

NATIONAL Assessment Centre Services. [wef 1 Jan'05]

Date In: 22/11/18	Job description	Date & Time Completed	Done by
Ref No: NM/INC18021165/13	SAS e-filing		
Veh No: FBK 70715	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 16/11/18 1545	I-Motor Claim Form	MT/1021000	001
(11) TP / Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (KIM KEAT (BBAC) Tel: Fax:)

TP Particulars: Veh No: TRAFFIC LIGHT 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 Complete:	Done by:
(INC hotline: 6788 6616)		
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

Clientant's Particulars:- Driver/Owner: Contact No: Damaged Portion: QC Checked by (Engr-In-Charge): Auditors' Comments:- [Signature] [Signature]	NA1807659		Invoice Preparation Checklist		Am (\$)	Am (\$)
			1) AR: Accident Reporting (\$30);			
			2) DA: Damage Assessment (\$100); INC (\$80)			
			3) TF: 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: Idao DA + SMRT Survey \$160			
			8) NTUC Additional Services:-			
		Q1:				
		*N5: Courtesy Car / Tpt Allowance	\$5			
		*N6: Repair Co-ordination	\$10			
		*N7: Post Repair Inspection	\$25			
		*N8: DV / Collect Excess Coordination	\$5			
		TP (N11): TP (Non INC) against INC	\$20			
		9) N12: Idao Mobile	\$0			
		Invoice dated	Fee Charged			
		Invoice dated	Fee Charged			

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	22/11/2018 16:26
Date Of Accident	10/11/2018 15:45
Exact Location Of Accident	BBDC CIRCUIT CRANK COURSE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBK7071S
Insured/Policyholder	
Name Of Registered Owner	BUKIT BATOK DRIVING CENTRE LTD
Co Reg No	198801155R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64833167

Vehicle Particulars

Manufacturer	HONDA
Model	CB400F
Exact Purpose for which vehicle was being used at time of accident	WARM UP
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	

Vehicle Category	MOTORCYCLE
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Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	0073451220-14
Cover Note Number	

Driver

Name of Driver	MUHAMMAD SIDDIQ BIN JUMARI
NRIC No	S9311657G
Date Of Birth	07/04/1993
Occupation	OUTDOOR
Date Of Driving Pass	25/02/2014
Driving Experience	4 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-99999999
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 296A CHOA CHU KANG AVE 2
	#02-18
Postcode	681296
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	HIT BY FALLEN TREE / OTHER OBJECTS
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)	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

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	
Vehicle Make/Model/Colour	
Details Of Properties	TRAFFIC LIGHT
Vehicle Category	NA/UNKNOWN
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

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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 lodging 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 based 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;
 - (ii) for complying with requirements under any regulations, laws or court orders

BUKIT RATOK DRIVING CENTRE LTD
815 BUKIT RATOK WEST AVENUE 5
SINGAPORE 659085
TEL: 6561 1233 FAX: 6569 0777

Policyholder's Signature
Date & Time:

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

Receiving Centre Personnel's Signature
Name:
WTCIN 60

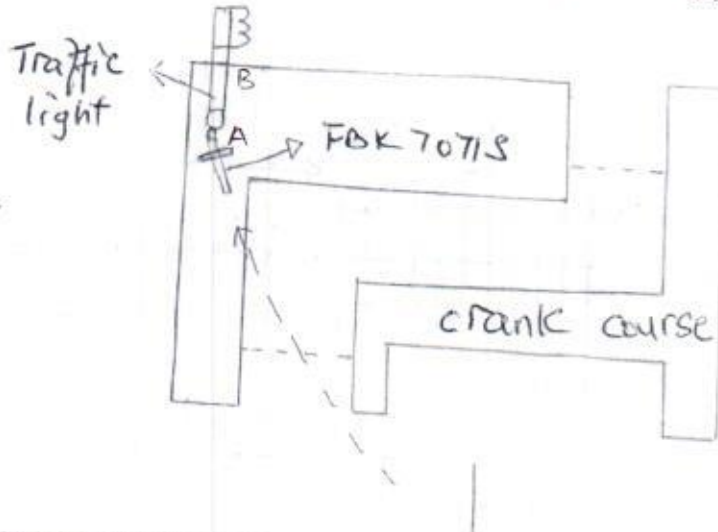
2/11/18

SKETCH PLAN

BADC CIRCUIT

A - FBK70715

B - TRAFFIC LIGHT



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The rider (S93116576) was having his warm-up riding, during the skill up session. He was entering in to the crank course at the speed of about 15km/h. He accidentally turn on the throttle and the bike surge forward and went up the kerb and hit on to the traffic light.

