NATIONAL Assessment Centre Services (wef 1 Jan'05) MNAC 16/1 08.

Date In: 14/12/18 - 09:49	Job description	Date & Time Completed	Done by
Ref No: NA/INC 8022485/18	SAS e-filing		
Veh No: SJ2702K	E-mail (within 8hrs, AIC 2hrs)		
D.O.A : 13/12/18 - 15:30	i-Motor Claim Form	M7/02303-001	14/12/18 10:56
(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: SL2911ZJ 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:- (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

NA1808287.

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

1st 1:

1st 2 / 3:

Invoice Preparation Checklist		Amt ($) 1st Bill	Amt ($) Add Bill
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 : Idac DA + SMRT Survey	$160		
8) NTUC Additional Services:-			
OD*			
*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: Idac Mobile	30		
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 witholding 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	14/12/2018 09:49
Date Of Accident	13/12/2018 18:30
Exact Location Of Accident	MCE (KPE) BEFORE FORT RD EXIT
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJZ7024E
Insured/Policyholder	
Name Of Registered Owner	LOW JAAN MENG
NRIC No	S9034302E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96250360
Alternative Phone No	OFFICE-96250360
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	C180K
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	5099538043
Cover Note Number	
Driver	
Name of Driver	LOW JAAN MENG
NRIC No	S9034302E
Date Of Birth	27/09/1990
Occupation	INDOOR
Date Of Driving Pass	16/11/2011
Driving Experience	7 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96250360
Fax Number	
Contact Number	OFFICE-96250360
EMail Address	NOEMAIL

Address	BLK 10 ANG MO KIO CENTRAL #06-15
Postcode	567745
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	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?	
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: : - 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

ON STATED DATE AND TIME, I WAS TRAVELLING ALONG THE STATED VENUE. SUDDENLY VEHICLE B JAMMED BRAKE. I COULDN'T BRAKE MY VEHICLE IN TIME AND HIT ONTO VEHICLE B REAR PORTION.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLZ9117J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	GOH CHERN HOE
NRIC/Passport Number	S8601864J
Contact Number	93207123
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)	1

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.

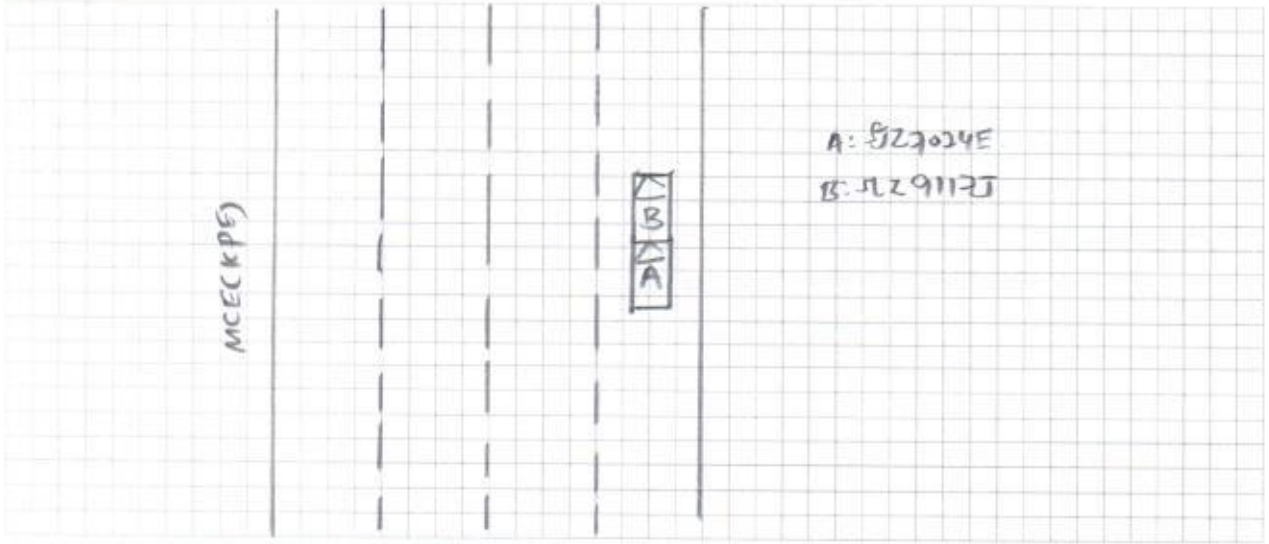
   (e) the information so collected under (d) above may be shared / disclosed:

   (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: 14/11/18. 11AM	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Statement.

