

NATIONAL Assessment Centre Services

Date In: 02/01/2019 11:31	Job description	Date & Time Completed	Done by
Ref No: NA/INC19000025/K4	SAS e-filing		
Veh No: YP 7791Z	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 31/12/2018 13:15	i-Motor Claim Form	NT 10261137-001	3/1/19
OD: 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: () Tel: () Fax: ()

TP Particulars: Veh No: Refrigerator. 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

Claimant's Particulars:	Invoice Preparation Checklist	Am't (\$) In Bill	Am't (\$) Add Bill
NA 1900054	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$30)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:	For claiming against INC Only (wef 10 Jan 2005)		
Date 1:	6) TR: Re-inspection \$75		
Date 2/3:	7) NI: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	OD:		
	*N5: Courtesy Car / Tp 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	02/01/2019 11:31
Date Of Accident	31/12/2018 13:15
Exact Location Of Accident	KERBAU ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP7791Z
Insured/Policyholder	
Name Of Registered Owner	SRI AMBIKAS PTE LTD
Co Reg No	200509816W
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96221686
Alternative Phone No	OFFICE-96221686

Vehicle Particulars

Manufacturer	ISUZU
Model	NPR75UH5A
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5087321921-02
Cover Note Number	

Driver

Name of Driver	S KUMARASAMY
NRIC No	S1509076F
Date Of Birth	17/05/1961
Occupation	OUTDOOR
Date Of Driving Pass	04/12/1982
Driving Experience	36 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96221686
Fax Number	
Contact Number	OTHERS-96221686
EMail Address	NOEMAIL

Address	BLK 289 CHOA CHU KANG AVENUE 3 #05-270
Postcode	680289
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	DRIZZLING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
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?	YES
If Yes, Please state which Police Station	
Police Station Name	GEYLANG N.P.C
Police Station Address	ROAD: 132 PAYA LEBAR ROAD , POSTCODE: 409014 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20190102/2020

Attachment(s)

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

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:

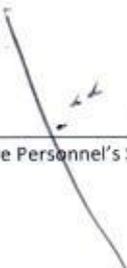
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

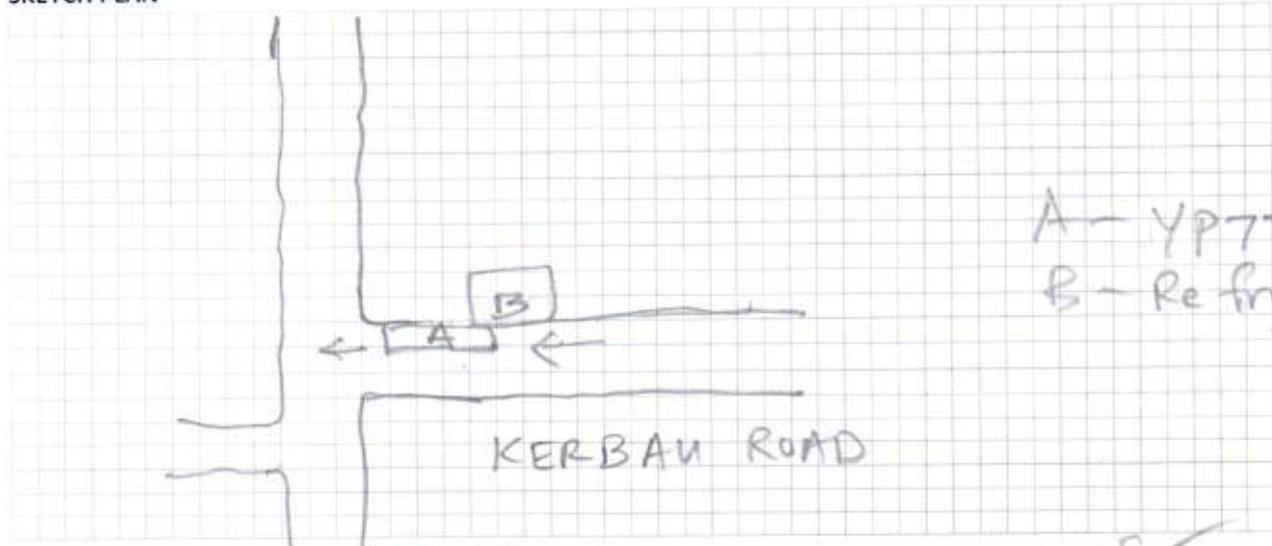


Driver's Signature
(If driver is not the policyholder)
Date & Time:

 2/1/2019

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS Refer to the Police Reports -
T/20190102/2020

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:

2/1/2019

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



SINGAPORE POLICE FORCE



T/20190102/2020

1 of 3

Report No. T/20190102/2020

Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/01/2019 10:33	Vide Report No.:	Station Diary No.: 32
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Informant's Particulars		
Name of Informant: S KUMARASAMY		Address: APT BLK 289 CHOA CHU KANG AVENUE 3 #05-270 SINGAPORE 680289
ID Type / ID No.: NRIC NO / S1509076F	Contact No.:	Mobile: 96221686
Nationality: SINGAPORE CITIZEN	Home/Office:	
Email:		
Sex: Male	Age: 57	Date of Birth: 17/05/1961
Type of Informant: Driver		Institution / School Name:
Race: Indian	Language:	
Occupation: DRIVER	Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident

