

NATIONAL Assessment Centre Services

Date In: 13/03/19	Job description	Date & Time Completed	Done by
Ref No: NIA/INC19004580/13	SAS e-filing		
Veh No: SJV1538A	E-mail (within 8hrs, AIC 2hrs)		
DOA: 12/03/19 0335	i-Motor Claim Form	MT/1035806-001	
<input checked="" type="radio"/> 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: LAMP POST 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 :-	Invoice Preparation Checklist	Ant (\$)	Ant (\$)
		1st Bill	Add Bill
Driver/Owner:	1) AR: Accident Reporting (\$30);		
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)		
Damaged Portion:	3) TF: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120		
Auditors' Comments :-	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
Cat 1:	6) TR: Re-inspection \$75		
Cat 2/3:	7) NI: 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 \$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	13/03/2019 15:22
Date Of Accident	12/03/2019 03:35
Exact Location Of Accident	HOUGANG AVE 8 LP 28
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJV1538A
Insured/Policyholder	
Name Of Registered Owner	KENT LIM SI QIANG
NRIC No	S9220226G
Email Address	AHKENT92@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97631082
Alternative Phone No	OTHERS-97631082

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS
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	5103578075
Cover Note Number	

Driver

Name of Driver	KENT LIM SI QIANG
NRIC No	S9220226G
Date Of Birth	15/06/1992
Occupation	INDOOR
Date Of Driving Pass	21/08/2018
Driving Experience	0 YEAR AND 6 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97631082
Fax Number	
Contact Number	OTHERS-97631082
EMail Address	AHKENT92@GMAIL.COM

Address	BLK 673 HOUGANG AVE 8 #05-667
Postcode	530673
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	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 (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?	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?	YES
If Yes, Please state which Police Station	
Police Station Name	HOGANG N.P.C
Police Station Address	ROAD: 60 HOUGANG AVE 9 SINGAPORE 538775 , POSTCODE: 538775 , 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/20190313/2077

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	LAMP POST
Details Of Properties	
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

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.

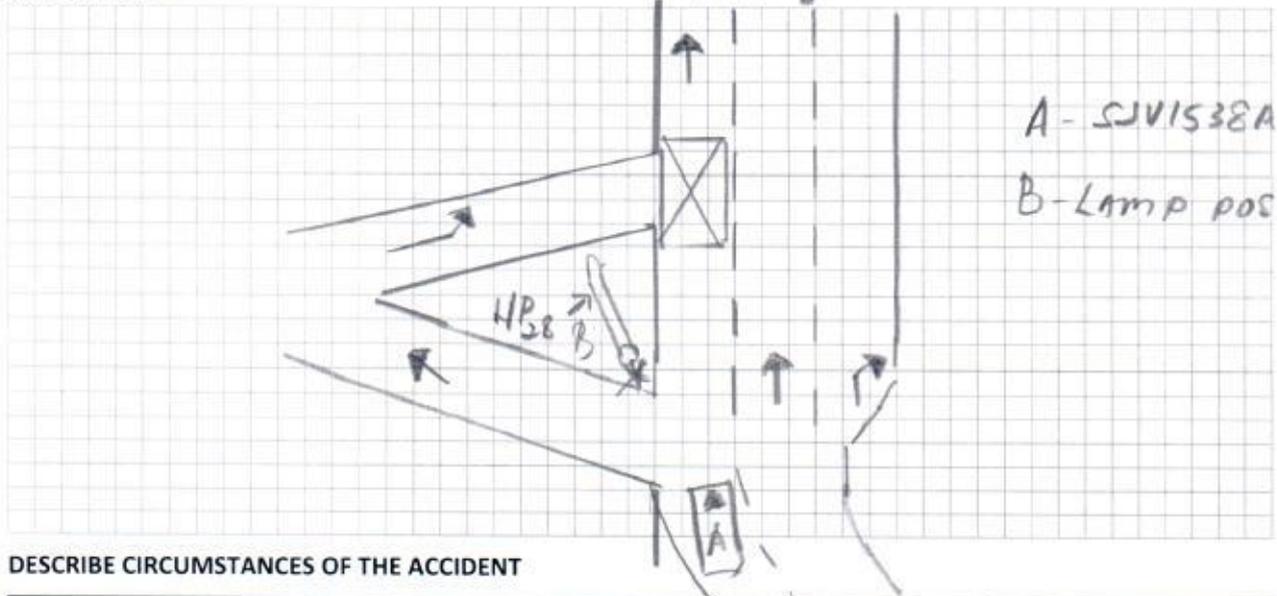
Policyholder's Signature
Date & Time:

13/03/19

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

Pls refer to the police report: 7/2019 0513/2077

DECLARATION

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

[Signature] 13/03/19
Policyholder's Signature
Date & Time:

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

[Signature] 13/03/19
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20190313/2077

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

2 of 3

Report No. T/20190313/2077

CONTINUATION OF REPORT

Brief Details.

On 12/03/2019 at about 0335hrs, I was driving my black colour Toyota Vios car of registration number SJV1538A along Hougang Ave 8 when I collided onto lamp post 28. The accident happened as I dozed off. I was not injured however, my car was towed away. There was no passengers in the car. There is cctv installed inside the car focusing on the front. Police officers came to scene and then conducted breathalyzer test. I was subsequently taken into custody for inconsiderate driving. I was fined SGD \$500 with 9 demerit points. I am lodging this report for my insurance claim purposes.



**SINGAPORE
POLICE FORCE**



T/20190313/2077

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

3 of 3

Report No. T/20190313/2077

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: F / Staff Sgt MOHAMED FAIZAL AKBAR ALI
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / AEIT / Sr Staff Sgt ONG YONG HOCK Contact No.: 65476436

Signature Of Informant: 
Date/Time: 13/03/2019 14:11
Classification Of Case: 

Authentication Stamp
NP168

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9220226G



Name
KENT LIM SI QIANG

林思强

Race
CHINESE
Date of birth
15-06-1992
Country/Place of birth
SINGAPORE

Sex
M

REPUBLIC OF SINGAPORE DRIVING LICENCE



Identity Number: S9220226G

KENT LIM SI QIANG

Birth Date: 15 Jun 1992
Issue Date: 21 Aug 2018



5204204



NRIC No. S9220226G



Date of issue
24-07-2013

Address

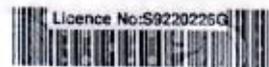
APT BLK 673 HOUGANG AVENUE 8
#05-667
SINGAPORE 530673

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

EFFECTIVE DATE

Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg 21 Aug 2018

NP 420A





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: 5103578075

Cover : drive CLASSIC

- | | |
|---|---------------------|
| 1. Index mark and Registration Number of Vehicle | : SJV153BA |
| Chassis Number | : MRO53HY9305132680 |
| 2. Name of Policyholder | : KENT LIM SI QIANG |
| 3. Effective Date of Insurance | : 04 Sep 2018 |
| 4. Expiry Date of Insurance | : 03 Sep 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. | |

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)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: KENT LIM SI QIANG
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: DBS BANK 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 : HUA YANG CREDIT PTE LTD (00000613824)
 Date of Issue : 04 Sep 2018 12:01 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

HUA YANG CREDIT PTE LTD
 189 SIN MING ROAD #04-04
 AMTECH BUILDING SINGAPORE 878825
 TEL: 64688111 FAX: 64696111
 ACRA: 198404112G

Claim Handling

Accident MT/1035806

Policy No.	5103578075	Vehicle No.	SJV1538A	GST Registration No.
Certificate No.				
Policyholder Name	KENT LIM SI QIANG			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading
Contact No.(Mobile)	97631082	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	13/03/2019 17:34	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	12/03/2019	Time of Accident hh:mm	03:35	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	HOUANG AVE 8 LP 28			

Excess

Own damage Excess	600.00	Additional Excess	0	Windscreen Excess
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	BLK 673 #05-667	Address 2	HOUANG AVENUE 8	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	05-667	Related Policy Number	5103578075	

OI Driver Info

Driver Name	KENT LIM SI QIANG	Driver Type	Main Driver	Driver DOB
Unnamed driver Name		Driver NRIC	S9220226G	Driving Experience
Register Date of Driver License	21/08/2018	Driver Age	26	Contact No.(Home)
Contact No.(Mobile)	97631082	Contact No.(Office)	0	Contact No.(Home)
Address 1	BLK 673	Address 2	HOUANG AVENUE 8	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	#05-667			
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-MD New