DECLARATION

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

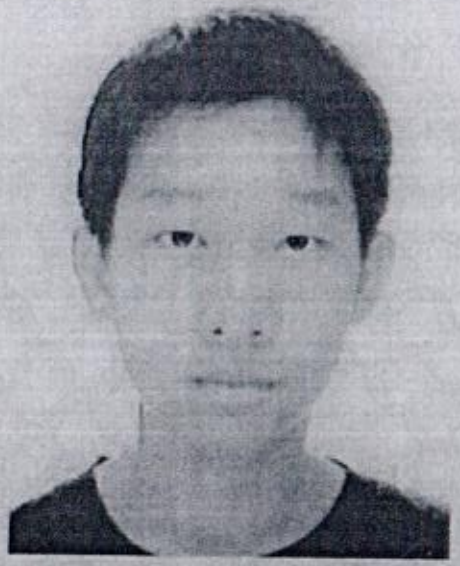
Policyholder's Signature
Date & Time: 14/11/18 11pm

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

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

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9034302E



Name

LOW JAAN MENG

刘 展 銘

Race

CHINESE

Date of birth

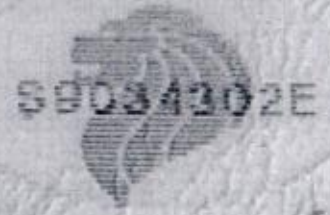
27-09-1990

Sex

M

Country of birth

SINGAPORE



3781951

NRIC No. S9034302E

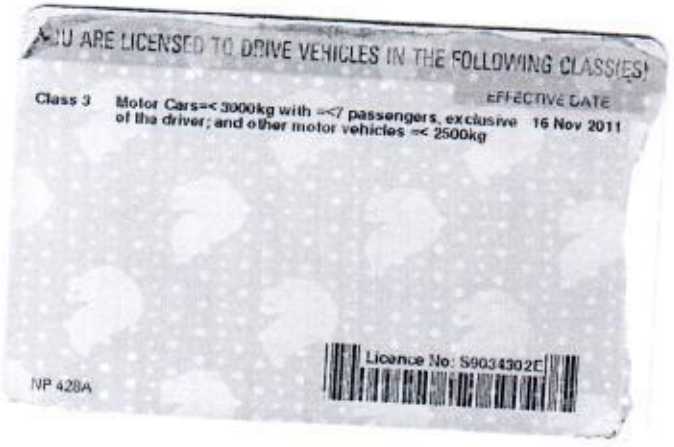
Date of issue

15-10-2005

BLK 10 ANG MO KIO CENTRAL 3 #06-15
SINGAPORE 567745

NRIC No: S9034302E Date: 22-03-2006 No: 5303997


REPUBLIC OF SINGAPORE DRIVING LICENCE
Licence Number S9034302E
Name
LOW JAAN MENG
Birth Date 27 Sep 1990
Issue Date 16 Nov 2011
002018227K


YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)
EFFECTIVE DATE
Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 16 Nov 2011
Licence No: S9034302E
NP 428A

eBaoTech GeneralClaim

Hello, NAC_PAYA_UBI_800601

Change Language | Change Password | Log Out

My Desktop

Notice of Loss

Policy Query

Policy No.

