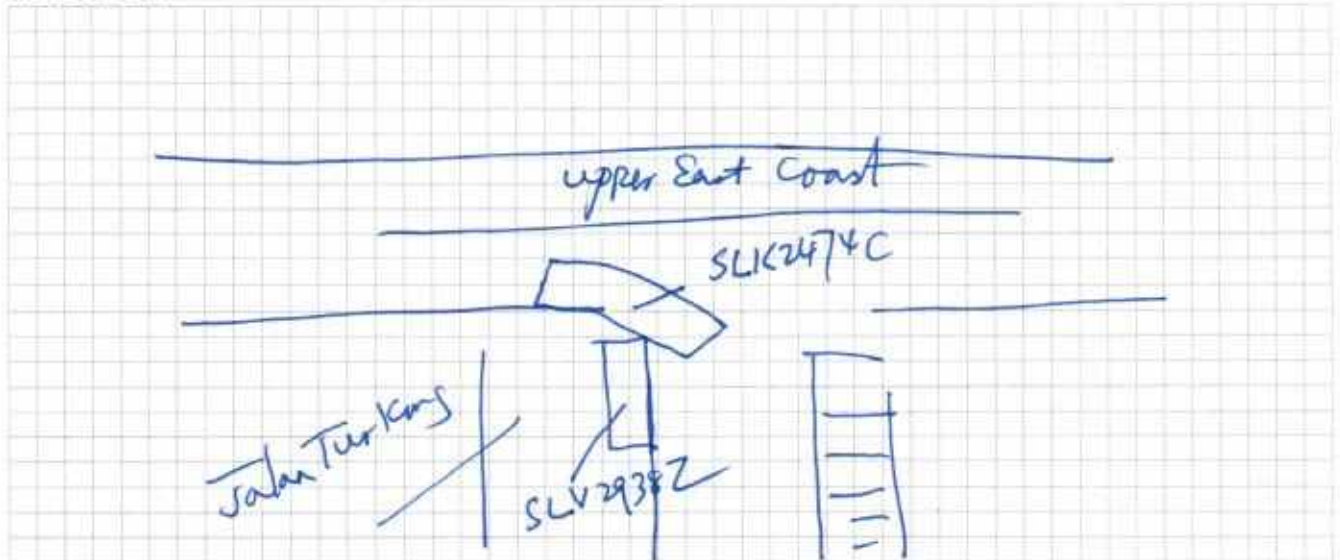
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.


Policyholder's Signature
Date & Time:


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

 14/09/2018
Reporting Centre Personnel's Signature
Name: 
NRIC/FIN No.:

SKETCH PLAN

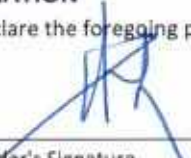


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

This morning while I was travelling at Jalan Turkmens and stopped at the T junction at upper east coast intended to turn right, while there were no vehicles one way right and left, I turned right and to my horror hit car SLK2474C at the drawing shown.

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.:

By CSO - Nature of Accident:

- 1) Vehicle hit Vehicle: ☐ 2) Vehicle hit ? ☐
- a) Motorcycle ☐ b) Pedestrian ☐
- c) Bicycle ☐ d) Animal ☐
- 3) Vehicle hit Road Side Objects: ☐
- a) Govt. Property ☐ b) Road Work Object ☐
- (Eg. signpost, barrier, etc.) 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:

Vehicle No: SLV 2938 Z Year: 2010

Type: M. Car / B. Cycle / Bus / Van / Lorry / Taxi / Private Motor / ...

Make & Model: BMW 523i 2.5 cc: 2497

Colour: BLACK Transmission Type: Auto / Manual

Engin No: 07667623N50B25A Sp. Reading: 190724

Chassis No: WBAFP32090C547928

Gen. Cond: Good / Fair / Poor / Burnt or

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mode: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 225/55/R17

R: 225/55/R17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front	Rear
R/Bal. <u>7</u> mm	R/Bal. <u>7</u> mm
L/Bal. <u>7</u> mm	L/Bal. <u>7</u> mm