BUKIT BATOK DRIVING CENTRE LTD

815 BUKIT BATOK WEST AVENUE 5

SINGAPORE 659085

TEL: 6561 1233 FAX: 6569 0777

Policyholder's Signature
Date & Time

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

Reporting Centre Personnel's Signature
Name:
NRIC/PIN No:

[Signature] 22/11/18

ACCIDENT STATEMENT

☐ Owner
☐ Driver

Date of Accident

10/11/18

Time

1545 hrs

Location of Accident

BSDC circuit crank course

INSURED/ POLICY HOLDER (VEHICLE A)

Vehicle Registration Number

FBK 7071S

Name of Policyholder

NRIC/ FIN/ Passport/ ROC (if Policyholder is company)

Address

Contact Number

Tel 65443515

Hp

Occupation

VEHICLE PARTICULARS (VEHICLE A)

Vehicle Make / Model

HONDA CB400F

Type of Vehicle

Saboon, MPV, CRV, Van, Lorry, Bus, Motorcycle, Others **BIKE**

Exact Purpose for which vehicle was being used at the time of accident.

Are you claiming under your own insurance policy?

☒ Yes

☐ No

Remarks:

Vehicle category

☐ Private

☐ Commercial

☐ Motorcycle

INSURANCE COMPANY (VEHICLE A)

Name of Insurance Company

NTUC

Type of Policy

☒ Comprehensive

☐ TP Fire & Theft

☐ Third party

Fleet Policy

☒ Yes

☐ No

Policy Number

00734151220

DRIVER

Name of Driver

MUHAMMAD SIDDIQ BIN JUMARI

NRIC/ FIN/ Passport

593116576

Date of Birth

07/04/1993

Occupation

DRIVING INSTRUCTOR

Driving Pass Date

25/2/2014

Gender

☒ Male

☐ Female

Contact Number

Tel:

Hp:

Address

Blk 296A Choa Chu Kang Ave 2 #02-18
S(681296)

Email Address

Was driver an employee of the Insured's Company?

☒ Yes

☐ No

If No, relationship of Driver with the Insured

Vehicle Number of Driver's Own Vehicle (if applicable)

Insurance of Driver's Own Vehicle (if applicable)

GENERAL INFORMATION OF THE ACCIDENT

Type of Collision (E.g. Chain Collision/ Head-On, etc)

Weather Conditions

☒ Clear

☐ Raining

☐ Others

Road Surface

☐ Wet

☒ Dry

☐ Others

Damage Area

Approximate Speed

OTHER INFORMATION

Was there any foreign vehicle(s) involved?

☒ No

☐ Yes

Was anybody injured in the accident? (Including Witness)

☒ No

☐ Yes

Was any other vehicle(s) or property damaged?

☒ No

☐ Yes

Was there any camera video footage (in car)?

☒ No

☐ Yes

DETAILS OF POLICE ACTION

Was the accident reported to the Police?

☒ No

☐ Yes

If Yes, please state which police station & Report No.

Was notice of intended Prosecution given?

☒ No

☐ Yes

If Yes, against whom?

OWN VEHICLE REGISTRATION NUMBER

DETAILS OF OTHER VEHICLES OR PROPERTY DAMAGED

Other Vehicle or Property 1 (VEHICLE B)

Vehicle Registration Number

Vehicle Make/ Model/ Colour

Details of Properties (If Other Party is not a Vehicle)

Damage Area

Name of Driver

NRIC/ FIN/ Passport

Contact Number / Email Address

Address

Name of Insurance Company

Other Vehicle or Property 2

Vehicle Registration Number

Vehicle Make/ Model/ Colour

Details of Properties (If Other Party is not a Vehicle)

Damage Area

Name of Driver

NRIC/ FIN/ Passport

Contact Number / Email Address

Address

Name of Insurance Company

DETAILS OF WITNESS

Name

Phone / Email Address

Address

NRIC/ FIN/ Passport

DETAILS OF INJURED PERSON 1

Name

NRIC/ FIN/ Passport

Address

Approximate Age

Injuries Sustained

If Vehicle Occupants, state in which vehicle?