Date of Accident 13/12/2018 18:30

Vehicle No.(For Motor) SJZ7024E

Certificate Number

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
○	5099538043		LOW JAAN MENG	S9034302E	GPC	drivo CLASSIC	SJZ7024E	SJZ7024E	04/04/2018	20/06/2019

Continue

Policy Information

Policy No.	5099538043	Policyholder Name	LOW JAAN MENG	Policyholder NRIC	S9034302E
Certificate No.					
Address	10 ANG MO KIO CENTRAL 3 #06-15 GRANDEUR 8 SINGAPORE 567745				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	04/04/2018	Effective Date	04/04/2018 00:00	Expiry Date	20/06/2019 23:59
Excess Type		All Claims Excess			
Third Party Excess	0	Own damage Excess	600	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	600	Outside Singapore TP Excess	0		Young/Inexperience Driver Excess
Agent	TAN SIEW CHENG	Agent Tel.	67560185	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

Policyholder Mailing Address

Address 1	10 ANG MO KIO CENTRAL 3	Address 2	#06-15 GRANDEUR 8	Address 3	SINGAPORE 567745
Address 4		Address Type	Singapore address	Post Code	567745
Unit No.		Related Policy Number	5099538043		

Insured Object: SJZ7024E

Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
1	04/04/2018 00:00	Basic Information Endorsement	Endorsement Take Effective	To do coa on renewal - see upload file.
2	13/12/2018 00:00	POI Extension/Shorten	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that the Period of Insurance of this policy is amended as follows: PERIOD OF INSURANCE: 04 Apr 2018 TO 20 Jun 2019 In view of this amendment, an additional premium of $403.83 (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, credit card or NETS.

Continue Cancel

Claim Handling · Exit

Accident MT/1023803

Policy No	5099538043	Vehicle No	SJZ7024E	GST Registration No.	
Certificate No					
Policyholder Name	LOW JAAN MENG			Policyholder NRIC	S9034302E
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	96250360	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	
KFK	(•) No ( ) Yes	TCA	(•) No ( ) Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

Accident Details

Report Date	14/12/2018 10:53	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	13/12/2018	Time of Accident hh:mm	18:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	MCE (KPE) BEFORE PORT RD EXIT				

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	10 ANG MO KIO CENTRAL 3	Address 2	#06-15 GRANDEUR 8	Address 3	SINGAPORE 567745
Address 4		Address Type	Singapore address	Post Code	567745
Unit No.		Related Policy Number	5099538043		

OI Driver Info

Driver Name	LOW JAAN MENG	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S9034302E	Driver DOB	27/09/1990
Register Date of Driver License	16/11/2011	Driver Age	28	Driving Experience	7
Contact No.(Mobile)	96250360	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	10 ANG MO KIO CENTRAL 3	Address 2	GRANDEUR 8	Address 3	SINGAPORE 567745
Address 4		Address Type	Singapore address	Post Code	567745
Unit No.	06-15				
Does he own a Singapore Registered car?	( ) Yes (•) No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any Injury?	( ) Yes (•) No

Modification History

Claim 001 OD-MD New

Claim Type *	OD-MD	Insured Name	LOW JAAN MENG	Insured NRIC	S9034302E
Contact No.(Mobile)	96250360	Contact No.(Home)	67560185	Contact No.(Office)	62051361
Email Address	Joshua.lowjm@gmail.com	OI Vehicle Number	SJZ7024E	TP Vehicle Number	SLZ9117J
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select		
Claimant Name *	>>	Claimant NRIC *			
Claimant Address					
Claim Description	SJZ7024E / SLZ9117J ON 13 Dec 2018			Name of Preferred Workshop	PRECISE AUTO SERVICE
Preferred Workshop Contact No.	67457367	Insured Liability *	Fully at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop (refer below)	GIA report	Received
Date Registered	14/12/2018 10:56	Claim Close Date		Date Received	14/12/2018 10:56
Report Taken By	Jackson	Workshop Repairer		Total Loss but Repaired	
[x] Print AK letter				OD Excess Collected by Workshop	

Save Submit

Attachment

Accident No.	MT/1023803	Claim No.	001
Last Doc. Received	(•) Yes ( ) No	Upload Date	14/12/2018 11:16