Parallel Import: Yes ☒ No ☐

Repair Type: LS / I.B.I

No of Repair Days: 5

D.O.I. 14/09/2012

Towed-In: Yes ☐ No ☒

Towing Required: Yes ☐ No ☒

Vehicle in Use: Yes ☐ No ☒

Time: 11AM

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. Govt 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 Observation Completed Time: _____

Vehicle No:

NAC	INC	Item	CON	AC	Qty
1001	991886	Frt Number Plate			
1002	991887	Frt Number Plate Base			
1003	991889	Frt Number Plate Garnish			
1004	991300	Frt Bumper			
1005	993341	Frt Bumper Clips			
1006	991325	Frt Bumper Bracket	R/U		
1007	991462	Frt Bumper Side Retainer			
1008	991413	Frt Bumper Reinforcement			
1009	991318	Frt Bumper Beam			
1010	991468	Frt Bumper Sponge			
1011	991427	Frt Bumper Protector			
1012	991420	Frt Bumper and Tow Hook Cover			
1013	991363	Frt Bumper Grille			
1014	991301	Frt Bumper Moulding			
1015	991497	Frt Bumper Lower Spoiler			
1016	991438	Frt Bumper Sensor			
1017	995100	Frt LH Bumper Fog Lamp Cover			
1018	991355	Frt RH Bumper Fog Lamp Cover			
1019	995079	Frt LH Bumper Fog Lamp			
1020	995080	Frt RH Bumper Fog Lamp			
1021	991793	Frt Grille			
1022	991378	Frt Grille Emblem			
1023	991799	Frt Grille Chrome Moulding			
1024	991272	Frt Apron Panel			
1025	992013	Frt Support Panel			
1026	992025	Frt Support Panel Top Garnish Cover			
1027	992416	Horn			
1028	991277	Frt Brace Panel			
1029	995153	Frt LH Headlamp Assy			
1030	991821	Frt RH Headlamp Assy			
1031	995088	Frt LH Side Lamp			
1032	995089	Frt RH Side Lamp			
1033	990248	Bonnet			
1034	991328	Bonnet Emblem			
1035	990287	Bonnet Lock			
1036	990265	Bonnet Insulator			
1037	990273	Bonnet Hinge			
1038	990261	Bonnet Damper			
1039	990305	Bonnet Rubber			
1040	990262	Bonnet Cable			
1041	990311	Bonnet Stand			
1042	990119	Air Con Condenser			
1043	990122	Air Con Fan Assy			
1044	990134	Air Con Suction Pipe (Low Pressure)			
1045	990118	Air Con Suction Hose			
1046	990133	Air Con Discharge Pipe (High Pressure)			
1047	990114	Air Con Discharge Hose			
1048	990149	Air Con Liquid Pipe			
1049	993066	Air Con Receiver Drier			
1050	990111	Air Con Compressor Assy			
1051	995294	Air Con Bell			
1052	995074	Radiator			
1053	992735	Radiator Cowling			
1054	992742	Radiator Fan Assy			
1055	992745	Radiator Fan Clutch			
1056	992758	Radiator Hose Top			
1057	992757	Radiator Hose Bottom			
1058	992741	Radiator Expansion Tank			
1059	990151	Air Duct			
1060	990070	Air Cleaner Assy			
1061	990056	Air Cleaner Hose			
1062	990089	Air Cleaner Resonator			
1063	991712	Frt Exhaust Manifold			
1064	991713	Frt Exhaust Manifold Cover			
1065	991034	Frt Exhaust Manifold Sensor (Oxygen)			
1066	991714	Front Exhaust Pipe			
1067	990219	Battery			
1068	990224	Battery Cover			
1069	990223	Battery Bracket			
1070	990229	Battery Tray			

