

NATIONAL Assessment Centre Services

Date In: 21/11/2018 10:34	Job description	Date & Time Completed	Done by
Ref No: NA/INC18021031/K4	SAS e-filing		
Veh No: GBB6154R	E-mail (within 8hrs, AIC 2hrs)		
DOA: 16/11/2018 19:40	I-Motor Claim Form	MT/1020746-001	21/11/18 14:45
OD TP: Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
TP Insurer	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No:

SDL9796S

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 repaler.

) 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

NA1807603

Claimant's Particulars:

Owner:

Ref No:

Related Portion:

Checked by (Engr-In-Charge):

Notes/ Comments:

Invoice Preparation Checklist

Amf (\$)

Amf (\$)

In Bill

Add Bill

1) AR: Accident Reporting (\$30);

2) DA: Damage Assessment (\$100); INC (\$80)

3) TP: Towing Fee \$40/\$45

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:-

ON*

*N3: 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

Amount Paid

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 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. 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	21/11/2018 10:34
Date Of Accident	16/11/2018 19:10
Exact Location Of Accident	211B COMPASSVALE LANE (LOADING BAY)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB6154R
Insured/Policyholder	
Name Of Registered Owner	MENG CHENG TRANSPORT & SERVICES
Co Reg No	53378329A
Email Address	PEIYAN@MENGCHENG.COM.SG
Mobile Phone No	(LOCAL) +65-88001377
Alternative Phone No	OFFICE-88001377

Vehicle Particulars

Manufacturer	CITROEN
Model	BERLINGO 1.6L M/T AB 2WD 6DR FGL 1N1 TC
Exact Purpose for which vehicle was being used at time of accident	WORK
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5099179482-01
Cover Note Number	

Driver

Name of Driver	TAN SEOW PENG (CHEN SHAOPING)
NRIC No	S7411795C
Date Of Birth	18/04/1974
Occupation	OUTDOOR
Date Of Driving Pass	16/09/2005
Driving Experience	13 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88001377
Fax Number	
Contact Number	OTHERS-88001377
EMail Address	PEIYAN@MENGCHENG.COM.SG

Address	BLK 41 SIMS DRIVE #08-275
Postcode	380041
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	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)	2
Passenger 1	
	NAME: : NIL
	GENDER: : FEMALE

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

PLS REFER TO THE ATTACHED STATEMENT.

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	SDL9796S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ANDY LIM JIA JUN
NRIC/Passport Number	
Contact Number	96728378
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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:

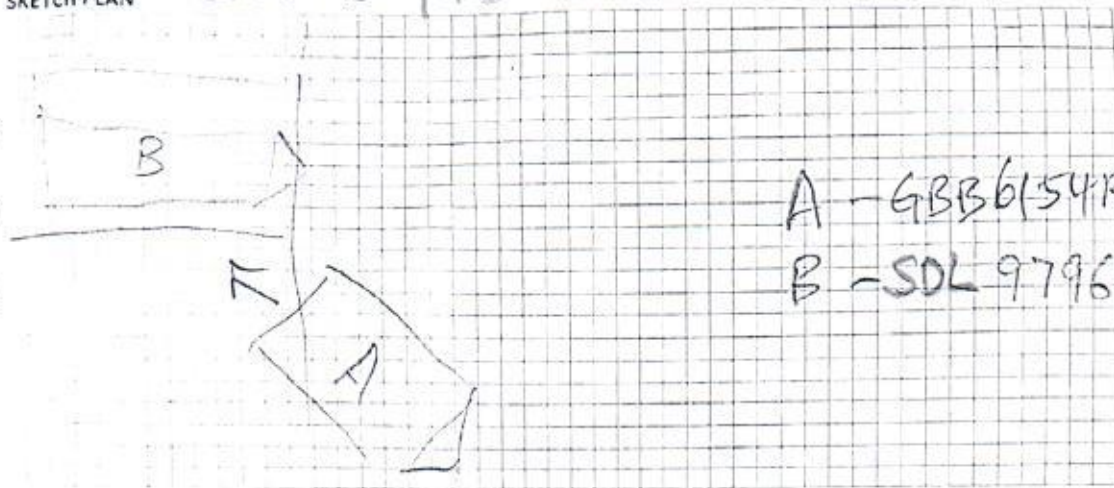
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

01-02-2018 11:11:11

SKETCH PLAN

211 B compassvale lane.

loading bay



A - GBB6154R

B - S0L9796S

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle A was at 211 B compassvale lane
~~for~~ Loading Bay. When Vehicle A was
 reversing slightly hit on Vehicle B
 front head light and Bumper. Vehicle A
 damage was at the rear portion slightly
 damage.

