

NATIONAL Assessment Centre Services

[Ref: J2-100]

Date In: 16/01/2019 17:55	Job description	Date & Time Completed	Done by
Ref No: NA/INC19001030/K4	SAS e-filing		
Veh No: GBS 170R	E-mail (within 8hrs, AIG 2hrs)		
D.O.A: 15/01/2019 17:30	i-Motor Claim Form	MT/1028185-001	17/1/19 09:51
OD: TP / Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: YM3466E. 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 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

Claimant's Particulars:	NA1900443	
	Driver/Owner:	
	Contact No:	
	Damaged Portion:	
	QC Checked by (Engr-In-Charge):	
	Auditors' Comments:	
	Dat. 1:	
	Dat. 2 / 3:	

Invoice Preparation Checklist		Am't (\$)	Am't (\$)
		Int. Bill	Add Bill
1) AR: Accident Reporting (\$30);			
2) DA: Damage Assessment (\$100); INC (\$30)			
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:-			
ON:			
*N3: Courtesy Car / Tpl 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	16/01/2019 17:55
Date Of Accident	15/01/2019 17:30
Exact Location Of Accident	WEST COAST HIGHWAY TOWARDS KEPPEL
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBJ170R
Insured/Policyholder	
Name Of Registered Owner	AUTO 51 LEASING PTE LTD
Co Reg No	201632910R
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-87558152
Alternative Phone No	OFFICE-67351551
Vehicle Particulars	
Manufacturer	NISSAN
Model	NV350 PANEL VAN 5DR 2.5 5AT
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	5091161451-01
Cover Note Number	
Driver	
Name of Driver	HAN SUN JUAN
NRIC No	S1768966E
Date Of Birth	13/07/1966
Occupation	OUTDOOR
Date Of Driving Pass	17/06/2011
Driving Experience	7 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87558152
Fax Number	
Contact Number	OTHERS-87558152
EMail Address	NOEMAIL

Address	BLK 19 JALAN SULTAN #10-170
Postcode	190019
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 (including own vehicle) involved in the accident	2
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	YM3466E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

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



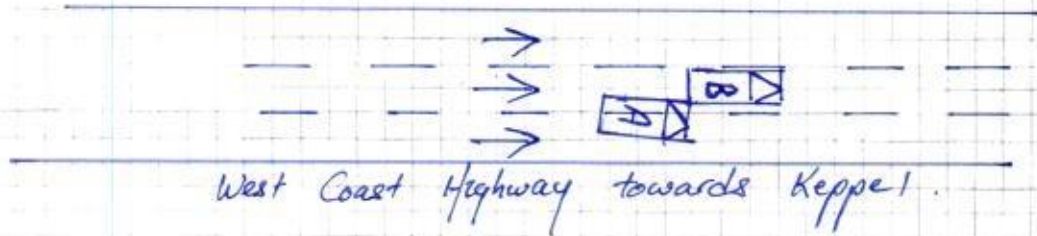
Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN

(A) GBJ 170 R
(B) YM 3466 E



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 15/01/19 at @1730 hrs, I was travelling in my vehicle (GBJ 170 R) along West Coast Highway towards Keppel on top of the flyover on the centre lane. The lorry (YM 3466 E) in front of me suddenly slow down, I steered my steering to the right to avoid collision, however, it happen to fast, my vehicle front left portion collided onto the rear right portion of the said lorry.

DECLARATION

We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time:

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

16/1/2019
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Register New Vehicle (Acknowledgement)

Vehicle Particulars

Vehicle No.:	GEJ17CR	Vehicle Scheme:	Normal
Vehicle Type:	A/S - Goods (Closed) Van/Van Panel (Delivery)		
Vehicle Attachment 1:	No Attachment		
Vehicle Attachment 2:	-	Vehicle Attachment 3:	
Vehicle Make:	NISSAN	Vehicle Model:	NV350 PANEL VAN SDR 2.5 SAT
Chassis No.:	JN1MC2E2e20030720	Engine No.:	VD250389368
Motor No.:	-	Trailer Chassis No.:	
Propellant:	Diesel	Passenger Capacity:	2
Engine Capacity:	2488 cc	Power Rating:	-
Maximum Power Output:	-		
Unladen Weight:	1780 kg	Maximum Laden Weight:	3300 kg
Primary Colour:	White	Secondary Colour:	-
First Registration Date:	29 Nov 2018	Original Registration Date:	29 Nov 2018
Manufacturing Year:	2018	Open Market Value:	\$26,466.00
PARF Eligibility:	No	Minimum PARF Benefit:	\$0.00
No. of Transfers:	0	Additional Registration Fee Rate:	5.00%
Actual ARF Paid:	\$1,324.00		

