

NATIONAL Assessment Centre Services.

[ver 1 Jan'03]

MVA 119053181

Date In: 24/1/19 16:16	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NA1 INC 19007252164	E-mail (within 3hrs, AIC 2hrs)		
Veh No: SLE 4925L	I-Motor Claim Form	MT/1041582-001	24/1/19 17:04
D.O.A: 23/1/19 08:05	I-Motor W/O (within: OD 2hrs, TP 4hrs)		
OD <input checked="" type="checkbox"/> Reporting Only	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars: Veh No: VBS 7762 INC () / Non-INC ()		
Owner / Driver: (Tel:	
Policy No: () Period: () Cover Type: ()		
Confirmed by: (Date:	Time:
Insured/Driver Liability: () % [Note-Est. Status (WO): N: 0-20%; P: 21-79%; P: 80-100%]		
Year of Registration: () Warranty: YES () / NO ()		
Excess: (\$) Loading: \$1,000 () / \$2,000 ()		

General Remarks:

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co: ()

Remarks: (INC 19007252164)

1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

NA1902956

Client's Particulars:	1) AIR: Accident Reporting (\$30)	2) DA: Damage Assessment (\$100) INC (\$80)	3) TP: Towing Fee \$40/\$45	4) PT: Follow-Through Survey \$120	5) IT: Follow-Through Survey (Resurvey) \$30	6) TR: Re-inspection \$75	7) NI: Idea DA + SMRT Survey \$160	8) NTUC Additional Services:	9) NI 21 Idea Mobile \$30
Driver/Owner:	For retaining against INC Only (ver 10 Jan 2003)								
Contact No:	Invoice dated Fee Charged								
Damaged Portion:	Invoice dated Fee Charged								
QC Checked by (Engr-In-Charge):	*NS: Courtesy Car / Tpt Allowance \$5								
Auditors Comments:	*NG: Repair Coordination \$10								
Ref. 1:	*N7: Post Repair Inspection \$25								
Ref. 2/3:	*NS: DV / Collision Excess Coordination \$5								
	TP (NI1): TP (N'n INC) against INC \$20								
	*N12: Idea Mobile \$30								

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	24/04/2019 16:16
Date Of Accident	23/04/2019 08:05
Exact Location Of Accident	CTE(AYE) 12.4KM L/P 147
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE4925L
Insured/Policyholder	
Name Of Registered Owner	MEGA CAR LEASING
Co Reg No	53322925A
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-86994326

Vehicle Particulars

Manufacturer	KIA
Model	CARENS 1.7(A) DIESEL
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5096824702-01
Cover Note Number	-

Driver

Name of Driver	LAW SIEW LENG
NRIC No	S7272886F
Date Of Birth	30/05/1972
Occupation	OUTDOOR
Date Of Driving Pass	09/12/1997
Driving Experience	21 YEARS AND 4 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-83811932
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 871C TAMPINES ST 86 #10-52
Postcode	523871
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	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	VBS7762 (PRIVATE CAR)
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
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)	2
Passenger 1	NAME: : JASEN GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2449999 - FAX NO: 62447258
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	VBS7762
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	YEONG KEEN WAI
NRIC/Passport Number	

Contact Number 0107771787
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name LAW SIEW LENG
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SLE4925L
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 2

Name JASEN
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SLE4925L
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

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.