Type of Accident: Non-Injury	Drink Drive: No	Date/Time of Accident: 31/12/2018 13:15	Type of Location: Straight Road
Location: Along Road 1 KERBAU ROAD			
KERBAU ROAD		Road Surface: Wet	Road Speed Limit:
Weather: Drizzling		Traffic Control: Not Controlled	Traffic Volume: Moderate
Traffic Flow: One Way		Anyone conveyed by ambulance: No	
Type of Collision: REAR TO OBJECT			

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
YP7791Z	Lorry				No Damage	0



**SINGAPORE
POLICE FORCE**



T/20190102/2020

Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

2 of 3

Report No. T/20190102/2020

CONTINUATION OF REPORT

Brief Details.

On 31/12/18 at around 1315hrs, I was at the above location delivering goods. I had already parallel parked my vehicle on the main road on the right side.

My vehicle registration plate number is YP7791Z and I got into my vehicle and was already exiting the lot. As I was exiting the space, the rear right side of my vehicle had knocked onto a refrigerator causing it fall over. I then got out to make a check and I realized that there is a small crack at the bottom of the refrigerator.

I then went over and set the refrigerator upright and I noticed that it is still in working condition. The owner of the refrigerator told me to settle this privately. I am lodging this report for insurance purposes. There is no one injured and no government property damaged as well.



**SINGAPORE
POLICE FORCE**



T/20190102/2020

3 of 3

Report No. T/20190102/2020

Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

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 2 CHANG JUN KAI

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No: 65476151

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
02/01/2019 10:33

Classification Of Case:

Transaction ref 20160128114204026488

The owner and vehicle particulars for Vehicle No. YP7791Z as at 28 Jan 2016 are as follows:

1.	Name	: SRI AMBIKAS PTE LTD
2.	Identification No. Type	: Company
3.	Identification No.	: 200509816W
4.	Place Of Passport Issue	: -
5.	Registered Address	: 24 NEW INDUSTRIAL ROAD #04-01 PEI FU INDUSTRIAL BLDG SINGAPORE 536210
6.	Mailing Address	: -
7.	Vehicle No.	: YP7791Z
8.	Effective Date of Ownership	: 28 Jan 2016
9.	Original Registration Date	: 28 Jan 2016
10.	First Registration Date	: 28 Jan 2016
11.	Vehicle Type	: A50 - Goods (Closed) Van/Van Panel (Delivery)
12.	Vehicle Scheme	: Normal
13.	Attachment 1	: No Attachment
14.	Attachment 2	: -
15.	Attachment 3	: -
16.	Vehicle Make	: ISUZU
17.	Vehicle Model	: NPR75UH5A
18.	Year of Manufacture	: 2015
19.	Primary Colour	: White
20.	Secondary Colour	: -
21.	Passenger Capacity	: 2
22.	Chassis/Trailer Chassis No.	: JAANPR75HF7106864 / -
23.	Propellant/Emission Standard	: Diesel / Euro V
24.	Engine No./Motor No.	: 4HK1444126 / -
25.	Engine Capacity(cc)/Power Rating(kW)	: 5193 / -
26.	Maximum Power Output(kW/bhp)	: - / -
27.	Unladen Weight(kg)	: 2500
28.	Maximum Laden Weight(kg)	: 7900
29.	Open Market Value	: \$32,495.00
30.	PARF Eligibility	: No
31.	PARF Eligibility Expiry Date	: -
32.	Minimum PARF Benefit	: \$0.00
33.	IU Label No.	: -
34.	COE No.	: 2016012805001357R
35.	COE Expiry Date	: 27 Jan 2026
36.	COE Category	: -
37.	Quota Premium/Prevailing Quota Premium	: \$45,166.00
38.	Actual Quota Premium/PQP Paid	: \$4,517.00
39.	Actual ARF Paid	: \$1,625.00
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	: 27 Jan 2036
45.	Road Tax Amount	: \$362.00
46.	Road Tax Start Date	: 28 Jan 2016
47.	Road Tax End Date	: 27 Jul 2016
48.	Remarks	: -

REPUBLIC OF SINGAPORE
 IDENTITY CARD NO. S1509076F



Name
S KUMARASAMY

சி குமாரசாமி
 Race
INDIAN

Date of birth
17-05-1961 Sex
M

Country of birth
SINGAPORE





REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1509076F**
 Name
S KUMARASAMY

Birth Date: **17 May 1961**
 Issue Date: **29 Oct 2003**




4444091



NPIC No. **S1509076F**



Date of Issue
11-08-2009

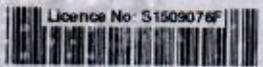
Address
**APT BLK 289 CHOA CHU KANG AVENUE 3
 #05-270
 SINGAPORE 680289**

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

		PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	17 May 1983
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	04 Dec 1982
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	15 Jul 1983
Class 5	Motor Vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7250 kilograms	14 Aug 1964

NP 428A

Licence No: S1509076F



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 : 5087321921-02 Cover : Comprehensive

- | | |
|---|-----------------------|
| 1. Index mark and Registration Number of Vehicle | : YP7791Z |
| Chassis Number | : JAANPR75HF7106864 |
| 2. Name of Policyholder | : SRI AMBIKAS PTE LTD |
| 3. Effective Date of Insurance | : 13 Oct 2018 |
| 4. Expiry Date of Insurance | : 12 Oct 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 business or profession.
(b) Use for the carriage of passengers or goods in connection with the Policyholder's business.