Owner Particulars

Owner Name:	AUTO 51 LEASING PTE LTD
Owner ID Type:	Company
Owner ID:	201632910R
Registered Address Type:	Private Residential (Condo/Apartment/House) / Shopping / Office Complexes
Registered Block/House No.:	15
Registered Street Name:	YISHUN INDUSTRIAL STREET 1
Registered Unit No.:	# 01 - 05
Registered Building Name:	WIN 5
Registered Postal Code:	768091
COE No. / Expiry Date:	201809010700053SR / 28 Nov 2028
COE Bid Category:	E - Open - all except motorcycle
QP Paid:	\$32,311.00

Transaction Details

Business Transaction Ref. No.:	20181129155921954368
Business Transaction Date:	29 Nov 2018
Business Transaction Time:	15:59:21

Message

The above vehicle has been successfully registered.
Please note that \$24,933.00 will be deducted from your GIRO account.

OK

Save as PDF

Vehicle No.	GBJ 170R		Model / Make	Nissan NV 350.
Date of Accident	15/01/19.			
Time of Accident	1730 HRS			
Location of Accident	West Coast Highway towards Keppel.			
Exact purpose use during accident	Commercial used.			
Name of Owner	Auto 51 Leasing Pte Ltd.			
Telephone No.	H/P :	Home :	Office : 67351551.	
NRIC	201632910R.			
Address	15, Yeshun Industrial St 1 #01-05 Wn 5 (S) 768091.			
Claim type	OD	THIRD PARTY	<u>REPORTING ONLY</u>	
Insurance Company	NTUC.			
Type of Coverage	<u>Comprehensive</u>	Third Party	Third Party / Fire / Theft	
Policy No.	5091161451-01.			
Name of Driver	As Above If No, Han Sun Juan.			
NRIC	S1768966E.		Any Passengers : N-A.	
Date of birth	13/07/1966.			
Occupation	<u>Outdoor</u>	/	Indoor	
Driving License Pass Date	17/06/2011			
Gender	<u>Male</u>	P	Female	
Contact No.	H/P : 87558152	Home :	Office :	
Address	BLK 19, Jalan Sultan #10-170 (S) 190019.			
Driver have any own vehicle	<u>No,</u>	If yes, Reg No.		
Relationship	Employee,	If no, state <u>husb</u>		
Weather condition	<u>Clear</u>	Raining	Other	
Road Surface	<u>Dry</u>	Wet	Other	
Any Injuries	<u>No,</u>	If Yes, Who?		
Name And Contact No.				
Name And Contact No.				
Police Report	<u>No,</u>	If Yes, Where?		
Vehicle B No.	YM 3466E		Any Passengers : N-A.	
Name of Driver			Contact No. :	
Vehicle C No.			Any Passengers :	
Vehicle D No.			Any Passengers :	
Vehicle E no.			Any Passengers :	
Vehicle F No.			Any Passengers :	
Vehicle G No.			Any Passengers :	
Witness Name			Witness Contact :	
Accident Portion	<u>Front left portion.</u>			
Camera Recorder	Yes <u>No</u>			
Email Address				
PARTICULAR WORKSHOP	<u>Twincar.</u>			
CONTACT NO.	6842 0051 / 6744 0510			
CONTACT PERSON	<u>Hui Xin</u>			
FAX NO	6741 0510			
WORKSHOP Email ADDRESS	sales@n51.com.sg			

SINGAPORE
S1768966E



NAME
HAN SUN JUAN

姓 名
韓 煥 元

RACE
CHINESE

Date of Birth
13-07-1966

Sex
M

Country of Birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1768966E

Name
HAN SUN JUAN

Birth Date: 13 Jul 1966

Issue Date: 17 Jun 2011

1001973923F




NRIC No: S1768966E

Blood Group: A+

Date of Issue: 09-05-1995

APT BLK 19 JALAN SULTAN #10-170
SINGAPORE 190019

NRIC No: S1768966E

Date: 08/02/2010




S1768966E

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

EFFECTIVE DATE

Class 3 Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg 17 Jun 2011



Licence No: S1768966E

NP 428A

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 : 5091161451-01

Cover : Comprehensive

- | | |
|---|---------------------------|
| 1. Index mark and Registration Number of Vehicle | : GBJ170R |
| Chassis Number | : JN1MC2E26Z0030720 |
| 2. Name of Policyholder | : AUTO 51 LEASING PTE LTD |
| 3. Effective Date of Insurance | : 29 Nov 2018 |
| 4. Expiry Date of Insurance | : 28 Nov 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)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: TOKYO CENTURY LEASING (SINGAPORE) PTE 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 : S & M ALLIANCE PTE LTD (00000614373)

Date of Issue : 12 Mar 2018 08:53 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="15/01/2019 17:30"/>
Vehicle No.(For Motor)	<input type="text" value="GBJ170R"/>	Certificate Number	<input type="text"/>
<input type="button" value="Search"/>			