Claim Type *	OD-MD	Insured Name	KENT L
Contact No.(Mobile)	87679658	Contact No. (Home)	
Email Address		OJ Vehicle Number	SJV153
Claim Description	SJV1538A / LAMP POST ON 12 Mar 2019		
Preferred Workshop Finalisation	Yes	Insured Liability	Fully at Fault
Preferred Repair Option	income to assign workshop	GIA report	Received
Date Registered	13/03/2019 17:40	Claim Close Date	
Report Taken By	ROSLINDA	Workshop Repairer	

Print AK letter

Save Submit

Attachment

Accident No. MT/1035806 Claim No. 001
 Last Doc. Received Yes No Upload Date 13/03/2019 00:00

Path *	Category *	Confidential
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select ▼	<input type="text" value="NO"/>
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select ▼	<input type="text" value="NO"/>
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select ▼	<input type="text" value="NO"/>
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select ▼	<input type="text" value="NO"/>
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select ▼	<input type="text" value="NO"/>
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> Please Select ▼	<input type="text" value="NO"/>
<input type="button" value="Message Read"/>	<input type="button" value="Clear"/> Please Select ▼	<input type="text" value="NO"/>

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Des
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:40		NRIC/ Driving License	Normal	NRIC/ Driving I
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:40		SAS	Normal	SAS 2
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:40		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:40		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:40		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:40		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:40		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:39		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:39		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:39		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:39		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:39		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:39		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:39		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:39		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:39		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:39		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:39		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:39		Photos	Normal	Photos
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:39		Photos	Normal	Photos



NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:39	Photos	Normal	Photos
NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:38	Photos	Normal	Photos
NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:38	Photos	Normal	Photos
NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:38	Photos	Normal	Photos
NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:38	Photos	Normal	Photos
NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:38	Photos	Normal	Photos
NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 13 Mar 2019 17:38	Photos	Normal	Photos

Video List

Uploaded By/Date	Folder Date	File Name	
------------------	-------------	-----------	--

D.O.A. 12/3/2019

Bal = 10 mths.

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	0226G
Vehicle Details	
Vehicle No.:	SJV1538A
Vehicle to be Exported:	No
Intended Deregistration Date:	15 Mar 2019
Vehicle Make:	TOYOTA
Vehicle Model:	VIOS E AUTO
Primary Colour:	Black
Manufacturing Year:	2009
Engine No.:	1NZX979092
Chassis No.:	MR053HY9305132680
Maximum Power Output:	80.0 kW (107 bhp)
Open Market Value:	\$12,717.00
Original Registration Date:	13 Jan 2010
First Registration Date:	13 Jan 2010
Transfer Count:	3
Actual ARF Paid:	\$12,717.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	12 Jan 2020
PARF Rebate Amount:	\$6,358.00
Intended COE Rebate Details	
COE Expiry Date:	12 Jan 2020
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	\$18,502.00
COE Rebate Amount:	\$1,526.00
Total Rebate Amount:	\$7,884.00

M.V. \$15,000.

The information contained herein is correct as at 13 Mar 2019

OK

M.V. \$15,000
 Rebate \$ 7,884

\$7,116 (Repair limit).

Claim Handling

Task Transfer Exit

Accident MT/1035806

LOS SAL SUB

Policy No.	5103578075	Vehicle No.	SJV1538A	GST Registration No.	
Certificate No.					
Policyholder Name	KENT LIM SI QIANG	Policyholder NRIC	S9220226G		
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	97631082	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
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	No

Accident Details

Report Date	13/03/2019 17:34	Accident Report Within 24 hrs	Yes	Accident Type	Others
Date of Accident	12/03/2019	Time of Accident hh:mm	03:35	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	ICM No.	
Accident Location	HOUANG AVE 8 LP 28				

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	BLK 673 #05-667	Address 2	HOUANG AVENUE 8	Address 3	SINGAPORE 530673
Address 4		Address Type	Singapore address	Post Code	530673
Unit No.	05-667	Related Policy Number	5103578075		

OI Driver Info

Driver Name	KENT LIM SI QIANG	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S9220226G	Driver DOB	15/06/1992
Register Date of Driver License	21/08/2018	Driver Age	26	Driving Experience	0
Contact No.(Mobile)	97631082	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 673	Address 2	HOUANG AVENUE 8	Address 3	SINGAPORE 530673
Address 4		Address Type	Singapore address	Post Code	530673
Unit No.	#05-667				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
-------------------------------------	------	-------------	---

