

NATIONAL Assessment Centre Services			
Date In: 22/04/2019 14:33	Job description	Date & Time Completed	Done by
Ref No: NA/INC19007016/K4	SAS e-filing		
Veh No: GBF 3203G	E-mail (within 3hrs, A/C 2hrs)		
D.O.A: 20/04/2019 07:00	i-Motor Claim Form	MT/1041265-001	23/4/19 1020
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: UNKNOWN	INC () / Non-INC ()	
Owner / Driver: (		Tel: ()
Policy No: (	)	Period: ()
Confirmed by: (		Date: ()
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

NA1902892

Claimant's Particulars:	Invoice Preparation Checklist	Am't (\$)	Am't (\$)
Driver/Owner:		Int. Bill	Add. Bill
Contact No:	1) AR: Accident Reporting (\$30);		
Damaged Portion:	2) DA: Damage Assessment (\$100); INC (\$30)		
QC Checked by (Engr-In-Charge):	3) TF: Towing Fee \$40/\$45		
Auditors' Comments:	4) FT: Follow-Through Survey \$120		
Ref: 1:	5) FT: Follow-Through Survey (Resurvey) \$30		
Ref: 2/3:	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) NI: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	on:		
	*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 (N11 INC) against INC \$20		
	9) N12: Idno Mobile \$0		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	22/04/2019 14:33
Date Of Accident	20/04/2019 07:00
Exact Location Of Accident	OPEN SPACE CARPARK AT PASIR RIS STREET 41 LOT 41
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF3203G
Insured/Policyholder	
Name Of Registered Owner	HUP HIN TRANSPORT CO PTE LTD
Co Reg No	199206357M
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91769288
Alternative Phone No	OFFICE-91769288

Vehicle Particulars

Manufacturer	NISSAN
Model	NV200 1.5 MT ABS AIRBAG 2WD 6DR E5 W/RC
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	5102670329
Cover Note Number	

Driver

Name of Driver	YEO KEE HENG
NRIC No	S1717840G
Date Of Birth	21/05/1965
Occupation	OUTDOOR
Date Of Driving Pass	02/08/1984
Driving Experience	34 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91769288
Fax Number	
Contact Number	OTHERS-91769288
Email Address	NOEMAIL

Address	BLK 463 PASIR RIS STREET 41 #07-60
Postcode	510463
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	COLLIDED INTO PARKED VEHICLE
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	PASIR RIS NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5852999 - FAX NO: 65855261
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20190420/2073

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	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

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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:

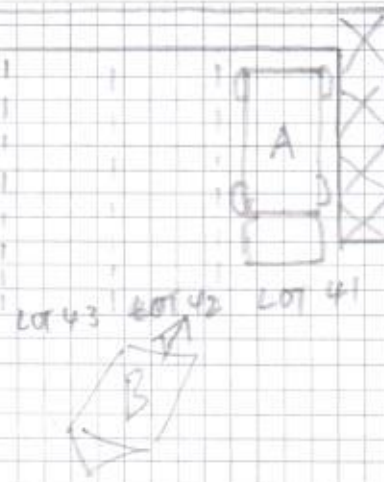
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

OPEN SPACE CARPARK
AT PASIR RIS STREET 41,
LOT 41.

A - GBF3203G

B - Unknown



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls Refer to the Police Report
T/20190420/2073

DECLARATION

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



Police Officer's Signature
Date & Time:

[Signature]

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

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

72/4/2019



**SINGAPORE
POLICE FORCE**



T/20190420/2073

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

1 of 3

Report No. T/20190420/2073

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/04/2019 14:09	Vide Report No.:	Station Diary No.: 51
--------------------------------------------	------------------	--------------------------

Informant's Particulars

Name of Informant: YEO KEE HENG			Address: APT BLK 463 PASIR RIS STREET 41 #07-60 SINGAPORE 510463		
ID Type / ID No.: NRIC NO / S1717840G			Contact No.: Home/Office: Mobile: 91769288		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 53	Date of Birth: 21/05/1965	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: SALES EXECUTIVE			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 20/04/2019 07:00	Type of Location: Car Park
Location: Along Road 1 PASIR RIS STREET 41 OPEN SPACE CARPARK AT PASIR RIS STREET 41, LOT 41.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBF3203G	Van	NISSAN	NV200	Red		0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20190420/2073

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

2 of 3

Report No. T/20190420/2073

CONTINUATION OF REPORT

Driver				
Name	YEO KEE HENG		ID No.	S1717840G
Related Vehicle	GBF3203G (Van)		Contact No.	91769288
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL

Brief Details.