Path *			Category *	Confidential	Urgency *	Description *
	Browse...	Clear	Please Select	NO	Normal	
	Browse...	Clear	Please Select	NO	Normal	
	Browse...	Clear	Please Select	NO	Normal	
	Browse...	Clear	Please Select	NO	Normal	

Browse... Clear Please Select NO Normal

Browse... Clear Please Select NO Normal

Send Message Upload

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	Action
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:16	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:16	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:16	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:16	SAS	Normal	SAS 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:16	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:16	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:16	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:16	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:16	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:16	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:16	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:16	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:16	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:15	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:15	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:15	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:15	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:15	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:15	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:15	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:15	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:15	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:15	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 11:15	Photos	Normal	Photos 2018-12-14		Edit
	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVICES) on 14 Dec 2018 10:56	Photos	Normal	Photos 2018-12-14		Edit

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action

Display in New Window Scan and uploading

ASSIGNMENT (REAR)

By Client - Nature of Accident:

1) Vehicle hit Vehicle:

a) Motorcar ( )
b) Motorcycle ( )
c) Bicycle ( )

2) Vehicle hit ??

a) Pedestrian ( )
b) Animal ( )

3) Vehicle hit Road Side Object:

a) Govm Property ( )
(e.g. Guardrail, Pole, Tree, etc)
b) Road Work Object ( )
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:

Veh No: SJZ 7024 E Insp Date: 21 Dec 2018

Type: (M.Car) / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / Trailer / Truck / Trailer or

Make/Model: Merc C180K CC: 1597

Colour: Black Transmission Type: (Auto) / Manual

Eng/No: Reading: 123392

C/No: WDD204 0452 A945458

Gen Cond: Good / (Fair) / Poor / Burnt or

Steering: (Inorder) / Jammed / Leaked / Burnt or

Brake: (Inorder) / Jammed / Leaked / Burnt or

Mod: (Nil) / S/Rim / STD A/Rim or

Tyre Size: F: 225/45 R17

R: 225/45R17

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or Firelli

Front			Rear		
R/Bal	6	mm	R/Bal	6	mm
L/Bal	6	mm	L/Bal	6	mm

Parallel Import: Yes / (No) Towed-In: Yes / (No)

Repair Type: (LS) / LBJ Towing Required: (Yes) / No

No of Repair Days: 8 Vehicle in H.K: (Yes) / No

D.O.I: 14/12/2018 Time: 2.05 pm

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 Govm 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 Called: Time Completed:

1) Glass

2) ABS

3) Entire Operation Completed Time

(1)Rust (2)Dented (3)Scratched (4)Crack (5)Scratched (6)Deformed
(7)Shifted (8)Cracked (9)Broken (10)Necessary (11)Missing (12)Torn
(13)Unconfirmed (14)No Working

MOTOR CAR (Frt)

(1)Replace (2) (3)Repair (4) (5)Paint (6)Other Corrected (7)