This Policy does not cover

- (a) Use for hire or reward.
(b) Use for racing, pace-making, reliability trial or speed-testing.
(c) 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)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: DAIMLER FINANCIAL SERVICES AFRICA & ASIA PACIFIC LTD
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 : JUN SHI INSURANCE AGENCY (00000572596)
Date of Issue : 11 Sep 2018 07:09 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.	<input type="text"/>	Date of Accident	<input type="text" value="31/12/2018 13:15"/>
Vehicle No.(For Motor)	<input type="text" value="YP7791Z"/>	Certificate Number	<input type="text"/>

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5087321921-02		SRI AMBIKAS PTE LTD	200509816W	GFT	Comprehensive	YP7791Z	YP7791Z	13/10/2018	

Continue

▼ **Policy Information**

Policy No.	5087321921-02	Policyholder Name	SRI AMBIKAS PTE LTD	Policyholder NRIC	200509816W
Certificate No.					
Address	24 NEW INDUSTRIAL ROAD #04-01 PEI FU INDUSTRIAL BUILDING SINGAPORE 536210				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	11/09/2018	Effective Date	13/10/2018 00:00	Expiry Date	12/10/2019 23:59
Third Party Excess	0.00	Own damage Excess	600.00	Windscreen Excess	100.00
Additional Excess		OS Premium	0		
Outside Singapore OD Excess		Outside Singapore TP Excess			
Agent	JUN SHI INSURANCE AGENCY	Agent Tel.	65320118	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ **Policyholder Mailing Address**

Address 1	24 NEW INDUSTRIAL ROAD	Address 2	#04-01 PEI FU INDUSTRIAL BUI	Address 3	SINGAPORE 536210
Address 4		Address Type	Singapore address	Post Code	536210
Unit No.		Related Policy Number	5087118942-02		

▶ **Insured Object: YP7791Z**

▼ **Endorsements**

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
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Claim Handling

Accident MT/1026137

Policy No.	5087321921-02	Vehicle No.	YP7791Z	GST Registration No.
Certificate No.				
Policyholder Name	SRI AMBIKAS PTE LTD			Policyholder NRIC
Product Code	FLEET INSURANCE	Cover Type	Comprehensive	Loading
Contact No.(Mobile)	96221686	Contact No.(Office)	0	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	03/01/2019 10:55	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	31/12/2018	Time of Accident hh:mm	13:15	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	KERBAU ROAD			

▼ **Excess**

Own damage Excess	600.00	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	No	GST Registration Date	
GST Registration No.		GST Status Verified	No
Modification History			

▼ **Policyholder Mailing Address**

Address 1	24 NEW INDUSTRIAL ROAD	Address 2	#04-01 PEI FU INDUSTRIAL BUI	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5087118942-02	

▼ **OI Driver Info**

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB
Unnamed driver Name	S KUMARASAMY	Driver NRIC	S1509076F	Driving Experience
Register Date of Driver License	04/12/1982	Driver Age	57	Contact No.(Home)
Contact No.(Mobile)	96221686	Contact No.(Office)	0	Address 3
Address 1	BLK 289 #	Address 2	CHOA CHU KANG AVENUE 3	Post Code
Address 4		Address Type	Singapore address	
Unit No.				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" 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

Modification History

Claim 001 OD-MX **New**

Claim Type *	OD-MX	Insured Name	SRI AM
Contact No.(Mobile)	91985274	Contact No.(Home)	
Email Address		OI Vehicle Number	YP7791
Claim Description	YP7791Z / REFRIGERATOR ON 31 Dec 2018		
Preferred Workshop	Yes	Insured Liability	Partially at Fault
Workshop No. Finalisation	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report
Date Registered	03/01/2019 11:03	Received	Claim Close Date
Report Taken By			Workshop Repairer

Print AK letter

Save Submit

Attachment

Accident No. MT/1026137 Claim No. 001
 Last Doc. Received Yes No Upload Date 03/01/2019 11:05

Choose File	No file chosen	Clear	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				

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Jan 2019 11:03	NRIC/ Driving License	Normal	NRIC/ Driving
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Jan 2019 11:02	SAS	Normal	SAS
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Jan 2019 11:01	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Jan 2019 11:01	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Jan 2019 11:01	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Jan 2019 11:01	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Jan 2019 11:01	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Jan 2019 11:01	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Jan 2019 11:01	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Jan 2019 11:00	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Jan 2019 11:00	Photos	Normal	Photos
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 03 Jan 2019 11:00	Photos	Normal	Photos

Video List

Uploaded By/Date	Folder Date	File Name
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