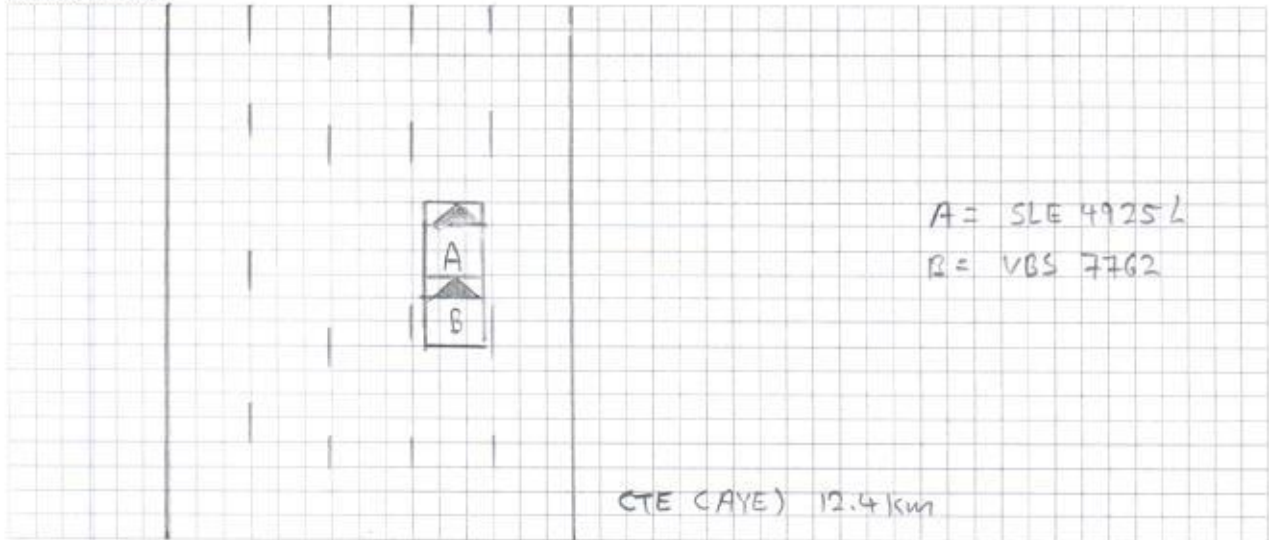


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



A = SLE 4925 L
B = VBS 7762

CTE (AYE) 12.4 km

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Police Report

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:

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

ACCIDENT STATEMENT

ACCIDENT DATE: (23 / 4 / 19) (DD/MM/YYYY), TIME: (08:05) (HH:MM)

LOCATION: CTE CAYE 12.4 km L/P 147

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLE 49256.
b) INSURANCE COMPANY: IMC.
c) POLICY NUMBER:
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL:
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: commercial
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: Mega car leasing (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: CONTACT: 86994326
c) ADDRESS:

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Law Siew Leng (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: CONTACT: 83811932.
c) ADDRESS:

* d) DATE OF BIRTH: () (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE:

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Hirer.

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO) - Driver neck.
7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: Bedok North MPC.

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: VBS 7762 MODEL:
b) DRIVER'S NAME: Yeong Keen Wai
c) NRIC/FIN/PASSPORT: CONTACT: 0107771787.

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: MODEL:
e) DRIVER'S NAME:
f) NRIC/FIN/PASSPORT: CONTACT:

No of passengers
(including driver)
(2)

M

Injury - neck.

No of passengers
(including driver)

No of passengers
(including driver)

waiting chop by

thursday.

RIC7173@lmmil.com 82699999

email = leng_s30@hotmail.com

fax =

VIDEO = Yes.



SINGAPORE POLICE FORCE



T/20190423/2030

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

1 of 3

Report No. T/20190423/2030

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/04/2019 10:51		Vide Report No.: F/20190423/0046		Station Diary No.: 30	
Informant's Particulars					
Name of Informant: LAW SIEW LENG			Address: APT BLK 871C TAMPINES ST 86 #10-52 SINGAPORE 523871		
ID Type / ID No.: NRIC NO / S7272886F			Contact No.: Home/Office: Mobile: 83811932		
Nationality: MALAYSIAN			Email:		
Sex: Female	Age: 46	Date of Birth: 30/05/1972	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: PRIVATE HIRE DRIVER		Driving Licence Information: Class: 3		Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 23/04/2019 08:05	Type of Location: Straight Road
Location: Along Road 1 CENTRAL EXPRESSWAY CTE(AYE) 12.4KM Lamp Post Number: 147				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLE4925L	Car	KIA	CARENS	White	Seriously Damaged	1
VBS7762	Car	HYUNDAI	STAREX	White	Seriously Damaged	0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20190423/2030

2 of 3

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

Report No. T/20190423/2030

CONTINUATION OF REPORT

Driver				
Name	LAW SIEW LENG		ID No.	S7272886F
Related Vehicle	SLE4925L (Car)		Contact No.	83811932
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL
Driver				
Name	YEONG KEEN WAI		ID No.	820606085461
Related Vehicle	VBS7762 (Car)		Contact No.	0107771787
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.

On 23/4/2019, at about 0805hrs, I was driving my vehicle bearing the car plate number, SLE4925L along CTE (AYE) at lane 2. The traffic was heavy and slow. Suddenly, I felt that I was hit from behind. I stopped and came out to check on my passenger (Jasen, HP: 98550183) who informed he was okay. Then I called for Police assistance as the other vehicle, bearing VBS7762 was a Malaysian Car. My rear bumper was dented and cracked and I was unable to open the car boot due to the accident.

After the traffic Police arrived, we moved our vehicles to the side and let them see my in-car camera footage. After which, the traffic police told me to proceed to a Police station to lodge a report. I wish to inform that I have already informed my rental company (GoJek) about this.



**SINGAPORE
POLICE FORCE**



T/20190423/2030

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

3 of 3

Report No. T/20190423/2030

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 BOEY HUI QI MICHELLE

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED
MOHD SAID

Contact No.: 65476172

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

23/04/2019 10:51

Classification Of Case:

Land Transport Authority

VOCATIONAL LICENCE

Licence No : S7272886F
Name : LAW SIEW LENG



Please visit www.lta.gov.sg to check the status of this vocational licence

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
14	PRIVATE HIRE CAR VL	03/09/2018