Aug 2005

Front Portion

Vehicle No. SJZ7024E

NAC	INC	Item	CON	AC	Qty
1001	991886	Frt Number Plate	BR	✓	
1002	991887	Frt Number Plate Base	BR	✓	
1003	991889	Frt Number Plate Garnish	DIS	/	
1004	991300	Frt Bumper	BR	✓	
1005	992341	Frt Bumper Clips	NEC	✓	
1006	991325	Frt Bumper Bracket			
1007	991462	Frt Bumper Side Retainer	DIS	/	2
1008	991433	Frt Bumper Reinforcement Aluminium	BT	✓	
1009	991318	Frt Bumper ~~Beam~~ bracket center	DD	✓	
1010	991463	Frt Bumper Sponge	BR	✓	
1011	991427	Frt Bumper ~~Protector~~ lower chrome moulding	NEC	✓	2 L RR
1012	991420	Frt Bumper ~~Pad~~ Fog eye cover	MIS	✓	
1013	991363	Frt Bumper Grille lower	CRA	✓	
1014	991301	Frt Bumper Moulding			
1015	991407	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	CRM	✓	
1019	995079	Frt LH Bumper Fog Lamp		?	
1020	995080	Frt RH Bumper Fog Lamp	CRA	/	
1021	991793	Frt Grille	BR	✓	
1022	991328	Frt Grille Emblem	BR	✓	
1023	991799	Frt Grille Chrome Moulding	CRA	✓	5
1024	991222	Frt Apron Panel			
1025	992013	Frt Support Panel	BT	/	
1026	992025	Frt Support Panel Top Garnish Cover	CRA	/	
1027	992416	Horn			
1028	991277	Frt Brace Panel		?	
1029	995153	Frt LH Headlamp Assy	CRA	/	
1030	991821	Frt RH Headlamp Assy	CRA	✓	
1031	995088	Frt LH Side Lamp			
1032	995089	Frt RH Side Lamp			
1033	990248	Bonnet			
1034	991328	Bonnet Emblem	BT	✓	
1035	990287	Bonnet Lock	NEC	✓	
1036	990285	Bonnet Insulator		?	2
1037	990273	Bonnet Hinge		?	
1038	990261	Bonnet Damper			
1039	990305	Bonnet Rubber			
1040	990252	Bonnet ~~Cable~~ Lock hook	DD	/	
1041	990311	Bonnet Stand	BR	/	2
1042	990119	Air Con Condenser	BT	/	
1043	990122	Air Con Fan Assy			
1044	990134	Air Con Suction Pipe (Low Pressure)	BT	/	
1045	990118	Air Con Suction Hose			
1046	990133	Air Con Discharge Pipe (High Pressure)	DD	/	
1047	990114	Air Con Discharge Hose			
1048	990149	Air Con Liquid Pipe		?	
1049	995066	Air Con Receiver Drier			
1050	990111	Air Con Compressor Assy			
1051	995294	Air Con Belt			
1052	995074	Radiator			
1053	992738	Radiator Cowling	DD	/	
1054	992742	Radiator Fan Assy	CRA	/	
1055	992745	Radiator Fan Clutch	CRA	/	
1056	992758	Radiator Hose Top		?	
1057	992757	Radiator Hose Bottom	BT	/	
1058	992741	Radiator Expansion Tank		?	
1059	990131	Air Duct			
1060	990070	Air Cleaner Assy	CUT	/	
1061	990056	Air Cleaner Hose			
1062	990069	Air Cleaner Resonator			
1063	991712	Frt Exhaust Manifold			
1064	991711	Frt Exhaust Manifold Cover			
1065	991054	Frt Exhaust Manifold Sensor (Oxygen)			
1066	991714	Front Exhaust Pipe			
1067	990139	Battery			
1068	990134	Battery Cover			

NAC	INC	Item	CON	AC	Qty
1071	992205	Fuse Box			
1072	994011	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	991005	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	SCR	R	
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	BT	✓	
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	992092	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	Dashboard Assy			
1125	992282	Glove Box Cover			
1126	992281	Glove Box Compartment			
1127	994483	Steering Wheel Airbag			
1128	994485	Steering Wheel Airbag Sensor			
1129	990749	Dashboard Airbag			
1130	990750	Dashboard Airbag Sensor			
1131	990029	Airbag Control Unit			
1132	990864	Frt Driver Seat			
1133	991922	Frt RH Seat Belt Assy			
1134	991899	Frt Passenger Seat			
1135	995182	Frt LH Seat Belt Assy			
1136	990247	Shelter			

Intercooler DD ✓

" deflector TN ✓

Claim Handling

- Task Transfer - Exit

LOS SAL SUB

Accident MT/1023803

Policy No.	5099538043	Vehicle No.	SJZ7024E	GST Registration No.	
Certificate No.					
Policyholder Name	LOW JAAN MENG			Policyholder NRIC	S9034302E
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	96250360	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	
KFK	◉ No ○ Yes	TCA	◉ No ○ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

