

NATIONAL Assessment Centre Services

Form 1 (2009)

MNA 118124341

| | | | |
|---|--|-----------------------|---------------|
| Date In: 25/9/18 13:53 | Job description | Date & Time Completed | Done by |
| Ref No: NA/INC18017406/h4. | SAS e-filing | | |
| Veh No: SKN 252K | E-mail (within 3hrs, APC 2hrs) | | |
| UOA: 22/9/18 18:35 | i-Motor Claim Form | MT/1012999-001 | 25/9/18 15:53 |
| QID: <input checked="" type="checkbox"/> Reporting Only | i-Motor W/O (Within, OD 2hrs, TP 4hrs) | | |
| | i-Photo Uploaded | | |
| | Assessment/Survey Report | | |
| TP Insurer: | Ass't Report by Fax / Hand to Owner/Wksp | | |

| | | |
|--|---|-----------------------|
| Preferred Wksp / INC Assign Wksp / QW: () | Tel: () | Fax: () |
| TP Particulars: | Veh No: SKN 6554M. | 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%, P: 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: | 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 |
|-----------|---------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

| | | |
|---|---|--|
| <p>MA1806071</p> <p>Claimant's Particulars:</p> <p>Driver/Owner:</p> <p>Contact No:</p> <p>Damaged Portion:</p> <p>QC Checked by (Engr-In-Charge):</p> <p>Auditors' Comments:</p> <p>Sat. 1:</p> <p>Sat. 2 / 3:</p> | <p>Invoice Preparation Checklist</p> <p>1) AR: Accident Reporting (\$30);</p> <p>2) DA: Damage Assessment (\$100); INC (\$80)</p> <p>3) TP: Towing Fee \$40/\$45</p> <p>4) FT: Follow-Through Survey \$120</p> <p>5) FT: Follow-Through Survey (Resurvey) \$30</p> <p>For claiming against INC Only (wef 10 Jan 2005)</p> <p>6) TR: Re-inspection \$75</p> <p>7) N1: Idas DA + SMRT Survey \$160</p> <p>8) NTUC Additional Services:</p> <p>OD*</p> <p>* N5: Courtesy Car / Tpt Allowance \$5</p> <p>* N6: Repair Co-ordination \$10</p> <p>* N7: Post Repair Inspection \$25</p> <p>* N8: DV / Collect Excess Coordination \$5</p> <p>TP (N11): TP (Non INC) against INC \$20</p> <p>9) N12: Idas Mobile \$30</p> <p>Invoice dated _____ Fee Charged _____</p> <p>Invoice dated _____ Fee Charged _____</p> | <p>Am't (\$)</p> <p>Inc Bill</p> <p>30.00</p> <p>Am't (\$)</p> <p>Add Bill</p> |
|---|---|--|

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 | 25/09/2018 13:53 |
| Date Of Accident | 22/09/2018 18:35 |
| Exact Location Of Accident | ALONG BEDOK SOUTH RD NEAR TO BLK18 CARPRK ENTRANCE |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|-------------------------------|
| Vehicle Registration Number | SKN252K |
| Insured/Policyholder | |
| Name Of Registered Owner | SONG CHYE CHENG@SOON ENG KIAT |
| NRIC No | S0099590H |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-90933000 |
| Alternative Phone No | OFFICE-90933000 |

Vehicle Particulars

| | |
|--|--------------------|
| Manufacturer | NISSAN |
| Model | PRESAGE QR25DE 4AT |
| 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 | PRIVATE CAR |

Insurance Company

| | |
|---------------------------|--|
| Name of Insurance Company | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 5093964834 |
| Cover Note Number | - |