Modification History

Investigation

Claim 001 OD-MD

Claim Case Officer Yap Chee Ling

Claim Type	OD-MD	Insured Name	KENT LIM SI QIANG	Insured NRIC	S9220226G
Contact No.(Mobile)	87679658	Contact No. (Home)		Contact No. (Office)	
Email Address		OI Vehicle Number	SJV1538A	TP Vehicle Number	LAMP POST
Claim Description	SJV1538A / LAMP POST ON 12 Mar 2019			Name of Preferred Workshop	
Preferred Workshop Specialisation	Yes	Preferred Repair Option	income to assign workshop	Insured Eligibility report	Fully at Resolved
Date Registered	13/03/2019 17:41	Claim Close Date		Date Received	14/03/2019 11:11
Report Taken By	ROSLINDA	Workshop Repairer		Total Loss but Repaired	
				OD Excess Collected by Workshop	

Print AK letter

Modification History

Special Claim Creation Approval

Approval Reason

Remarks

damage assessment Activity Handling Attachment

Vehicle Info

Vehicle Make	TOYOTA	Vehicle Model	VIOS	Engine Capacity	
Date of Registration	13/01/2010	Classis No.	MR053HY9305132680	Parallel Import *	<input type="radio"/> Yes <input checked="" type="radio"/> No
Towing Required *	<input checked="" type="radio"/> Yes <input type="radio"/> No	Vehicle in IDAC *	<input checked="" type="radio"/> Yes <input type="radio"/> No	Survey Current Status	
Type of Tender *	Own Damage	Assessor Name *	SIMON	Economical Repair Value(\$) *	
IDAC/Workshop Name	NATIONAL ASSESSMENT CENTR	IDAC/Workshop Location	51 UBI AVENUE 1 #01-25 PAYA	Scrape Value(\$) *	7,884.00
Windscreen Parts & Labour Cost		Total Loss *	<input checked="" type="radio"/> Yes <input type="radio"/> No	Market Value(\$) *	15,000.00
Remark *	NOT ECONOMICAL TO REPAIR				

Remark for Supplementary

Damage Listing

Find a Part	No.	Part No.	Description	Qty *	Repair Code *
root	1	32200101	NUMBER PLATE (FRONT)	1	Replace
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					

Save Submit



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



Vehicle Movement Form

Vehicle Check-In

Vehicle No: SJ V 1538A Date In: _____ Time In: _____ with Keys: Yes / No

For Office use

Attended by: _____

Workshop Collection of Vehicle

Workshop: Sony HUP

Collection Date: 28/3/19 Time: 12.30pm with Keys: Yes / No

Tow Truck No: GR 0686 R Tow Man: TEH FIANG SONY NRIC: 1270190-C

Signature: ZOL

For office use

Attended by: Juleso r.

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: _____

LKK Paya Ubi

From: Teng Ken Leong <kenleong.teng@income.com.sg>
Sent: Tuesday, 26 March 2019 12:01 PM
To: Seng Hup Second Hand Auto Parts
Cc: NAC Paya Ubi; Theresa Vimala D/O Balagangadharan; Hazalya Binte Ibrahim; Cynthia Ang; Teng Ken Leong
Subject: Vehicle No SJV1538A - Successful Tender for Wreck Vehicle

Our Ref: MT/CA/OD/077/1035806-001/YCL/TKL

26 Mar 2019

SENG HUP SECOND HAND AUTO PARTS
202 WOODLANDS IND PARK E
SINGAPORE 757878

Dear Sir

CLAIM NUMBER: MT/1035806-001
VEHICLE NUMBER: SJV1538A

We are pleased to inform you that you are successful in your tender for the wreck vehicle. The details are as follows:

Award Date: 26 Mar 2019
Make: TOYOTA
Model: VIOS
Location: NATIONAL ASSESSMENT CENTRE (PAYA UBI)
Address:

If you have any queries, please contact Yap Chee Ling at 64307881 or email us at motor@income.com.sg.

Yours sincerely
Jenny Pe
Deputy Vice President
Motor Insurance

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.