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5091161451-01		AUTO 51 LEASING PTE LTD	201632910R	GFT	Comprehensive	GBJ170R	GBJ170R	29/11/2018	

▼ Policy Information

Policy No.	5091161451-01	Policyholder Name	AUTO 51 LEASING PTE LTD	Policyholder NRIC	201632910R
Certificate No.					
Address	15 YISHUN INDUSTRIAL STREET 1 #01-05 WIN 5 SINGAPORE 768091				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	12/03/2018	Effective Date	10/03/2018 00:00	Expiry Date	09/03/2019 23:59
Third Party Excess	1500.00	Own damage Excess	2000.00	Windscreen Excess	100.00
Additional Excess		OS Premium	0		
Outside Singapore OD Excess		Outside Singapore TP Excess			
Agent	S & M ALLIANCE PTE LTD	Agent Tel.	96354288	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	15 YISHUN INDUSTRIAL STREET	Address 2	#01-05 WIN 5	Address 3	SINGAPORE 768091
Address 4		Address Type	Singapore address	Post Code	768091
Unit No.	02-06	Related Policy Number	5093489587-01		

► Insured Object: GBJ170R

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	31/08/2018 00:00	Basic Information Endorsement	000001286893517	Endorsement Take Effective	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: CHASSIS NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. JN1MC2E26Z0009163 31-08-2018 \$732.93 2. JN1MC2E26Z0009165 31-08-2018 \$732.93 3. JN1MC2E26Z0009167 31-08-2018 \$732.93 4. JN1MC2E26Z0009173 31-08-2018 \$732.93 5. JN1MC2E26Z0030495 31-08-2018 \$732.93 In view of this amendment, an additional premium of \$3,664.65 (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

Claim Handling

Accident MT/1028185

Policy No.	5091161451-01	Vehicle No.	GBJ170R	GST Registration No.
Certificate No.				
Policyholder Name	AUTO S1 LEASING PTE LTD			Policyholder NRIC
Product Code	FLEET INSURANCE	Cover Type	Comprehensive	Loading
Contact No.(Mobile)	87558152	Contact No.(Office)	0	Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	0	Private Hire

▼ Accident Details

Report Date	17/01/2019 09:46	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	15/01/2019	Time of Accident hh:mm	17:30	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	WEST COAST HIGHWAY TOWARDS KEPPEL			

▼ Excess

Own damage Excess	2,000.00	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	Yes
Modification History			

▼ Policyholder Mailing Address

Address 1	15 YISHUN INDUSTRIAL STREET	Address 2	#01-05 WIN 5	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	02-06	Related Policy Number	5093489587-01	

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB
Unnamed driver Name	HAN SUN JUAN	Driver NRIC	S1768966E	Driving Experience
Register Date of Driver License	17/06/2011	Driver Age	52	Contact No.(Home)
Contact No.(Mobile)	87558152	Contact No.(Office)	0	Address 3
Address 1	BLK 19 #	Address 2	JALAN SULTAN	Post Code
Address 4		Address Type	Singapore address	
Unit No.				
Does he own a Singapore Registered car?	Yes <input checked="" type="radio"/> No <input type="radio"/>	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-MX

New

Claim Type *	OD-MX	Insured Name	AUTO S
Contact No.(Mobile)		Contact No. (Home)	
Email Address		OI Vehicle Number	GBJ170
Claim Description	GBJ170R / YM3466E ON 15 Jan 2019		
Preferred Workshop	Insured Liability	Partially at Fault	
Contact No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered		GIA report	Received
Report Taken By		Claim Close Date	17/01/2019 09:56
Print AK letter		Workshop Repairer	

Save Submit

Attachment

Accident No.	MT/1028185	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	17/01/2019 09:50
Path *		Category *	Confidential
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	<input type="button" value="Please Select"/> ▼	<input type="button" value="NO"/>
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	<input type="button" value="Please Select"/> ▼	<input type="button" value="NO"/>
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	<input type="button" value="Please Select"/> ▼	<input type="button" value="NO"/>
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	<input type="button" value="Please Select"/> ▼	<input type="button" value="NO"/>
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	<input type="button" value="Please Select"/> ▼	<input type="button" value="NO"/>
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	<input type="button" value="Please Select"/> ▼	<input type="button" value="NO"/>
<input type="button" value="Message Read"/>			

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Des
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Jan 2019 09:56	NRIC/ Driving License	Normal	NRIC/ Driving I
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Jan 2019 09:54	SAS	Normal	SAS 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Jan 2019 09:54	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Jan 2019 09:54	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Jan 2019 09:54	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Jan 2019 09:53	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Jan 2019 09:53	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Jan 2019 09:53	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Jan 2019 09:53	Photos	Normal	Photos
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Video List

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