Accident Details

Report Date	14/12/2018 10:53	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	13/12/2018	Time of Accident hh:mm	18:30	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	ICM No.	
Accident Location	MCE (KPE) BEFORE FORT RD EXIT				

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	10 ANG MO KIO CENTRAL 3	Address 2	#08-15 GRANDEUR 8	Address 3	SINGAPORE 567745
Address 4		Address Type	Singapore address	Post Code	567745
Unit No.		Related Policy Number	5099538043		

OI Driver Info

Driver Name	LOW JAAN MENG	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S9034302E	Driver DOB	27/09/1990
Register Date of Driver License	16/11/2011	Driver Age	28	Driving Experience	7
Contact No.(Mobile)	96250360	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	10 ANG MO KIO CENTRAL 3	Address 2	GRANDEUR 8	Address 3	SINGAPORE 567745
Address 4		Address Type	Singapore address	Post Code	567745
Unit No.	06-15				
Does he own a Singapore Registered car?	○ Yes ◉ No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	○ Yes ◉ No

Modification History

Investigation

Claim 001 OD-MD

Claim Case Officer Zuraimee Bin Mantau

LOS SAL SUB

Claim Type	OD-MD	Insured Name	LOW JAAN MENG	Insured NRIC	S9034302E
Contact No.(Mobile)	96250360	Contact No.(Home)	67560185	Contact No.(Office)	63051361
Email Address	Joshua.lowjm@gmail.com	OI Vehicle Number	SJZ7024E	TP Vehicle Number	SLZ9117J
Claimant Type		Type of Benefit			
Claimant Name		Claimant NRIC			
Claimant Address					
Claim Description	SJZ7024E / SLZ9117J ON 13 Dec 2018			Name of Preferred Workshop	PRECISE AUTO SERVICE
Preferred Workshop Contact No.	67457367	Insured Liability	Fully at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop (refer below)	GIA report	Received
Date Registered	14/12/2018 11:17	Claim Close Date		Date Received	14/12/2018 10:56
Report Taken By	Jackson	Workshop Repairer		Total Loss but Repaired	
☑ Print AK letter				OD Excess Collected by Workshop	

Modification History

Special Claim Creation Approval

Approval	Reason

Remarks

damage assessment | Attachment

Vehicle Info

Vehicle Make	MERCEDES BENZ	Vehicle Model	C180 KOMPRESSOR	Engine Capcity	
Date of Registration	21/12/2008	Classis No.	WDD2040452A454578		
Towing Required *	◉ Yes ○ No	Vehicle in 3DAC *	◉ Yes ○ No	Parallel Import *	○ Yes ◉ No

Type of Tender *	Own Damage	Assessor Name *	SIMON	Survey Current Status	
IDAC/Workshop Name	NATIONAL ASSESSMENT CENTR	IDAC/Workshop Location	51 UBI AVENUE 1 #01-25 PAYA		
Windscreen Parts & Labour Cost		Total Loss *	○ Yes ◉ No		
Market Value($)		Scrape Value($)		Economical Repair Value($)	

Remark: REMARK:NO OF REPAIR DAY:8 DAYS. 2 X FRT BUMPER LOWER CHROME MOULDING - REPLACE. 1 X FRT BUMPER TOW EYE COVER - REPLACE. 5 X FRT GRILLE CHROME MOULDING - REPLACE. 1 X FRT SUPPORT TOP GARNISH COVER - REPLACE. 2 X BONNET LOCK HOOK - REPLACE. 1 X AIR CON SUCTION PIPE (LOW PRESSURE) - REPLACE. 1 X AIR CON DISCHARGE PIPE (HIGH PRESSURE) - REPLACE. 1 X AIR CON LIQUID PIPE - UNCONFIRM. 1 X AIR DUCT - REPLACE. 1 X INTERCOOLER - REPLACE. 1 X INTERCOOLER DEFLECTOR - REPLACE. 1 X POWER STEERING OIL COOLER - UNCONFIRM.