I am a Sales Executive for HUP HIN TRANSPORT CO PTE LTD.

On 19/04/2019 at about 2100hrs, I parked my company van (Red Nissan NV200 bearing license plate GBF3203G) at Lot 41 of the open-space carpark at Pasir Ris Street 41. After parking my company van, I went home with my wife. There was no vehicle parked on the right side of my company van at Lot 42 when I left my vehicle.

On 20/04/2019 at about 0700hrs, I went to my company van and discovered that there were scratches along the right side of the vehicle. The scratches looked like it was caused by another vehicle that was driving into Lot 42 which was on the right side of my vehicle. At that point in time, there was another vehicle that was parked on the right side of my vehicle at Lot 42 but there were no damages to the vehicle when I made a check. As such, I do not suspect that the vehicle of causing the damages to my company van.

I called IDAC to inform them of the matter and they instructed me to lodge a Police report on the matter as it was considered a hit-and-run case. As such, I am lodging this report and bringing it to IDAC to continue my insurance claims.

There is no in-vehicle camera installed in my company van and I did not notice any CCTV installed around the area I parked my vehicle.



**SINGAPORE
POLICE FORCE**



T/20190420/2073

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

3 of 3



Report No. T/20190420/2073

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 CHAN XIANG DA	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 20/04/2019 14:09
Officer In Charge Of Case: TP / HRT / SI KALESWARI PALANI Contact No.: 65476902	Classification Of Case:
Authentication Stamp NP168	 SIGNATURE

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1717840G



Name
YEO KEE HENG

Race
CHINESE

Date of Birth **21-05-1965** Sex **M**

Country of Birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S1717840G**

Name
YEO KEE HENG

Birth Date **21 May 1965**

Issue Date **13 Oct 2004**




0922933



NRIC No. **S1717840G**



Blood Group **A+** Date of Issue **28-04-1993**

APT. BLK 423 PASIR RIS STREET 41 #07-60
SINGAPORE 610463

NRIC No: **S1717840G** Date: **17-07-1999** No: **3007835**

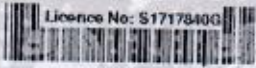
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

Class 3 Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors / vehicles =< 2500 kg

PASS DATE **02 Aug 1994**

NP 428A

Licence No: **S1717840G**



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 : 5102670329

Cover : Preferred Workshop Plan

- | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|
| 1. Index mark and Registration Number of Vehicle | : GBF3203G |
| Chassis Number | : VSKYBAM2020126968 |
| 2. Name of Policyholder | : HUP HIN TRANSPORT CO PTE LTD |
| 3. Effective Date of Insurance | : 09 Sep 2018 |
| 4. Expiry Date of Insurance | : 08 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. | |
| (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	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : TIMES INS BROKERS (MOTOR BUSINESS) (00000690643)

Date of Issue : 26 Jul 2018 10:06 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="20/04/2019 07:00"/>
Vehicle No.(For Motor)	<input type="text" value="GBF3203G"/>	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"/>	5102670329		HUP HIN TRANSPORT CO PTE LTD	199206357M	GFT	Preferred Workshop Plan	GBF3203G	GBF3203G	09/09/2018	