Driver

| | |
|----------------------|-------------------------------|
| Name of Driver | SONG CHYE CHENG@SOON ENG KIAT |
| NRIC No | S0099590H |
| Date Of Birth | 02/11/1954 |
| Occupation | INDOOR |
| Date Of Driving Pass | 15/03/1975 |
| Driving Experience | 43 YEARS AND 6 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-90933000 |
| Fax Number | |
| Contact Number | OFFICE-90933000 |
| EMail Address | NOEMAIL |

| | |
|---|-------------------|
| Address | 25A JALAN SELAMAT |
| Postcode | 418549 |
| 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 | |
| Was any body injured in the Accident? | YES |
| Was any injured conveyed to hospital by ambulance? | NO |
| Was any other material or property damaged? | YES |
| I have been approached by unknown person(s) soliciting/offering accident claims assistance. | NO |
| Number of Passengers (Including Driver) | 2 |
| Passenger 1 | NAME: : PHUA BEE LIAN GENDER: : FEMALE |

Details of Police Action

| | |
|---|--|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | KAMPONG KEMBANGAN NEIGHBOURHOOD POLICE POST |
| Police Station Address | ROAD: BLK 112 LENGKONG TIGA #01-215 , POSTCODE: 410112 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-7489999 - FAX NO: 67454676 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

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 | SLN6554M |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | WONG JUN JIN JEREMY |
| NRIC/Passport Number | S8512391B |
| Contact Number | 93391913 |
| Address | |
| Postcode | |

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

| | |
|---|-------------------------------|
| Name | SONG CHYE CHENG@SOON ENG KIAT |
| Approximate Age | |
| Injuries Sustain | NECK AND BACK |
| Injured person in which vehicle? | SKN252K |
| Were seat belts worn? | YES |
| Was this injured conveyed to hospital by ambulance? | NO |
| Address | |
| Postcode | |

DETAILS OF INJURED PERSON 2

| | |
|---|---------------|
| Name | PHUA BEE LIAN |
| Approximate Age | |
| Injuries Sustain | NECK AND BACK |
| Injured person in which vehicle? | SKN252K |
| Were seat belts worn? | YES |
| Was this injured conveyed to hospital by ambulance? | NO |
| Address | |
| Postcode | |

SKETCH PLAN

IMPORTANT NOTICE

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

I understand, acknowledge, agree and consent that:

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

Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN

B11C 18



A = SKN 252K

B = SLN 6554 M

Bedok South Rd

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Police Report

DECLARATION

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

Policyholder's Signature
Date & Time:

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

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



SINGAPORE POLICE FORCE



T/20180924/2141

1 of 4

Police Station Of Origin:
Kampong Kembangan NPP
112-Lengkong Tiga #01-215 SINGAPORE
410112
Tel No: 1800-7489999

Report No. T/20180924/2141

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|------------------|--------------------------|
| Date/Time Report Made: 24/09/2018 20:05 | Vide Report No.: | Station Diary No.: 23 |
|--|------------------|--------------------------|

Informant's Particulars

| | | | | | |
|--|------------|------------------------------|--|--|----------------------------|
| Name of Informant: SONG CHYE CHENG | | | Address: 25A JALAN SELAMAT SINGAPORE 418549 | | |
| ID Type / ID No.: NRIC NO / S0099590H | | | Contact No.: Home/Office: Mobile: 90933000 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: | | |
| Sex: Male | Age: 63 | Date of Birth: 02/11/1954 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: English | | Institution / School Name: |
| Occupation: SENIOR MANAGER | | | Driving Licence Information: Class: 2B,2A,2,3,4,5 Date of Expiry: | | |

General Information of the Accident

| | | | | |
|---|------------------|------------------------------------|--|-------------------------------------|
| Type of Accident: | Injury Others | Drink Drive: No | Date/Time of Accident: 22/09/2018 18:35 | Type of Location: Straight Road |
| Location: Along Road 1 BEDOK SOUTH ROAD | | | | |
| Along Bedok South Road, near to car park entrance (Car Park Number: BDB93) of Block 18 Bedok South Road | | | | |
| Weather: Clear | | Road Surface: Dry | | Road Speed Limit: |
| Traffic Flow: | | Traffic Control: Not Controlled | | Traffic Volume: Light |
| Type of Collision: Between Moving Vehicles - Head To Side | | | | Anyone conveyed by ambulance: No |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------|--------|--------------------------|--------|----------------------|-----------------|
| SKN252K | Car | NISSAN | PRESAGE QR25DE 4AT | Silver | Seriously Damaged | 1 |
| SLN6554M | Car | | | | | 1 |