Remark for Supplementary

Damage Listing

Find a Part

roof
Not Applicable
ABS
ABSORBER
ACCELERATOR
ACTUATOR
ADVERTISEMENT STICKER
AIR BAG
AIR BLOWER
AIR BOX
AIR CHAMBER BOX
AIR CLEANER
AIR COMPRESSOR
AIR CON
AIR CON (VAN)
AIR COOLER
AIR DISTRIBUTOR
AIR FILTER
AIR FLOW
AIR GRILLE
AIR HORN
AIR INTAKE
AIR RESONATOR BOX
AIR THROTTLE BODY AND SENSOR
ALARM
ALTERNATOR
ALUMINIUM PANEL - SIDE
AMPLIFIER
ANTENNA
ANTI ROLL
APRON
ARCH
ARM REST
ASH TRAY
AUTO CLUTCH
AUTO COOLER PIPE
AUTO CRUISE MOTOR
AUTO TRANSMISSION
AXLE
BACK REST (M/C)
BACK SEAT
BALANCER
BATTERY
BEADING (M/C)
BELT COVER (M/C)
BELT TENSIONER
BODY
BODY (M/C)
BOLT CAP (M/C)
BOLT HEAD COVER (M/C)
BONNET
BOOT
BOX (M/C)
BOX BRACKET (M/C)
BOX CARRIER (M/C)
BOX DOOR
BOX STICKER (M/C)
BRACE PANEL
BRAKE

No.	Part No.	Description	Qty *	Repair Code *	
1	32200101	NUMBER PLATE (FRONT)	1	Replace	x
2	32200201	NUMBER PLATE BASE (FRONT)	1	Replace	x
3	32200501	NUMBER PLATE GARNISH (FRONT)	1	Replace	x
4	16000101	BUMPER (FRONT)	1	Replace	x
5	16002401	BUMPER CLIPS (FRONT)	1	Replace	x
6	16005101	BUMPER RETAINER (FRONT LEFT)	1	Replace	x
7	16005102	BUMPER RETAINER (FRONT RIGHT)	1	Replace	x
8	16005001	BUMPER REINFORCEMENT (FRONT)	1	Replace	x
9	16001301	BUMPER BRACKET (FRONT LEFT)	1	Replace	x
10	16005901	BUMPER SPONGE (FRONT)	1	Replace	x
11	16003201	BUMPER GRILLE (FRONT)	1	Replace	x
12	16005501	BUMPER SENSOR (FRONT)	1	Unconfirm	x
13	16002901	BUMPER FOG LAMP COVER (FRONT LEFT)	1	Unconfirm	x
14	16002902	BUMPER FOG LAMP COVER (FRONT RIGHT)	1	Replace	x
15	16002701	BUMPER FOG LAMP (FRONT LEFT)	1	Unconfirm	x
16	16002702	BUMPER FOG LAMP (FRONT RIGHT)	1	Replace	x
17	27100101	GRILLE (FRONT)	1	Replace	x
18	27100801	GRILLE EMBLEM (FRONT)	1	Replace	x
19	41300101	SUPPORT PANEL (FRONT)	1	Replace	x
20	19600101	BRACE PANEL (FRONT)	1	Unconfirm	x
21	27700101	HEAD LAMP (LEFT)	1	Replace	x
22	27700102	HEAD LAMP (RIGHT)	1	Replace	x
23	149001	BONNET	1	Replace	x
24	149016	BONNET EMBLEM	1	Replace	x
25	14903401	BONNET LOCK (LOWER)	2	Unconfirm	x
26	149029	BONNET INSULATOR	1	Unconfirm	x
27	149041	BONNET RUBBER (CENTRE)	1	Replace	x
28	112023	AIR CON CONDENSER	1	Replace	x
29	344001	RADIATOR	1	Replace	x
30	344005	RADIATOR COWLING	1	Replace	x
31	344008	RADIATOR FAN	1	Replace	x
32	344011	RADIATOR FAN CLUTCH	1	Unconfirm	x
33	34402802	RADIATOR HOSE (TOP)	1	Replace	x
34	34402801	RADIATOR HOSE (BOTTOM)	1	Unconfirm	x
35	243014	ENGINE LOWER COVER	1	Unconfirm	x
36	25400102	FENDER (FRONT LEFT)	1	Repair	x
37	25400901	FENDER INNER SHIELD (FRONT LEFT)	1	Unconfirm	x
38	25400103	FENDER (FRONT RIGHT)	1	Replace	x
39	25400902	FENDER INNER SHIELD (FRONT RIGHT)	1	Unconfirm	x