NAC	INC	Item		CON	AC	Qty
1071	992205	Fuse Box				
1072	994811	Relay Box				
1073	995053	Wiper Washer Tank				
1074	995052	Wiper Washer Tank Motor				
1075	990159	Alternator Assy				
1076	990160	Alternator Belt				
1077	992688	Power Steering Pump				
1078	992669	Power Steering Belt				
1079	994431	Power Steering Cooler Pipe				
1080	992692	Power Steering Hose				
1081	990010	ABS Pump Control Unit				
1082	990427	Brake Master Pump Assy				
1083	990403	Brake Booster Pump Assy				
1084	991605	Engine Top Cover				
1085	991011	Engine Under Cover				
1086	990946	Engine Mounting				
1087	990949	Engine Mounting Frt				
1088	990950	Engine Mounting LH				
1089	990952	Engine Mounting RH				
1090	990951	Engine Mounting Rear				
1091	992234	Gear Box Mounting				
1092	991520	Frt LH Chassis Member				
1093	991520	Frt RH Chassis Member				
1094	990728	Frt Vertical Cross Member				
1095	991863	Frt Lower Cross Member				
1096	995070	Frt LH Fender				
1097	995072	Frt LH Fender Inner Panel				
1098	995147	Frt LH Fender Lamp				
1099	995148	Frt LH Fender Protector				
1100	991740	Frt LH Fender Inner Shield				
1101	995179	Frt LH Mudflap				
1102	995170	Frt LH Wheel Rim				
1103	994025	Frt LH Rim Cover				
1104	995065	Frt LH Tyre				
1105	995071	Frt RH Fender				
1106	991739	Frt RH Fender Inner Panel				
1107	991744	Frt RH Fender Lamp				
1108	991752	Frt RH Fender Protector				
1109	991740	Frt RH Fender Inner Shield				
1110	991884	Frt RH Mudflap				
1111	992087	Frt RH Wheel Rim				
1112	994025	Frt RH Rim Cover				
1113	995065	Frt RH Tyre				
1114	992093	Frt Windscreen Glass				
1115	992117	Frt Windscreen Rubber				
1116	992108	Frt Windscreen Moulding				
1117	992098	Frt Windscreen Sealant				
1118	991019	ERP Bracket				
1119	991020	ERP Unit				
1120	992140	Frt Wiper Arm				
1121	992142	Frt Wiper Blade				
1122	995045	Wiper Panel Garnish				
1123	991126	Firewall Panel				
1124	990753	Dashbord Assy				
1125	992282	Glove Box Cover				
1126	992281	Glove Box Compartment				
1127	994483	Steering Wheel Airbag				
1128	994485	Steering Wheel Airbag Sensor				
1129	990749	Dashbord Airbag				
1130	990750	Dashbord Airbag Sensor				
1131	990029	Airbag Control Unit				
1132	990584	Frt Driver Seat				
1133	991922	Frt RH Seat Belt Assy				
1134	991898	Frt Passenger Seat				
1135	995182	Frt LH Seat Belt Assy				
1136	990247	Sticker				
		FRT RH DOOR			SX R	

Claim Handling

Accident MT/1011327

Policy No.	5096189280	Vehicle No.	SLV2938Z	GST Registration No.	
Certificate No.					
Policyholder Name	TAN HOON CHIANG			Policyholder NRIC	S1173462F
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	92351263	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		aCode	No
KPK	+ No Yes	TCA	+ No Yes	aCode Reason	
NCD Protection	No	NCD Entitlement(%)	10	Private Hire	No

▼ Accident Details

Report Date	14/09/2018 15:14	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Major/Minor Ro
Date of Accident	14/09/2018	Time of Accident (hh:mm)	00:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	JUNCTION OF JALAN TUA KONG/UPPER EAST COAST ROAD				

▼ Excess

Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

▼ Policyholder Mailing Address

Address 1	23 JEDBURGH GARDENS	Address 2	FRANKEL ESTATE	Address 3	SINGAPORE 457089
Address 4		Address Type	Singapore address	Post Code	457089
Unit No.		Related Policy Number	5096189280		

▼ OI Driver Info

Driver Name	TAN HOON CHIANG	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S1173462F	Driver DOB	03/12/1955
Register Date of Driver License	01/01/1997	Driver Age	62	Driving Experience	21
Contact No.(Mobile)		Contact No.(Office)		Contact No.(Home)	
Address 1	23 JEDBURGH GARDENS	Address 2	FRANKEL ESTATE	Address 3	SINGAPORE 457089
Address 4		Address Type	Singapore address	Post Code	457089
Unit No.					
Does he own a Singapore Registered car?	Yes + No	Driver Vehicle No.	SLV2938Z	Driver Insurer Company	NTUC

Declaration

Breathalyzer or Blood Test Reading?	0 mg	Any Injury?	Yes + No
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Modification History