Details of Vehicle Insurance

| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
|-------------|-------------------|--------------|-----------|-------------|
|-------------|-------------------|--------------|-----------|-------------|



**SINGAPORE
POLICE FORCE**



T/20180924/2141

2 of 4

Police Station Of Origin:
Kampong Kembangan NPP
112 Lengkong Tiga #01-215 SINGAPORE
410112
Tel No: 1800-7489999

Report No. T/20180924/2141

CONTINUATION OF REPORT

| Details of Vehicle Insurance | | | | |
|-------------------------------------|--|--------------|------------|-------------|
| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
| SKN252K | NTUC Income Insurance Co-Operative Limited | 5093964834 | 04/09/2017 | 26/09/2018 |

| Details of Person Involved | | | | |
|-----------------------------------|-------------------------|--|---|--|
| Any Pedestrian Involved: No | | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | | |
| Passenger | | | | |
| Name | PHUA BEE LIAN | ID No. | S1498804A | |
| Related Vehicle | SKN252K (Car) | Contact No. | 81008180 | |
| Hospital/Clinic | CHANGI GENERAL HOSPITAL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL | |
| Date Treatment | 23/09/2018 | Date Discharge | 23/09/2018 | |
| No. of Days granted Medical Leave | 03 | Degree of Injury | Slight | |
| Driver | | | | |
| Name | SONG CHYE CHENG | ID No. | S0099590H | |
| Related Vehicle | SKN252K (Car) | Contact No. | 90933000 | |
| Hospital/Clinic | CHANGI GENERAL HOSPITAL | Glass of Driving Licence & Expiry Date | Class: 2B,2A,2,3,4,5 Date of Expiry: NIL | |
| Date Treatment | 23/09/2018 | Date Discharge | 23/09/2018 | |
| No. of Days granted Medical Leave | 03 | Degree of Injury | Slight | |
| Driver | | | | |
| Name | WONG JUN JIN JEREMY | ID No. | S8512391B | |
| Related Vehicle | SLN6554M (Car) | Contact No. | 93391913 | |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL | |
| Date Treatment | NIL | Date Discharge | NIL | |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL | |



**SINGAPORE
POLICE FORCE**



T/20180924/2141

4 of 4

Report No. T/20180924/2141

Police Station Of Origin:
Kampong Kembangan NPP
112 Lengkok Tiga #01-215 SINGAPORE
410112
Tel No: 1800-7489999

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:

G /

Sgt 3 MUHAMMAD SYAHIDIN BIN MATNIN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

24/09/2018 20:05

Officer In Charge Of Case:

TP / AEIT /

SI ANG YI TING, STEPHANIE

Contact No.: 65476414

Classification Of Case:

Authentication Stamp

NP168

SIGNATURE



**SINGAPORE
POLICE FORCE**



T/20180924/2141

3 of 4

Police Station Of Origin:
Kampong Kembangan NPP
112 Lengkong Tiga #01-215 SINGAPORE
410112
Tel No: 1800-7489999

Report No. T/20180924/2141

CONTINUATION OF REPORT

Brief Details.

On the 22/09/2018 at about 1835 hours, I was driving my car bearing the registration plate number SKN252K (Nissan Presage, Silver in colour) along Bedok South Road, on the extreme left lane. As I was driving past the car park near to Block 18 Bedok South Road (Car Park Number: BDB93), I suddenly felt a strong impact and a loud sound coming from the rear of my car. Upon experiencing this, I immediately stopped my car.

When I got out of my car to make a check, I discovered that there was a red in colour car, bearing the registration plate number SLN6554M, that had collided to my rear left passenger door. The said car was exiting the car park at that point of time just before the accident. The impact was so hard that it caused my rear left wheel to explode. After taking photos of the accident, I exchanged particulars with the other driver after which I towed my car as it was not in any condition to be driven.

On the 23/09/2018, I woke up and felt aching on my neck and my back. Due to the aching, I went to Changi General Hospital for consultation. The doctor then gave me three days of medical leave.