Save Submit

LKK Paya Ubi

From: Zuraimee Bin Mantau <zuraimee.mantau@income.com.sg>
Sent: Monday, 17 December 2018 4:49 PM
To: Lee Seng Auto Pte Ltd
Cc: LKK Paya Ubi
Subject: Vehicle SJZ7024E, OD Claim No: MT/1023803-001, DOA: 13/12/2018

Dear Lee Sheng Auto

Excess $600 applies.

Vehicle is currently at NAC Paya Ubi.

Please arrange to tow away the vehicle and call Mr Low at 96250360 once vehicle is in the workshop.

Strictly no further supplementary is allowed. **Survey before repair** is required.

Please forward the invoice and DV within 7 working days to us once repairs has been done and survey conducted. Update the 'Repair Status' when repairs are done.

xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx

Our Ref: MT/CA/OD/051/1023803-001/ZBM
17 Dec 2018
LEE SHENG AUTO PTE. LTD.
1 KAKI BUKIT AVENUE 6
BLK C #01-58 AUTOBAY @ KAKI BUKIT
SINGAPORE 417883
Dear Sir
CLAIM NUMBER: MT/1023803-001
REPAIR OF VEHICLE NUMBER: SJZ7024E
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 Dec 2018
Make: MERCEDES BENZ
Model: C180 KOMPRESSOR
Estimated Repair Days: 10
Location: NATIONAL ASSESSMENT CENTRE SERVICES
Address: 51 UBI AVENUE 1 #01-25 PAYA UBI INDUSTRIAL PARK SINGAPORE 408933
Benefits Applicable: N/A
Excess Applicable: 600.00
Please note that supplementary items will not be allowed.
If you have any queries, please contact Zuraimee Bin Mantau at 64307891 or email us at motor@income.com.sg.
Yours sincerely
Jenny Pe
Deputy Vice President
Motor Insurance

Thank you

Zuraimee Bin Mantau
Senior Executive
Motor Insurance
T +65 6430 7891
www.income.com.sg

income
made different

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.
Find out more at income.com.sg/careers

in with you

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.

NATIONAL ASSESSMENT CENTRE SERVICES
(LKK GROUP)
51 Ubi Ave 1, #01-25, Paya Ubi Industrial Park,
Singapore 408933, TEL: 6841 0055 FAX: 6841 6315

NATIONAL ASSESSMENT CENTRE

Vehicle Movement Form

Vehicle Check-In

Vehicle No: SJZ7024E Date In: _____ Time In: _____ with Keys: Yes / No

For Office use

Attended by: _____

Workshop Collection of Vehicle

Workshop: Lee Sheng Auto

Collection Date: 18/12/18 Time: _____ with Keys: Yes / ~~No~~

Tow Truck No: YH9472G Tow Man: [illegible] NRIC: 6920930T

Signature: _____

For office use

Attended by: _____ ***Approved by:*** _____

Workshop Return of Vehicle

Workshop: _____

Returned Date: _____ Time: _____ with Key: Yes / No

* Tow In / Drive In
Tow Man / Workshop Representative: _____ NRIC: _____

Signature: _____ ***For office use***

Attended by: _____

Owner Collection of Vehicle

Collection Date: _____ Time: _____ with Key: Yes / No

Owner: _____ NRIC: _____

Signature: _____

For office use

Attended by: _____ ***Approved by:*** _____