Were Seat Belts Worn?

Was Injured conveyed to hospital by ambulance?

☐ Yes

☐ No

☐ Yes

☐ No

DETAILS OF INJURED PERSON 2

Name

NRIC/ FIN/ Passport

Address

Approximate Age

Injuries Sustained

If Vehicle Occupants, state in which vehicle?

Were Seat Belts Worn?

Was Injured conveyed to Hospital by Ambulance?

☐ Yes

☐ No

☐ Yes

☐ No

BUKIT BATOK DRIVING CENTRE LTD

815 BUKIT BATOK WEST AVENUE 5

SINGAPORE 659085

TEL: 6561 1233 FAX: 6569 0777

We declare that the particulars & information provided above are true in every aspect.


Signature of Policy Holder
(Company Chop if applicable)

Date & Time

Signature of Driver / Date & Time
(If Driver is not the Policy Holder)

Date & Time

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9311657G



Name
MUHAMMAD SIDDIQ BIN JUMARI

Race
MALAY


Date of birth
07-04-1993

Sex
M

Country of birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S9311657G



Name
MUHAMMAD SIDDIQ BIN JUMARI

Birth Date **07 Apr 1993**

Valid Until **14 Mar 2012**

002051134C

8208153



NRIC No. S9311657G



Date of issue
21-04-2008

Address
**APT BLK 296A CHOA CHU KANG AVENUE 2
#02-18
SINGAPORE 681296**

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

Class	Vehicle Class	Effective Date
Class 2B	MOTORCYCLES NOT EXCEEDING 200 CC	06 Dec 2012
Class 2A	MOTORCYCLES BETWEEN 200 CC AND 400 CC	27 Dec 2010
Class 2	MOTORCYCLES EXCEEDING 400 CC	08 Dec 2012
Class 1	MOTOR CARS AND MOTOR TRACTORS THE WEIGHT OF WHICH EXCEEDS 3500 KG AND NOT EXCEEDING 3500 KG	14 Mar 2012

NRIC No. S9311657G

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 : 0073451220-14

Cover : Comprehensive

1. Index mark and Registration Number of Vehicle

: FBK7071S

Chassis Number

: JH2NC479SEK000474

2. Name of Policyholder

: BUKIT BATOK DRIVING CENTRE LTD

3. Effective Date of Insurance

: 01 Jan 2018

4. Expiry Date of Insurance

: 31 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)	: N/A
EXCESS (SECTION 2)	: N/A
EXCESS (THEFT OUTSIDE SINGAPORE)	: PLEASE REFER OVERLEAF
INSURE WITH COE	: YES
NAMED DRIVER (1)	: N/A
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 : BUKIT BATOK DRIVING CENTRE (00000662435)

Date of Issue : 02 Jan 2018 09:27 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

The owner and vehicle particulars for Vehicle No. FBK7071S as at 28 Dec 2015 are as follows:

1.	Name	: BUKIT BATOK DRIVING CENTRE LTD
2.	Identification No. Type	: Company
3.	Identification No.	: 198801155R
4.	Place Of Passport Issue	: -
5.	Registered Address	: 815 BUKIT BATOK WEST AVENUE 5 SINGAPORE 659085
6.	Mailing Address	: -
7.	Vehicle No.	: FBK7071S
8.	Effective Date of Ownership	: 28 Dec 2015
9.	Original Registration Date	: 28 Dec 2015
10.	First Registration Date	: 28 Dec 2015
11.	Vehicle Type	: P00 - Passenger Motorcycle/Auto-cycle/Moped
12.	Vehicle Scheme	: Normal
13.	Attachment 1	: No Attachment
14.	Attachment 2	: -
15.	Attachment 3	: -
16.	Vehicle Make	: HONDA
17.	Vehicle Model	: CB400F
18.	Year of Manufacture	: 2015
19.	Primary Colour	: White
20.	Secondary Colour	: -
21.	Passenger Capacity	: 1
22.	Chassis/Trailer Chassis No.	: JH2NC4795EK000474 / -
23.	Propellant/Emission Standard	: Petrol / Euro III
24.	Engine No./Motor No.	: NC47E5000469 / -
25.	Engine Capacity(cc)/Power Rating(kW)	: 399 / -
26.	Maximum Power Output(kW/bhp)	: - / -
27.	Unladen Weight(kg)	: 190
28.	Maximum Laden Weight(kg)	: 372
29.	Open Market Value	: \$6,679.00
30.	PARF Eligibility	: No
31.	PARF Eligibility Expiry Date	: -
32.	Minimum PARF Benefit	: \$0.00
33.	IU Label No.	: -
34.	COE No.	: 2015100106000622D
35.	COE Expiry Date	: 27 Dec 2025
36.	COE Category	: D - Motorcycle
37.	Quota Premium/Prevailing Quota Premium	: \$6,158.00
38.	Actual Quota Premium/PQP Paid	: \$6,158.00
39.	Actual ARF Paid	: \$1,002.00
40.	CO2 Emission(g/km)	: -
41.	Actual CEVS Rebate Utilised	: -
42.	CEVS Surcharge Paid	: -
43.	Actual Green Vehicle Rebate Utilised	: -
44.	Vehicle Lifespan Expiry Date	: -
45.	Road Tax Amount	: \$71.00
46.	Road Tax Start Date	: 28 Dec 2015
47.	Road Tax End Date	: 27 Dec 2016
48.	Remarks	: To renew the COE, the Prevailing Quota Premium payable is that of Category D