I wish to state that my car does not have any in-car camera installed. I am unsure if there is any camera at the vicinity of where the accident took place. I also wish to state that during the accident, my wife (Phua Bee Lian, HP: 81008180) was the only passenger and was seated at the front left passenger seat. She too was given three days of medical leave by the doctor as she also experienced some aching on her neck.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0099590H



Name: SONG CHYE CHENG
@SOON ENG KIAT
宋財庚
Race: CHINESE
Date of Birth: 02-11-1954 Sex: M
Country of Birth: SINGAPORE



S0099590H

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S0099590H
Name: SONG CHYE CHENG

Birth Date: 02 Nov 1954
Issue Date: 05 Nov 2003




000978520J

1003452



NRIC No: S0099590H



Blood Group: AB+ Date of issue: 04-06-1993

25A JALAN SELAMAT
SINGAPORE 418549
NRIC No: S0099590H


Date: 12-12-2006 (R) No: 5668921

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

| Class | Description | PASS DATE |
|----------|--|-------------|
| Class 2B | Motorcycles not exceeding 200 cc | 10 Aug 1977 |
| Class 2A | Motorcycles between 201 cc and 400 cc | 10 Aug 1977 |
| Class 2 | Motorcycles exceeding 400 cc | 10 Aug 1977 |
| Class 3 | Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms | 15 Mar 1975 |
| Class 4 | Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms | 08 Nov 1976 |
| Class 5 | Motor Vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7250 kilograms | 17 Dec 1977 |

NP 425A

Licence No: S0099590H



Hello, NAC_PAYA_UBI_800601

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

Policy Query

| | | | | | | | | | | |
|---|--------------------------------------|--------------------|---|-------------------|---------|------------------|-------------|----------------|---------------|-------------|
| Policy No. | <input type="text"/> | Date of Accident | <input type="text" value="22/09/2018 13:44"/> | | | | | | | |
| Vehicle No.(For Motor) | <input type="text" value="SKN252K"/> | Certificate Number | <input type="text"/> | | | | | | | |
| <input type="button" value="Search"/> | | | | | | | | | | |
| Select | Policy No. | Certificate Number | Policyholder Name | Policyholder NRIC | Product | Cover Type | Vehicle No. | Insured Object | Commence Date | Expiry Date |
| <input checked="" type="radio"/> | 5093964834 | | SONG CHYE CHENG@SOON ENG KIAT | S0099590H | GPC | drivo CLASSIC | SKN252K | SKN252K | 04/09/2017 | 26/09/2018 |
| <input type="button" value="Continue"/> | | | | | | | | | | |

Claim Handling

Accident MT/1012999

| | | | | | |
|---|---|-------------------------------|---|------------------------|-----------|
| Policy No. | 5093964834 | Vehicle No. | SKN252K | GST Registration No. | |
| Certificate No. | | | | | |
| Policyholder Name | SONG CHYE CHENG@SOON ENG KIAT | | | Policyholder NRIC | 500991 |
| Product Code | PRIVATE CAR INSURANCE | Cover Type | drive CLASSIC | Loading | 0 |
| Contact No.(Mobile) | 90933000 | Contact No.(Office) | | Contact No.(Home) | |
| Email Address | | Special Remark | | eCode | No |
| KFK | <input checked="" type="radio"/> No <input type="radio"/> Yes | TCA | <input checked="" type="radio"/> No <input type="radio"/> Yes | eCode Reason | |
| NCD Protection | No | NCD Entitlement(%) | 50 | Private Hire | No |
| Accident Details | | | | | |
| Report Date | 25/09/2018 15:48 | Accident Report Within 24 hrs | Yes | Accident Type | Collision |
| Date of Accident | 22/09/2018 | Time of Accident hh:mm | 18:35 | Country of Accident | Singapore |
| Reporting Centre | | Orange force | | ICM No. | |
| Accident Location | ALONG BEDOK SOUTH RD NEAR TO BLK18 CARPRK ENTRANCE | | | | |
| 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 | 25A JALAN SELAMAT | Address 2 | SINGAPORE 418549 | Address 3 | |
| Address 4 | | Address Type | Singapore address | Post Code | 418549 |
| Unit No. | | Related Policy Number | 5093964834 | | |
| OI Driver Info | | | | | |
| Driver Name | SONG CHYE CHENG | Driver Type | Main Driver | | |
| Unnamed driver Name | | Driver NRIC | S0099590H | Driver DOB | 02/11/ |
| Register Date of Driver License | 01/01/1990 | Driver Age | 63 | Driving Experience | 28 |
| Contact No.(Mobile) | 90933000 | Contact No.(Office) | | Contact No.(Home) | |
| Address 1 | 25A JALAN SELAMAT | Address 2 | SINGAPORE 418549 | Address 3 | |
| Address 4 | | Address Type | Singapore address | Post Code | 418549 |
| Unit No. | | | | | |
| Does he own a Singapore Registered car? | Yes <input checked="" type="radio"/> No <input type="radio"/> | Driver Vehicle No. | | Driver Insurer Company | |
| Declaration | | | | | |
| Breathalyser or Blood Test Reading? | 0 mg | Any injury? | <input checked="" type="radio"/> Yes <input type="radio"/> No | | |