DECLARATION

I/We declare the following 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.:

21/11/2018



MENG CHENG TRANSPORT & SERVICES

BLK 531A, UPP CROSS STREET, #04-113, HONG LIM COMPLEX, SINGAPORE 051531
TEL: 65 9239 5579 (Rui Fen) / 65 9008 8701 (Stephen)
ROC NO: 53378329A

RENTAL AGREEMENT

MCT - 18/0301

HIRER'S PARTICULARS			
Name:	TAN SEOW PENG		NRIC / ROC: 97411795C
Address:	BLK 41 SIMS DR #108-275 S (38004)		
Contact Hp:	88001377	Office:	
			Email/Fax:

DRIVER'S PARTICULARS	
Name:	
Address:	
Driving Experience:	
License No:	
D.O.B:	

VEHICLE & CHARGES			
Vehicle No:	G6B 6154R	Make & Model:	CITROEN BELINGO
Rental Period:	3 MONTH	Charges:	\$1000
Date Out:	12/11/2018	Time:	9:50 AM
		Mileage:	
		Deposit:	
		Fuel Level:	

*INTEREST OF LATE PAYMENT 1.5% PER MONTH

IMPORTANT NOTES: Restricted to Singapore use only.

No refund will be given for fuel left in vehicle.

Hirer is liable to pay first Insurance Excess S\$

in any accident plus lost of earnings while damaged vehicle is under repair.

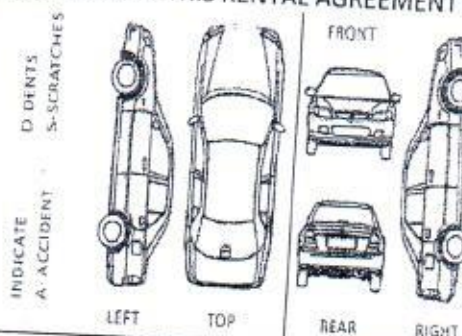
Hirer is liable for all Parking Fines and Traffic Violations.

Driver must be above 23 years with minimum 2 years driving experience.

Vehicles return during office hours only. No services on Public Holidays and Sundays.

I/WE DECLARE THAT THE ABOVE PARTICULARS ARE TRUE AND CORRECT IN EVERY ASPECT AND
I/WE HAVE READ AND UNDERSTOOD THE TERMS AND CONDITIONS OF THIS RENTAL AGREEMENT AND
AGREE.

Company's Stamp / Hirer's Signature & Date



Checked By:	Deposit Refund:		
Remarks:			
Date Out:	Time:	Mileage:	Fuel Level:

Signature of Hirer / Driver

TP

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SINGAPORE



林佳俊
Andy Lim Jia Jun
Marketing Associate

(65) 9672 8378

andylinjiajun@propnex.com

CEA Reg. No.: R058641F



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#1 LARGEST
REAL ESTATE
AGENCY
IN SINGAPORE

Enquire Vehicle Registration Details

Owner Particulars

NRIC/Passport/Company Cert No.: 53378329A
 Owner ID Type: Business
 Owner Name: MENG CHENG TRANSPORT & SERVICES
 Registered Address: 531A UPPER CROSS STREET #04-113 HONG LIM COMPLEX SINGAPORE 051531
 Mailing Address: -
 Birth Date: -