▼ Policy Information

Policy No.	5102670329	Policyholder Name	HUP HIN TRANSPORT CO PTE LT	Policyholder NRIC	199206357M
Certificate No.					
Address	20 BENOI ROAD SINGAPORE 629891				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	26/07/2018	Effective Date	26/07/2018 00:00	Expiry Date	30/06/2019 23:59
Third Party Excess	0	Own damage Excess	600	Windscreen Excess	100
Additional Excess		OS Premium	5117.23		
Outside Singapore OD Excess		Outside Singapore TP Excess			
Agent	TIMES INS BROKERS (MOTOR B	Agent Tel.	62528888	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	20 BENOI ROAD	Address 2	SINGAPORE 629891	Address 3	
Address 4		Address Type	Singapore address	Post Code	629891
Unit No.		Related Policy Number	5103227804		

► Insured Object: GBF3203G

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	26/07/2018 00:00	Basic Information Endorsement	000001286869078	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that the following vehicles are subject to Endorsement M42(A) - EQUIPMENT AND THIRD-PARTY WORKING RISKS : VEHICLE NUMBER EFFECTIVE DATE 1, XE867E 12-08-2018 2, XD9457B 28-08-2018
2	26/07/2018 00:00	Basic Information Endorsement	000001286869075	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that from 28 Aug 2018 to 30 Jun 2019, this policy is extended to cover the insured vehicles whilst being driven within the airside of Singapore Changi Airport and Seletar Airport. The policy does not cover any loss or damage to aircraft and its passengers, including any and all forms of aviation liability. 1. XD9457B
3	28/08/2018 00:00	Basic Information Endorsement	000001286891161	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that this policy is

Claim Handling

The premium on this policy has not been collected.

Accident MT/1041265

Policy No.	5102670329	Vehicle No.	GBF3203G	GST Registration No.
Certificate No.				
Policyholder Name	HUP HIN TRANSPORT CO PTE LTD			Policyholder NRIC
Product Code	FLEET INSURANCE	Cover Type	Preferred Workshop Plan	Loading
Contact No.(Mobile)	91769288	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	23/04/2019 10:13	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	20/04/2019	Time of Accident hh:mm	07:00	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	OPEN SPACE CARPARK AT PASIR RIS STREET 41 LOT 41			

▼ 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	Yes	GST Registration Date	01/04/19
GST Registration No.	M201108721	GST Status Verified	Yes
Modification History			

▼ Policyholder Mailing Address

Address 1	20 BENOI ROAD	Address 2	SINGAPORE 629891	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	S103227804	

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB
Unnamed driver Name	YEO KEE HENG	Driver NRIC	S1717840G	Driving Experience
Register Date of Driver License	02/08/1984	Driver Age	53	Contact No.(Home)
Contact No.(Mobile)	91769288	Contact No.(Office)	0	Address 3
Address 1	BLK 463 #	Address 2	PASIR RIS STREET 41	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
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Modification History

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	HUP HI
Contact No.(Mobile)		Contact No. (Home)	NIL
Email Address		OI Vehicle Number	GBF3203G
Claim Description	GBF3203G / UNKNOWN ON 20 Apr 2019		
Preferred Workshop	<input type="radio"/> Yes <input checked="" type="radio"/> No	Insured Liability	Partially at Fault
Finalisation	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report
Date Registered		Received	
Report Taken By		Claim Close Date	23/04/2019 10:21
		Workshop Repairer	

Print AK letter

Save Submit

Attachment

Accident No. MT/1041265 Claim No. 001
 Last Doc. Received ☒ Yes ☐ No Upload Date 23/04/2019 10:20

Path *

Choose File No file chosen

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Message Read

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Category *

Confidential

Please Select NO

Please Select NO

Please Select NO




















Please Select NO

Please Select NO

Please Select NO

Please Select NO

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Des
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Apr 2019 10:21	NRIC/ Driving License	Normal	NRIC/ Driving 1
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Apr 2019 10:19	SAS	Normal	SAS 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Apr 2019 10:19	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Apr 2019 10:19	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Apr 2019 10:19	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Apr 2019 10:19	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Apr 2019 10:19	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Apr 2019 10:18	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Apr 2019 10:18	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Apr 2019 10:18	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Apr 2019 10:18	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Apr 2019 10:18	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Apr 2019 10:18	Photos	Normal	Photos
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Apr 2019 10:18	Photos	Normal	Photos
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