Modification History

Claim 001 **New**

| | | | |
|---|------------------------------------|-------------------------|----------------------------------|
| Claim Type * | OD-MX | Insured Name | SONG CHYE CHENG@SOON ENG KIAT |
| Contact No.(Mobile) | 90933000 | Contact No. (Home) | |
| Email Address | | OI Vehicle Number | SKN252K |
| Claim Description | SKN252K / SLN6554M ON 22 Sept 2018 | | |
| Preferred Workshop | 0 | Insured Liability | Not at Fault |
| Repair No. Finalisation | Yes | Preferred Repair Option | Preferred Workshop, Name unknown |
| Date Registered | | GIA report | Received |
| Report Taken By | | | |
| | | Date Registered | 25/09/2018 15:52 |
| | | Claim Close Date | |
| | | | LIEW SHAN HUI |
| <input checked="" type="checkbox"/> Print AK letter | | | |

Save Submit

Attachment

Accident No. MT/1012999

Claim No.

001

Last Doc. Received

Yes No

Upload Date

25/09/2018 15:53

Path *

Category *

Confidential

Urgency *

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Message Read

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Attachment List

| Attachment | Uploaded By/Date | Category | Urgency | Description |
|------------|--|-----------------------|---------|---------------------------------|
| | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 25 Sep 2018 15:53 | NRIC/ Driving License | Normal | NRIC/ Driving License 2018-9-25 |
| | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 25 Sep 2018 15:53 | SAS | Normal | SAS 2018-9-25 |
| | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 25 Sep 2018 15:53 | Photos | Normal | Photos 2018-9-25 |
| | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 25 Sep 2018 15:53 | Photos | Normal | Photos 2018-9-25 |
| | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 25 Sep 2018 15:53 | Photos | Normal | Photos 2018-9-25 |
| | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 25 Sep 2018 15:53 | Photos | Normal | Photos 2018-9-25 |
| | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 25 Sep 2018 15:53 | Photos | Normal | Photos 2018-9-25 |
| | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 25 Sep 2018 15:52 | Photos | Normal | Photos 2018-9-25 |
| | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 25 Sep 2018 15:52 | Photos | Normal | Photos 2018-9-25 |
| | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 25 Sep 2018 15:52 | Photos | Normal | Photos 2018-9-25 |
| | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 25 Sep 2018 15:52 | Photos | Normal | Photos 2018-9-25 |
| | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 25 Sep 2018 15:52 | Photos | Normal | Photos 2018-9-25 |
| | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 25 Sep 2018 15:52 | Photos | Normal | Photos 2018-9-25 |
| | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 25 Sep 2018 15:52 | Photos | Normal | Photos 2018-9-25 |
| | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 25 Sep 2018 15:52 | Photos | Normal | Photos 2018-9-25 |

Video List

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