Claim 001 OD-MD **New**

Claim Type *	OD-MD	Insured Name	TAN HOON CHIANG	Insured NRIC	S117
Contact No.(Mobile)	92351263	Contact No. (Home)	82480298	Contact No. (Office)	
Email Address	hoonchiang.tan@nie.edu.sg	OI		TP	
Claim Description	SLV2938Z ON 14 Sept 2018	Vehicle Number	SLV2938Z	Vehicle Number	SLK2
Preferred Workshop		Insured Liability	Fully at Fault	Name of Preferred Workshop	
Sanction No. Finalisation	Yes	Registered Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	14/09/2018 15:15	Claim Close Date		Date Received	14/0
Report Taken By	ROSLI WAHAB	Workshop Repairer		Total Loss but Repaired	
Print AK letter				OD Excess Collected by Workshop	

Save Submit

Attachment

Accident No.		MT/1011327		Claim No.		001							
Last Doc. Received		☒ Yes ☐ No		Upload Date		14/09/2018 15:19							
Path *				Category *		Confidential		Urgency *		Del			
Choose File		No file chosen		Clear		Please Select		NO		Normal			
Choose File		No file chosen		Clear		Please Select		NO		Normal			
Choose File		No file chosen		Clear		Please Select		NO		Normal			
Choose File		No file chosen		Clear		Please Select		NO		Normal			
Choose File		No file chosen		Clear		Please Select		NO		Normal			
Choose File		No file chosen		Clear		Please Select		NO		Normal			
Choose File		No file chosen		Clear		Please Select		NO		Normal			
Message Read													
Attachment List													
Attachment		Uploaded By/Date		Category		Urgency		Description					

<https://qlclaim.income.com.sg/qcs/icm/eclaim/claimantSave.do>

Claim Handling

Task Transfer Exit

Accident MT/1011527

LOS SAL SUB

Policy No.	5096189280	Vehicle No.	SLV2938Z	GST Registration No.	
Certificate No.					
Policyholder Name	TAN HOON CHIANG			Policyholder NRIC	S1173462F
Product Code	PRIVATE CAR INSURANCE	Cover Type	Drive CLASSIC	Loading	0
Contact No.(Mobile)	92351283	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No *
KPI	+ No Yes	TCA	+ No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	10	Private Hire	No

Accident Details

Report Date	14/09/2018 15:14	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Major Minor Road
Date of Accident	14/09/2018	Time of Accident (hh:mm)	09:00	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	ICM No.	
Accident Location	JUNCTION OF JALAN TUA KONG/UPPER EAST COAST ROAD				

Excess

Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

Benefits

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	23 JEDBURGH GARDENS	Address 2	FRANKEL ESTATE	Address 3	SINGAPORE 457089
Address 4		Address Type	Singapore address	Post Code	457089
Unit No.		Related Policy Number	5096189280		

OI Driver Info

Driver Name	TAN HOON CHIANG	Driver Type	Main Driver	Driver DOB	03/12/1955
Unnamed driver Name		Driver NRIC	S1173462F	Driving Experience	21
Register Date of Driver License	01/01/1997	Driver Age	62	Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	SINGAPORE 457089
Address 1	23 JEDBURGH GARDENS	Address 2	FRANKEL ESTATE	Post Code	457089
Address 4		Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	Yes + No	Driver Vehicle No.	SLV2938Z	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any Injury?	Yes + No
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Modification History

Investigation

Claim 001 OD-MD

Claim Case Officer Yap Chee Ling

LOS SAL SUB

Claim Type	OD-MD	Insured Name	TAN HOON CHIANG	Insured NRIC	S1173462F
Contact No.(Mobile)	98275828	Contact No.(Home)	62450298	Contact No.(Office)	
Email Address	hoonchiang.tan@nie.edu.sg	OI Vehicle Number	SLV2938Z	TP Vehicle Number	SLK2474C
Claim Description	SLV2938Z ON 14 Sept 2018			Name of Preferred Workshop	
Preferred Workshop	Preferred Repair Option	Preferred Workshop Name unknown	Insured Liability report	Fully at Fault Received	
Workshop Realisation	Yes				
Date Registered	14/09/2018 15:20	Claim Close Date		Date Received	14/09/2018 00:00
Report Taken By	ROSLI WAHAB	Workshop Repairer		Total Loss but Repaired	
				OD Excess Collected by Workshop	