Vehicle Particulars

Vehicle No.: GBB6154R
 Previous Vehicle No.: -
 Effective Date of Ownership: 21 Mar 2018
 Original Regn Date: 23 Jul 2009
 Registration Date: 23 Jul 2009
 Year of Manufacture: 2009
 Vehicle Type: Goods (Closed) Van/Van Panel (Delivery)
 Vehicle Scheme: -
 Vehicle Attachment 1: No Attachment
 Vehicle Attachment 2: -
 Vehicle Attachment 3: -
 Vehicle Make: CITROEN
 Vehicle Model: BERLINGO 1.6L M/T AB 2WD 6DR FGL 1N1 TC
 Primary Colour: Grey
 Secondary Colour: -
 Passenger Capacity: 2
 Chassis No.: VF77B9HTC9J122959
 Engine No.: 10JBCB0037403
 Engine Capacity / Power Rating: 1560 cc / -
 Maximum Power Output: -
 Propellant: Diesel
 Max Unladen Weight: 1420 kg
 Maximum Laden Weight: 1980 kg
 Open Market Value: \$20,983.00
 PARF Eligibility: No
 PARF Eligibility Expiry Date: -
 Minimum PARF Benefit: -
 No. of Transfers: 1
 IU Label No.: 1042350388
 COE No.: 2009060105000265M
 COE Expiry Date: 22 Jul 2019
 COE Category: C - Goods Vehicle & Bus
 COE Registration Category: C - Goods Vehicle & Bus
 Quota Premium (QP) / Prevailing Quota Premium: \$7,600.00 / -
 Actual QP Paid: \$7,600.00
 QP (Regn Cat): \$7,600.00
 OPC Cash Rebate Eligibility: No
 QP during COE Bidding Exercise: \$7,600.00
 Additional Registration Fee Rate: 5.00 %
 Actual ARF Paid: \$1,050.00
 Vehicle Lifespan Expiry Date: 22 Jul 2029
 CO2 Emission: -
 CO Emission: -
 HC Emission: -
 NOx Emission: -
 PM Emission: -
 Message: To renew the COE, the Prevailing Quota Premium payable is that of Category C.

Print

OK

Save as PDF

* Reported on 19/11/2018 @ 1330Hrs

ACCIDENT STATEMENT

ACCIDENT DATE: (16/11/2018) (DD/MM/YYYY), TIME: (19:10) (HH:MM)

LOCATION: 211 B Compassvale Lane (Loading Bay)

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GBB6154P
b) INSURANCE COMPANY: _____
c) POLICY NUMBER: _____
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: _____
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: _____
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: _____ (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: _____ (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: 88001397
c) ADDRESS: _____

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

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: _____

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

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) _____

b) ROAD SURFACE: (DRY / WET / OTHERS) _____

6. WAS ANYBODY INJURED (YES / NO) NO

7. a) REPORTED TO POLICE (YES / NO) NO

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SDL9796S MODEL: _____
b) DRIVER'S NAME: Andy Lim Jia Jun
c) NRIC/FIN/PASSPORT: _____ CONTACT: 96728378

9. THIRD PARTY VEHICLE

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

* No of passengers
(Including driver)
(2)

1 - Female

* No of passengers
(Including driver)
()

* No of passengers
(Including driver)
()

* Call Driver
on 21/11/2018 @ 1035 AM
for sketch plan
with chop?

Email = Peiyan@mengcheng.com.sg

Fax = Peiyan@mengcheng.com.sg

VIDEO =

Waiting for Company Chop?

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7411795C



Name:

TAN SEOW PENG
(CHEN SHAOPING)

陈少平

Race:

CHINESE

Date of birth:

18-04-1974

Sex:

M

Country of birth:

SINGAPORE

S7411795C

REPUBLIC OF SINGAPORE DRIVING LICENCE

S7411795C



TAN SEOW PENG
(CHEN SHAOPING)

Birth Date: 18 Apr 1974

Issue Date: 11 Oct 2010



4580875



NRIC No. S7411795C



Date of issue:

11-05-2010

Address:

APT BLK 41 SIMS DRIVE
#08-275
SINGAPORE 380041

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

EFFECTIVE DATE

Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$ 16 Sep 2005

NP 428A



Licence No: S7411795C

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 : 5099179482

Cover : Third Party

1. Index mark and Registration Number of Vehicle

: GBB6154R

Chassis Number

: VF77B9HTC9J122959

2. Name of Policyholder

: MENG CHENG TRANSPORT & SERVICES

3. Effective Date of Insurance

: 21 Mar 2018

4. Expiry Date of Insurance

: 20 Mar 2019

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

(b) Use for the carriage of passengers or goods in connection with the Policyholder's or Hirer's business.

This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.