Claim Handling

Accident MT/1021000

Policy No.	0073451220-14	Vehicle No.	FBK7071S	GST Registration No.
Certificate No.				
Policyholder Name	BUKIT BATOK DRIVING CENTRE LTD			Policyholder NRIC
Product Code	FLEET INSURANCE	Cover Type	Comprehensive	Loading
Contact No.(Mobile)	0	Contact No.(Office)	64833167	Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	0	Private Hire

Accident Details

Report Date	22/11/2018 17:09	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	16/11/2018	Time of Accident hh:mm	15:45	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	BBDC CIRCUIT CRANK COURSE			

Excess

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

Benefits

GST Registered Information

GST Registered	Yes	GST Registration Date	01/04/19
GST Registration No.	M200805321	GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	815 BUKIT BATOK WEST AVENUE	Address 2	BUKIT BATOK DRIVING CENTRE	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5072565215-03	

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	MUHAMMAD SIDDIQ BIN JUMAR	Driver NRIC	S9311657G	Driver DOB
Register Date of Driver License	25/02/2014	Driver Age	25	Driving Experience
Contact No.(Mobile)	0	Contact No.(Office)	0	Contact No.(Home)
Address 1	BLK 296A	Address 2	CHOA CHU KANG AVENUE 2	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	#02-18			
Does he own a Singapore Registered car?	<input checked="" 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 checked="" type="radio"/> No
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Modification History

Claim 001 OD-MD

New

Claim Type *

Contact No.(Mobile)

Email Address

Claim Description

Preferred Workshop

Workshop Finalisation

Date Registered

Report Taken By

Print AK letter

OD-MD	Insured Name	BUKIT I
	Contact No. (Home)	
RACHEL@BBDC.SG	OI Vehicle Number	FBK707

FBK7071S / TRAFFIC LIGHT ON 16 Nov 2018

Insured Liability	Fully at Fault	GIA report	Received
Preferred Repair Option	Preferred Workshop (refer below)		

22/11/2018 17:21	Claim Close Date	
ROSLINDA	Workshop Repairer	

[Save](#) [Submit](#)

Attachment

Accident No. MT/1021000 Claim No. 001
Last Doc. Received ☒ Yes ☐ No Upload Date 22/11/2018 00:00

Path *	Category *	Confidential
Choose File No file chosen	Clear Please Select	NO
Choose File No file chosen	Clear Please Select	NO
Choose File No file chosen	Clear Please Select	NO
Choose File No file chosen	Clear Please Select	NO
Choose File No file chosen	Clear Please Select	NO
Choose File No file chosen	Clear Please Select	NO
Message Read	Clear Please Select	NO

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Des
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Nov 2018 17:21	NRIC/ Driving License	Normal	NRIC/ Driving L
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Nov 2018 17:21	SAS	Normal	SAS 2(
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Nov 2018 17:21	Photos	Normal	Photos ;
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Nov 2018 17:21	Photos	Normal	Photos ;
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Nov 2018 17:21	Photos	Normal	Photos ;
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Nov 2018 17:21	Photos	Normal	Photos ;
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Nov 2018 17:21	Photos	Normal	Photos ;

Video List

Uploaded By/Date	Folder Date	File Name
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[Display in New Window](#)[Scan and uploading](#)