Print AK letter

Modification History

Special Claim Creation Approval

Approval	Reason
Remarks	

damage assessment Attachment

Vehicle Info

Vehicle Make	BMW	Vehicle Model	523i	Engine Capacity	
Date of Registration	21/12/2010	Classis No.	WBAPF32090C547426		
Towing Required *	☐ Yes ☒ No	Vehicle in IDAC *	☐ Yes ☒ No	Parallel Import *	☐ Yes ☒ No
Type of Tender	Own Damage	Assessor Name *	ROSLI WAHAB	Survey Current Status	

9/14/2018

Claim Handling (damage assessment Claim Task MT/1011527 / Claim 001 OD-MD)

IDAC/Workshop Name	NATIONAL ASSESSMENT CENTR	IDAC/Workshop Location	S1 UBI AVENUE 1 #01-25 PAYA
Windscreen Parts & Labour Cost	Total Loss * ☐ Yes ☒ No		
Market Value(\$)	Scrap Value(\$)	Economical Repair Value(\$)	
Remark			

Remark for
Supplementary

Damage Listing

	No.	Part No.	Description	Qty *	Repair Code *	
CLUTCH						
CLUTCH (MIC)	1	16000101	BUMPER (FRONT)	1	Replace	☒
COIL	2	16001302	BUMPER BRACKET (FRONT RIGHT)	1	Replace	☒
COMPARTMENT	3	16002401	BUMPER CLIPS (FRONT)	1	Replace	☒
COMPONENT SPEAKERS	4	16003201	BUMPER GRILLE (FRONT)	1	Replace	☒
COMPRESSOR	5	16004701	BUMPER TOWING COVER (FRONT)	1	Replace	☒
CONNECTING LINK	6	16005101	BUMPER RETAINER (FRONT LEFT)	1	Replace	☒
CONNECTING ROD	7	16005102	BUMPER RETAINER (FRONT RIGHT)	1	Replace	☒
CONSOLE BOX	8	16005001	BUMPER REINFORCEMENT (FRONT)	1	Unconfirm	☒
CONTROL ARM	9	16002902	BUMPER FOG LAMP COVER (FRONT RIGHT)	1	Replace	☒
CONVERTER	10	16002702	BUMPER FOG LAMP (FRONT RIGHT)	1	Replace	☒
COOLING COE	11	27100101	GRILLE (FRONT)	1	Replace	☒
COOLING FAN	12	41300101	SUPPORT PANEL (FRONT)	1	Unconfirm	☒
CORNER PANEL	14	41300801	SUPPORT PANEL TOP GARNISH (FRONT)	1	Unconfirm	☒
COVERENGINE GUARD (MIC)	15	27700102	HEAD LAMP (RIGHT)	1	Replace	☒
COVER FRAME (MIC)	16	149001	BORNET	1	Repair	☒
COWLING	17	344001	RADIATOR	1	Unconfirm	☒
COWLING (MIC)	18	112023	AIR CON CONDENSER	1	Unconfirm	☒
CRANK CASE	19	25400103	FENDER (FRONT RIGHT)	1	Replace	☒
CRANK SHAFT	20	25400902	FENDER INNER SHIELD (FRONT RIGHT)	1	Replace	☒
CRASH BAR (MIC)	21	23300202	DOOR (FRONT RIGHT)	1	Repair	☒
CRASH PAD (MIC)						
CROSS MEMBER						
CROWN COVER (MIC)						
CROWN HANDLE (MIC)						
CYLINDER						
DASHBOARD						
DECK						
DIESEL FILTER						
DIFFERENTIAL						
DISC						
DISC (MIC)						
DISTRIBUTOR						
DOOR						
DOOR FILLAR:						
DOOR						
DOOR (FRONT LEFT)						
DOOR (FRONT RIGHT)						
DOOR (REAR LEFT)						
DOOR (REAR RIGHT)						
DOOR AIR BAG						
DOOR AIR BAG CABLE						
DOOR ARCH PANEL						
DOOR ARRESTOR						
DOOR BLACK TAPE						

Save Submit

rsbm

From: Yap Chee Ling <CheeLing.Yap@income.com.sg>
Sent: Monday, 17 September, 2018 10:53 AM
To: 'rsbm@lkkauto.com'; city auto
Subject: SLV2938Z | MT/1011527 (Awarding Letter to City Auto)

Importance: High

Hi IDAC and City Auto,

Excess of \$600 is applicable.