(b) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

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

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: S\$1,500
INSURE WITH COE	: 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 : ALL INS AGENCY PTE. LTD. (00000571908)

Date of Issue : 21 Mar 2018 10:43 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Hello, NAC_PAYA_UBI_800601

• Change Language

• Change Password

• Log Out

[My Desktop](#)[Notice of Loss](#)**Policy Query**

Policy No. Date of Accident
Vehicle No.(For Motor) Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5099179482-01		MENG CHENG TRANSPORT & SERVICES	53378329A	GFT	Third Party	GBB6154R	GBB6154R	03/11/2018	

Policy Information

Policy No.	5099179482-01	Policyholder Name	MENG CHENG TRANSPORT & SE	Policyholder NRIC	53378329A
Certificate No.					
Address	BLK 531A #04-113 UPPER CROSS STREET HONG LIM COMPLEX SINGAPORE 051531				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	25/10/2018	Effective Date	03/11/2018 00:00	Expiry Date	02/11/2019 23:59
Third Party Excess	1500.00	Own damage Excess	0.00	Windscreen Excess	0.00
Additional Excess		OS Premium	1720.56		
Outside Singapore OD Excess		Outside Singapore TP Excess			
Agent	ALL INS AGENCY PTE. LTD.	Agent Tel.	FAX 64514549	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

Policyholder Mailing Address

Address 1	BLK 531A #04-113	Address 2	UPPER CROSS STREET	Address 3	HONG LIM COMPLEX
Address 4	SINGAPORE 051531	Address Type	Singapore address	Post Code	051531
Unit No.	04-113	Related Policy Number	5101580291-01		

Insured Object: GBB6154R

Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	03/11/2018 00:00	Basic Information Endorsement	000001286932740	Endorsement Take Effective	<p>Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover the following vehicle(s) as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. GBH9125Z 03-11-2018 \$716.90 In view of this amendment, an additional premium of \$716.90 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque in favour of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash or NETS.</p>

Claim Handling

The premium on this policy has not been collected.

Accident MT/1020746

Policy No.	5099179482-01	Vehicle No.	GBB6154R	GST Registration No.
Certificate No.				
Policyholder Name	MENG CHENG TRANSPORT & SERVICES			Policyholder NRIC
Product Code	FLEET INSURANCE	Cover Type	Third Party	Loading
Contact No.(Mobile)	88001377	Contact No.(Office)	0	Contact No.(Home)
Email Address		Special Remark		eCode
KTK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	0	Private Hire
Accident Details				
Report Date	21/11/2018 14:37	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	16/11/2018	Time of Accident hh:mm	19:10	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	211B COMPASSVALE LANE (LOADING BAY)			
Excess				
Own damage Excess	0.00	Additional Excess		Windscreen Excess
Unnamed Driver Excess		Outside Singapore OD Excess		
Third Party Excess	1,500.00	Outside Singapore TP Excess		
Benefits				
GST Registered Information				
GST Registered	No	GST Registration Date		
GST Registration No.		GST Status Verified		No
Modification History				
Policyholder Mailing Address				
Address 1	BLK 531A #04-113	Address 2	UPPER CROSS STREET	Address 3
Address 4	SINGAPORE 051531	Address Type	Singapore address	Post Code
Unit No.	04-113	Related Policy Number	5101580291-01	
OI Driver Info				
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	TAN SEOW PENG (CHEN SHAOF	Driver NRIC	S7411795C	Driver DOB
Register Date of Driver License	16/09/2005	Driver Age	44	Driving Experience
Contact No.(Mobile)	88001377	Contact No.(Office)	0	Contact No.(Home)
Address 1	BLK 41 #	Address 2	SIMS DRIVE	Address 3
Address 4	SINGAPORE 380041	Address Type	Singapore address	Post Code
Unit No.				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Com
Declaration				
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input type="radio"/> No	

Modification History

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	MENG C
Contact No.(Mobile)	92395579	Contact No. (Home)	
Email Address		DI Vehicle Number	GBB6154R
Claim Description	GBB6154R / SDL9796S ON 16 Nov 2018		
Preferred Workshop Finalisation	Yes	Insured Liability	Partially at Fault
	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report
Date Registered		Received	
Report Taken By		Claim Close Date	21/11/2018 14:46
		Workshop Repairer	

Path *

Clear

NO

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NO

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NO

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NO

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Nov 2018 14:45	NRIC/ Driving License	Normal	NRIC/ Driving L
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Nov 2018 14:44	SAS	Normal	SAS 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Nov 2018 14:44	Photos	Normal	Photos
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Nov 2018 14:44	Photos	Normal	Photos ;
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Nov 2018 14:44	Photos	Normal	Photos ;
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Nov 2018 14:42	Photos	Normal	Photos ;
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Nov 2018 14:42	Photos	Normal	Photos ;