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7272886F



NAME
LAW SIEW LENG

Place
刘秀玲

CHINESE

Date of Birth
30-05-1972

Sex
F

Country of Birth
MALAYSIA



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S7272886F

Name
LAW SIEW LENG

Birth Date: 30 May 1972

Issue Date: 12 Dec 2003




001049149J

8147089



NRIC No: S7272886F



Nationality
MALAYSIAN

0+ 20-02-1995


APT BLK 871C TAMPINES ST 86 #10-52
SINGAPORE 523871

NRIC No: S7272886F Date: 20/04/2017


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

PASS DATE
09 Dec 1997

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms



Licence No: S7272886F



NP 428A

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="23/04/2019 11:57"/>							
Vehicle No.(For Motor)	<input type="text" value="SLE4925L"/>	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"/>	5096824702-01		MEGA CAR LEASING	53322925A	GFT	drive CLASSIC	SLE4925L	SLE4925L	18/12/2018	
<input type="button" value="Continue"/>										

▼ Policy Information

Policy No.	5096824702-01	Policyholder Name	MEGA CAR LEASING	Policyholder NRIC	53322925A
Certificate No.					
Address	BLK 152 #04-326 SERANGOON NORTH AVENUE 1 SINGAPORE 550152				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	12/12/2018	Effective Date	18/12/2018 00:00	Expiry Date	17/12/2019 23:59
Third Party Excess	1500.00	Own damage Excess	2000.00	Windscreen Excess	100.00
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	2000.00	Outside Singapore TP Excess	1500.00		
Agent	ASSURE (SINGAPORE) PTE. LTD	Agent Tel.	68038751	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	BLK 152 #04-326	Address 2	SERANGOON NORTH AVENUE 1	Address 3	SINGAPORE 550152
Address 4		Address Type	Singapore address	Post Code	550152
Unit No.		Related Policy Number	5096824702-01		

▶ Insured Object: SLE4925L

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	18/12/2018 00:00	Basic Information Endorsement	000001286962380	Endorsement Take Effective	<p>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: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. SLV2462D 28-12-2018 \$1,775.19</p> <p>In view of this amendment, an additional premium of \$1,775.19 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque in favour of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash or NETS.</p>

Continue

Cancel

Claim Handling

Accident MT/1041582

Policy No.	5096824702-01	Vehicle No.	SLE4925L	GST Registration No.	
Certificate No.					
Policyholder Name	MEGA CAR LEASING			Policyholder NRIC	533221
Product Code	FLEET INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	86994326	Contact No.(Office)		Contact No.(Home)	
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	Yes

▼ Accident Details

Report Date	24/04/2019 16:56	Accident Report Within 24 hrs	Yes	Accident Type	Collisio
Date of Accident	23/04/2019	Time of Accident hh:mm	08:05	Country of Accident	Singap
Reporting Centre		Orange Force		ICM No.	
Accident Location	CTE(AYE) 12.4KM L/P 147				

▼ Excess

Own damage Excess	2,000.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History	24/04/2019 16:59:33 System changed GST Status Verified from No to Yes		

▼ Policyholder Mailing Address

Address 1	BLK 152 #04-326	Address 2	SERANGOON NORTH AVENUE 1	Address 3	SINGA
Address 4		Address Type	Singapore address	Post Code	55015
Unit No.		Related Policy Number	5096824702-01		

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	LAW SIEW LENG	Driver NRIC	S7272886F	Driver DOB	30/05/
Register Date of Driver License	09/12/1997	Driver Age	46	Driving Experience	21
Contact No.(Mobile)	83811932	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 871C #10-52	Address 2	TAMPINES STREET 86	Address 3	TAMPIN
Address 4	SINGAPORE 523871	Address Type	Singapore address	Post Code	52387
Unit No.	10-52				
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

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

Modification History

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	MEGA CAR LEASING
Contact No.(Mobile)		Contact No.(Home)	
Email Address		OT Vehicle Number	SLE4925L
Claim Description	SLE4925L / VBS7762 ON 23 Apr 2019		
Preferred Workshop	0	Insured Liability	Not at Fault
Preferred Repair Option	Yes	Preferred Workshop, Name unknown	GIA report
Date Registered		Received	
Report Taken By		24/04/2019 17:02	Claim Close Date
		LIEW SHAN HUI	
<input checked="" type="checkbox"/> Print AK letter			

Save Submit

Attachment

Accident No.	MT/1041582	Claim No.	001
--------------	------------	-----------	-----

Last Doc. Received

Yes No

Upload Date

24/04/2019 17:04

Path *

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Message Read

Clear

Category *

Confidential

Urgency *

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Clear

Please Select

NO

Normal

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Apr 2019 17:04	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Apr 2019 17:04	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Apr 2019 17:04	SAS	Normal	SAS 2019-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Apr 2019 17:04	Photos	Normal	Photos 2019-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Apr 2019 17:04	Photos	Normal	Photos 2019-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Apr 2019 17:02	Photos	Normal	Photos 2019-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Apr 2019 17:02	Photos	Normal	Photos 2019-4-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Apr 2019 17:02	Photos	Normal	Photos 2019-4-24
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Apr 2019 17:02	Photos	Normal	Photos 2019-4-24

Video List

Uploaded By/Date	Folder Date	File Name	Source
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