Please liaise with the owner – Mr Tan Hoon Chiang at tel: 9235 1283 on the necessary.

Thank you.

Yap Chee Ling (Ms)
Executive
Motor Insurance
T +65 6430 7893
www.income.com.sg



At Income, we are 'In with You' on Performance, Growth, Innovation and Impact. These attributes reflect what we promise as an employer and what we want our people to exemplify.
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in with you

Our Ref: MT/CA/OD/051/1011527-001/YCL

17 Sep 2018

CITY AUTO PTE LTD
BLK 8 #01-58 TO 66
SIN MING INDUSTRIAL EST SECTOR C
SINGAPORE 575643

Dear Sir

CLAIM NUMBER: MT/1011527-001
REPAIR OF VEHICLE NUMBER: SLV2938Z

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

Award Date: 17 Sep 2018
Make: BMW
Model: 523i
Estimated Repair Days: 5
Location: Vehicle is currently with the owner
Address: BLK 1007 #01-11 BUKIT MERAH LANE 3 ALEXANDRA VILLAGE INDUSTRIAL ESTATE SINGAPORE 159721

Benefits: Not applicable

Excess Applicable: 600

Please note that supplementary items will not be allowed.

If you have any queries, please contact Yap Chee Ling at 6430-7893 or email us at motor@income.com.sg.

Yours sincerely

Low Choo Mee
Senior Manager
Motor Insurance

Disclaimer

This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

ACCIDENT STATEMENT

ACCIDENT DATE: 14 / 9 / 2018 (DD/MM/YYYY), TIME: 9 : 00 (HH:MM)

LOCATION: Jalan Tur Kong & Upper East Coast

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLV 2938Z
 b) INSURANCE COMPANY: NTUC
 c) POLICY NUMBER: 5096189280
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: BMW 525
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Driver use
 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: TAN HOON CHIANG (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S113462F CONTACT: 92351283
 c) ADDRESS: 83 Tedburgh Garden 457089

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: As above (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* d) DATE OF BIRTH: (____/____/____) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: _____

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

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS clear)
 b) ROAD SURFACE: (DRY / WET / OTHERS DRY)

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: SLK 2474C MODEL: Lexus 300
 b) DRIVER'S NAME: CHEAM
 c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

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

EMAIL: Tan hoon chiang@gmail.com

VIDEO =

PASSION[®]
SILVER



TAN HOON CHIANG
S1173462F
8800 3000 0540 4917
EXPIRES ON 31/08/2023



Gold Storage   

**SENIOR
CITIZEN
CONCESSION**

REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number: **S1173462F**
Name: **TAN HOON CHIANG**
Birth Date: 03 Dec 1955
Issue Date: 23 Apr 2003



Concession

- This card is issued and managed by the Land Transport Authority of Singapore.
- Use governed by conditions published at www.lta.gov.sg, statutes and regulations.
- This card can only be used by the person whose name and Birth Certificate No./NRIC is printed on the reverse side of this card. Unlawful use of this card to evade lawful payable fare is an offence.
- This card shall be retained if it has been tampered with, misused, replaced or refunded.
- Customer Service Line: 1900-CALL ONE (1800-2253 663)

 **ERP**  

CAN **8008 1600 0190 5976**
GEO HW1802018

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

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

VALID UNTIL 31 May 1976



License No. S1173462F

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: 5096189280

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SLV2938Z**
 Chassis Number : **WBAFP32090C547428**
2. Name of Policyholder : **TAN HOON CHIANG**
3. Effective Date of Insurance : **21 Dec 2017**
4. Expiry Date of Insurance : **20 Dec 2018**
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.

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)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: TAN HOON CHIANG
NAMED DRIVER (1)	: TAN GEOK TEE
NAMED DRIVER (2)	: N/A
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 : SINGCAPITAL PTE LTD (00000585900)

Date of Issue : 30 Nov 2017 18:21 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive