

NATIONAL Assessment Centre Services.

(wef 1 Jan 05) MNA11937799

Date In: 6/1/19 - 10:07	Job description	Date & Time Completed	Done by
Ref No: NA/14037799/04	SAS e-filing		
Veh No: J6M75VY	E-mail (within 5hrs, AIC 2hrs)		
D.O.A: 6/1/19 - 09:30	i-Motor Claim Form	M7/1043254-201	6/1/19 M:16
☒ 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: J22356E	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

NA14037799	Invoice Preparation Checklist	Am't (\$) Est Bill	Am't (\$) Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	QJ:		
	*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 30		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

Auditors' Comments:-

Dat. 1:

Dat. 2/3:

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	06/05/2019 10:07
Date Of Accident	06/05/2019 07:30
Exact Location Of Accident	PIE (CHANGI) BEFORE EXIT 17D
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM754Y
Insured/Policyholder	
Name Of Registered Owner	LIM WEI BIAO
NRIC No	S8830507H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-87775736
Alternative Phone No	OFFICE-87775736

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180K
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	5106931510
Cover Note Number	

Driver

Name of Driver	LIM WEI BIAO
NRIC No	S8830507H
Date Of Birth	16/08/1988
Occupation	INDOOR
Date Of Driving Pass	07/12/2012
Driving Experience	6 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87775736
Fax Number	
Contact Number	OFFICE-87775736
EMail Address	NOEMAIL

Address	BLK 445A BUKIT BATOK WEST AVENUE 8 #13-423
Postcode	851445
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	COLLISION - HEAD TO REAR
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?	
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

ON STATED DATE AND TIME, I WAS TRAVELLING ALONG THE STATED VENUE. SUDDENLY VEHICLE B JAMMED BRAKE. I COULDN'T BRAKE MY VEHICLE IN TIME AND HIT ONTO VEHICLE B REAR PORTION.

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	SJZ2356E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LAY WAI CHOONG
NRIC/Passport Number	S2763436B
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	2

Passenger 1

NAME: :

GENDER: :

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.:

PIE (change)

A: SLM354-1
B: SJZ 2356E

Refer to statements

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

the foregoing particulars

Personnel's Signature

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S8830507H**

Name: **LIM WEI BIAO**

Birth Date: **16 Aug 1988**

Issue Date: **07 Dec 2012**

002130170K



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8830507H**

Name: **LIM WEI BIAO**

林伟彪

CHINESE

Date of birth: **16-08-1988**

Country of Birth: **SINGAPORE**



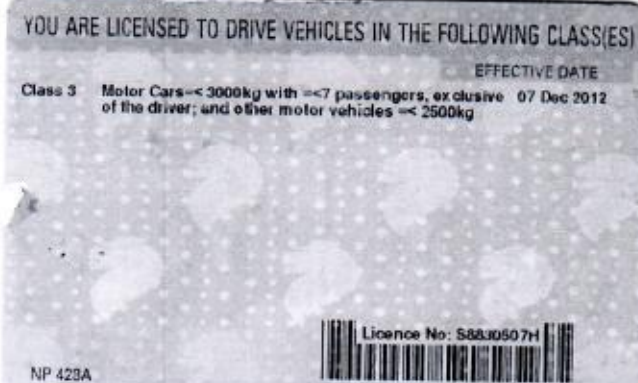

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3 Motor Cars < 3000kg with < 7 passengers, exclusive of the driver; and other motor vehicles < 2500kg **07 Dec 2012**

Licence No: **S8830507H**

NP 423A



3381569

NRIC No: **S8830507H**

Blood Group: **-** Date of issue: **07-08-2003**

APT BLK 445A BUKIT BATOK WEST AVENUE 8 #13-423 SINGAPORE 851445

NRIC No: **S8830507H** Date: **18/03/2018**




eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.		Date of Accident	06/05/2019 07:30
Vehicle No.(For Motor)	SLM754Y	Certificate Number	
Search			

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
☐	S106931510		LIM WEI BIAO	S8830507H	GPC	drivo CLASSIC	SLM754Y	SLM754Y	17/01/2019	16/01/2020

 Policy Information

Policy No.	5106931510	Policyholder Name	LIM WEI BIAO	Policyholder NRIC	S8830507H
Certificate No.					
Address	BLK 134 #12-449 BUKIT BATOK WEST AVENUE 6 SINGAPORE 650134				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	17/01/2019	Effective Date	17/01/2019 00:00	Expiry Date	16/01/2020 23:59
Excess Type		All Claims Excess			
Third Party Excess	0	Own damage Excess	600	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	600	Outside Singapore TP Excess	0	Young/Inexperience Driver Excess	
Agent	DICKSON INSURANCE AGENCY	Agent Tel.	63447667	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

 Policyholder Mailing Address

Address 1	BLK 134 #12-449	Address 2	BUKIT BATOK WEST AVENUE 6	Address 3	SINGAPORE 650134
Address 4		Address Type	Singapore address	Post Code	650134
Unit No.		Related Policy Number	5106931510		

 Insured Object: SLM754Y

 Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content

Continue

Cancel

Accident MT/1043059

+ Exit

Policyholder Mailing Address

Modification History

Claim 001 New

Claim Type *	OD-MD	Insured Name	LJM WEI BIAO	Insured NRIC	S8830507H
Contact No.(Mobile)	81714022	Contact No.(Home)	NIL	Contact No.(Office)	
Email Address	Ryan-Professional@yahoo.com	OT Vehicle Number	SLM754Y	TP Vehicle Number	S1Z2356E
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select		
Claimant Name *	22	Claimant NRIC *			
Claimant Address					
Claim Description	SLM754Y / S1Z2356E ON 6 May 2019				
Preferred Workshop Contact No.		Name of Preferred Workshop			
Require Finalisation	Yes	Insured Liability *	Fully at Fault		
Date Registered	06/05/2019 12:16	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Report Taken By	Jackson	Claim Close Date		Date Received	06/05/2019 00:00
☒ Print AK letter				OD Excess Collected by Workshop	

Attachment

Accident No.	MT/1043059	Claim No.	001
Last Doc. Received	☒ Yes ☐ No	Upload Date	06/05/2019 12:18

Path *	Category *	Confidential	Urgency *	Description *
Browse... Clear	Please Select Clear	NO	Normal	
Browse... Clear	Please Select Clear	NO	Normal	
Browse... Clear	Please Select Clear	NO	Normal	
Browse... Clear	Please Select Clear	NO	Normal	

☐ Send Message

▼ Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	Action
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) CES) on 06 May 2019 12:18	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-5-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) CES) on 06 May 2019 12:18	SAS	Normal	SAS 2019-5-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) CES) on 06 May 2019 12:17	Photos	Normal	Photos 2019-5-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) CES) on 06 May 2019 12:17	Photos	Normal	Photos 2019-5-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) CES) on 06 May 2019 12:17	Photos	Normal	Photos 2019-5-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) CES) on 06 May 2019 12:17	Photos	Normal	Photos 2019-5-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) CES) on 06 May 2019 12:17	Photos	Normal	Photos 2019-5-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) CES) on 06 May 2019 12:17	Photos	Normal	Photos 2019-5-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) CES) on 06 May 2019 12:17	Photos	Normal	Photos 2019-5-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) CES) on 06 May 2019 12:16	Photos	Normal	Photos 2019-5-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) CES) on 06 May 2019 12:16	Photos	Normal	Photos 2019-5-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) CES) on 06 May 2019 12:16	Photos	Normal	Photos 2019-5-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) CES) on 06 May 2019 12:16	Photos	Normal	Photos 2019-5-6		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) CES) on 06 May 2019 12:16	Photos	Normal	Photos 2019-5-6		Edit

▼ Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
Display in New Window Scan and uploading				

ASSIGNMENT (IDAC)

COE Expired: 11 Dec 2028

By CSO- Nature of Accident:

- 1) Vehicle hit Vehicle: 2) Vehicle hit ??
- a) Motorcar () a) Pedestrian ()
- b) M/cycle () b) Animal ()
- c) Bicycle ()
- 3) Vehicle hit Road Side Objects:
- a) Govn. Property () b) Road Work Object ()
(Eg: signboard, barrier, tree etc)
- c) Private Property ()
- 4) Vehicle drop into drain ()
- 5) Damage due to Act of God:
- a) Fallen Object () b) Flood ()
- c) Other, _____
- 6) Parked & Found Damaged:
- a) Vandalism () b) Hit by Moving Object ()
- 7) Theft Case
- a) Stolen () b) Damage found ()
when recovered.
- 8) Fire
- a) Whilst driving () b) Parked ()
- 9) Accident date more than 24hrs ()

Remarks for internal informationRemarks to appear in Works Order & Assessment report

- 1) Potential Total Loss ()
- 2) SRS Light on ()
- 3) ABS Light on ()

By Assessor- 1) Vehicle Information

Veh No: SLM 754Y Yr Regn: 12 Dec 2008

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / MPV
/ Truck / Trailer or

Make & Model: MB C180K C.C. 1796

Colour: White Transmission Type: Auto / Manual

Eng/No: _____ Sp. Reading: 183694

C/No: WDD204 046 2A 223208

Gen. Cond: Good / Fair / Poor / Burnt or

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 225/45 R17
R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or

Front		Rear	
R/Bal.	<u>5</u> mm	R/Bal.	<u>5</u> mm
L/Bal.	<u>5</u> mm	L/Bal.	<u>5</u> mm

Parallel Import: Yes / No

Towed-In: Yes / No

Repair Type: LS / I.B.I

Towing Required: Yes / No

No of Repair Days: 6

Vehicle in Idac: Yes / No

D.O.I. 6/5/2019

Time: 3.05pm

By Assessor- 2) Comments

1) Damages not due to recent accident.

2) Damages do not seem hit onto:

- a. Vehicle () b. Motorcycle () c. Bicycle () d. Pedestrian ()
- e. Animal () f. Govn Object () g. Road Work Object ()
- h. Private Property () i. Drain () j. Road Kerb/Grass Verge ()

3) Vehicle does not seem damaged as a result of:

- a. Fallen Object () b. Flood () c. Vandalism () d. Fire ()
- e. Moving Object () f. Stolen () g. Stolen & Recovered ()

Time Started:

Time completed:

1) CSO

2) ASS

3) Entire Operation Completed Time:

Front Porch

NAC	INC	Item	CON	ACQ
1001	991886	Frt Number Plate	CRA	✓
1002	991887	Frt Number Plate Base		
1003	991889	Frt Number Plate Garnish		
1004	991300	Frt Bumper	CRA	✓
1005	992341	Frt Bumper Clips	NEC	✓
1006	991325	Frt Bumper Bracket		
1007	991462	Frt Bumper Side Retainer		
1008	991433	Frt Bumper Reinforcement	015	✓
1009	991318	Frt Bumper Beam	59	✓
1010	991468	Frt Bumper Sponge		
1011	991427	Frt Bumper Protector	(RE)	✓
1012	991420	Frt Bumper Pad		
1013	991363	Frt Bumper Grille		
1014	991301	Frt Bumper Moulding	NEC	✓
1015	991407	Frt Bumper Lower Spoiler		
1016	991438	Frt Bumper Sensor		
1017	995100	Frt LH Bumper Fog Lamp Cover		
1018	991355	Frt RH Bumper Fog Lamp Cover		
1019	995079	Frt LH Bumper Fog Lamp		
1020	995080	Frt RH Bumper Fog Lamp		
1021	991793	Frt Grille	CRA	✓
1022	991328	Frt Grille Emblem	CRA	✓
1023	991799	Frt Grille Chrome Moulding		
1024	991222	Frt Apron Panel		
1025	992013	Frt Support Panel		
1026	992025	Frt Support Panel Top Garnish Cover		
1027	992416	Horn		
1028	991277	Frt Brace Panel		
1029	995153	Frt LH Headlamp Assy		
1030	991821	Frt RH Headlamp Assy	CRA	✓
1031	995088	Frt LH Side Lamp		
1032	995089	Frt RH Side Lamp		
1033	990248	Bonnet	BUC	✓
1034	991328	Bonnet Emblem	NEC	✓
1035	990287	Bonnet Lock	JM	✓
1036	990285	Bonnet Insulator		
1037	990273	Bonnet Finge		
1038	990261	Bonnet Damper		
1039	990305	Bonnet Rubber		
1040	990252	Bonnet Cable		
1041	990311	Bonnet Stand		
1042	990119	Air Con Condenser	DD	✓
1043	990122	Air Con Fan Assy		
1044	990134	Air Con Suction Pipe (Low Pressure)		
1045	990118	Air Con Suction Hose		
1046	990133	Air Con Discharge Pipe (High Pressure)		
1047	990114	Air Con Discharge Hose		
1048	990149	Air Con Liquid Pipe		
1049	995066	Air Con Receiver Drier		
1050	990111	Air Con Compressor Assy		
1051	995294	Air Con Belt		
1052	995074	Radiator		
1053	992738	Radiator Cowling		
1054	992742	Radiator Fan Assy		
1055	992745	Radiator Fan Clutch		
1056	992758	Radiator Hose Top		
1057	992757	Radiator Hose Bottom		
1058	992741	Radiator Expansion Tank		
1059	990151	Air Duct		
1060	990070	Air Cleaner Assy		
1061	990056	Air Cleaner Hose		
1062	990089	Air Cleaner Resonator		
1063	991712	Frt Exhaust Manifold		
1064	991713	Frt Exhaust Manifold Cover		
1065	991054	Frt Exhaust Manifold Sensor (Oxygen)		
1066	991714	Front Exhaust Pipe		
1067	990219	Battery		
1068	990224	Battery Cover		
1069	990223	Battery Bracket		
1070	990229	Battery Tray		

No of Images:

As a result,

Vehicle No: SLM 754 Y

NAC	INC	Item	CON	AC	Qty
1071	992205	Fuse Box			
1072	994011	Relay Box			
1073	995053	Wiper Washer Tank			
1074	995052	Wiper Washer Tank Motor			
1075	990159	Alternator Assy			
1076	990160	Alternator Belt			
1077	992688	Power Steering Pump			
1078	992669	Power Steering Belt			
1079	994431	Power Steering Cooler Pipe			
1080	992692	Power Steering Hose			
1081	990010	ABS Pump Control Unit			
1082	990427	Brake Master Pump Assy			
1083	990403	Brake Booster Pump Assy			
1084	991005	Engine Top Cover			
1085	991011	Engine Under Cover			
1086	990946	Engine Mounting			
1087	990949	Engine Mounting Frt			
1088	990950	Engine Mounting LH			
1089	990952	Engine Mounting RH			
1090	990951	Engine Mounting Rear			
1091	992234	Gear Box Mounting			
1092	991520	Frt LH Chassis Member			
1093	991520	Frt RH Chassis Member			
1094	990728	Frt Vertical Cross Member			
1095	991863	Frt Lower Cross Member			
1096	995070	Frt LH Fender			
1097	995072	Frt LH Fender Inner Panel			
1098	995147	Frt LH Fender Lamp			
1099	995148	Frt LH Fender Protector			
1100	991740	Frt LH Fender Inner Shield			
1101	995179	Frt LH Mudflap			
1102	995170	Frt LH Wheel Rim			
1103	994025	Frt LH Rim Cover			
1104	995065	Frt LH Tyre			
1105	995071	Frt RH Fender			
1106	991739	Frt RH Fender Inner Panel			
1107	991744	Frt RH Fender Lamp Emblem			
1108	991752	Frt RH Fender Protector			
1109	991740	Frt RH Fender Inner Shield			
1110	991884	Frt RH Mudflap			
1111	992087	Frt RH Wheel Rim			
1112	994025	Frt RH Rim Cover			
1113	995065	Frt RH Tyre			
1114	992093	Frt Windscreen Glass			
1115	992117	Frt Windscreen Rubber			
1116	992108	Frt Windscreen Moulding			
1117	992098	Frt Windscreen Sealant			
1118	991019	ERP Bracket			
1119	991020	ERP Unit			
1120	992140	Frt Wiper Arm			
1121	992142	Frt Wiper Blade			
1122	995045	Wiper Panel Garnish			
1123	991126	Firewall Panel			
1124	990753	Dashboard Assy			
1125	992282	Glove Box Cover			
1126	992281	Glove Box Compartment			
1127	994483	Steering Wheel Airbag			
1128	994485	Steering Wheel Airbag Sensor			
1129	990749	Dashboard Airbag			
1130	990750	Dashboard Airbag Sensor			
1131	990029	Airbag Control Unit			
1132	990864	Frt Driver Seat			
1133	991922	Frt RH Seat Belt Assy			
1134	991899	Frt Passenger Seat			
1135	995182	Frt LH Seat Belt Assy			
1136	990247	Sticker			

Claim Handling

Task Transfer Exit

Accident MT/1043059

IDK SAL SUB

Policy No.	S106931510	Vehicle No.	SLM754Y	GST Registration No.	
Certificate No.					
Policyholder Name	LIM WEI BIAO	Cover Type	drivo CLASSIC	Policyholder NRIC	S8830507H
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)	0	Loading	0
Contact No.(Mobile)	87775736	Special Remark		Contact No.(Home)	0
Email Address		TCA	☒ No ☐ Yes	eCode	
KFK	☒ No ☐ Yes	NCD Entitlement(%)	40	eCode Reason	
NCD Protection	No			Private Hire	No

Accident Details

Report Date	06/05/2019 12:13	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	06/05/2019	Time of Accident (hh:mm)	07:30	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	ICM No.	
Accident Location	PIE (CHANGI) BEFORE EXIT 17D				

Excess

Own damage Excess	500.00	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 134 #12-44D	Address 2	BUKIT BATOK WEST AVENUE 6	Address 3	SINGAPORE 650134
Address 4		Address Type	Singapore address	Post Code	650134
Unit No.		Related Policy Number	S106931510		

OI Driver Info

Driver Name	LIM WEI BIAO	Driver Type	Main Driver	Driver DOB	16/08/1988
Unnamed driver Name		Driver NRIC	S8830507H	Driving Experience	6
Register Date of Driver License	07/12/2012	Driver Age	30	Contact No.(Home)	0
Contact No.(Mobile)	87775736	Contact No.(Office)	0	Address 3	WEST CREST @ BUKIT BATOK
Address 1	BLK 445A	Address 2	BUKIT BATOK WEST AVENUE 6	Post Code	651445
Address 4	SINGAPORE 651445	Address Type	Singapore address		
Unit No.	13-423				
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	☐ Yes ☒ No
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Modification history

Investigation

Claim 001 OD-MD

Claim Case Officer Yap Chee Ling

IDK SAL SUB

Claim Type	OD-MD	Insured Name	LIM WEI BIAO	Insured NRIC	S8830507H
Contact No.(Mobile)	81714022	Contact No.(Home)	NIL	Contact No.(Office)	
Email Address	Ryan-Professional@yahoo.com.sg	OI Vehicle Number	SLM754Y	TP Vehicle Number	S1Z2356E
Claimant Type		Type of Benefit			
Claimant Name		Claimant NRIC			
Claimant Address					
Claim Description	SLM754Y / S1Z2356E ON 6 May 2019	Name of Preferred Workshop			
Preferred Workshop Contact No.		Insured Liability	Fully at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	06/05/2019 12:19	Claim Close Date		Date Received	06/05/2019 00:00
Report Taken By	Jackson	Workshop Repairer		Total Loss but Repaired	
☒ Print AK letter				OD Excess Collected by Workshop	

Modification history

Special Claim Creation Approval

Approval	Reason
Remarks	

damage assessment Attachment

Vehicle Info

Vehicle Make	MERCEDES BENZ	Vehicle Model	C160K	Engine Capacity	
Date of Registration	12/12/2008	Classis No.	WDD2040462A23208		
Towing Required *	☒ Yes ☐ No	Vehicle in IDAC *	☒ Yes ☐ No	Parallel Import *	☐ Yes ☒ No

Type of Tender * Assessor Name * Survey Current Status

IDAC/Workshop Name IDAC/Workshop Location Total Loss * ☐ Yes ☒ No

Windscreens Parts & Labour Cost Scrap Value(\$) Economical Repair Value(\$)

Market Value(\$)

Remark: NO. OF REPAIR DAY: 6 DAYS. 1 X FRT BUMPER LOWER SPOILER - UNCONFIRM. 1 X FRT SUPPORT PANEL TOP GARNISH COVER - UNCONFIRM. 1 X AIR CON SUCTION PIPE (LOW PRESSURE) - UNCONFIRM. 1 X AIR CON DISCHARGE PIPE (HIGH PRESSURE) - UNCONFIRM. 1 X AIR CON LIQUID PIPE - UNCONFIRM. 1 X FRT RH FENDER EMBLEM - REPLACE.

Remark for Supplementary

Damage Listing

Find a Part	No.	Part No.	Description	Qty *	Repair Code *	
Not Applicable	1	32200201	NUMBER PLATE BASE (FRONT)	1	Replace	☒
ABS	2	16000101	BUMPER (FRONT)	1	Replace	☒
ABSORBER	3	16002401	BUMPER CLIPS (FRONT)	8	Replace	☒
ACCELERATOR	4	16005101	BUMPER RETAINER (FRONT LEFT)	1	Replace	☒
ACTUATOR	5	16005102	BUMPER RETAINER (FRONT RIGHT)	1	Replace	☒
ADVERTISEMENT STICKER	6	16005001	BUMPER REINFORCEMENT (FRONT)	1	Replace	☒
AIR BAG	7	16005901	BUMPER SPONGE (FRONT)	1	Replace	☒
AIR BLOWER	8	27100101	GRILLE (FRONT)	1	Replace	☒
AIR BOX	9	27101001	GRILLE MOULDING (FRONT)	1	Replace	☒
AIR CHAMBER BOX	10	16002901	BUMPER FOG LAMP COVER (FRONT LEFT)	1	Unconfirm	☒
AIR CLEANER	11	16002902	BUMPER FOG LAMP COVER (FRONT RIGHT)	1	Unconfirm	☒
AIR COMPRESSOR	12	16002701	BUMPER FOG LAMP (FRONT LEFT)	1	Unconfirm	☒
AIR CON	13	16002702	BUMPER FOG LAMP (FRONT RIGHT)	1	Unconfirm	☒
AIR CON (VAN)	14	16003201	BUMPER GRILLE (FRONT)	1	Unconfirm	☒
AIR COOLER	15	27100801	GRILLE EMBLEM (FRONT)	1	Replace	☒
AIR DISTRIBUTOR	16	41300101	SUPPORT PANEL (FRONT)	1	Unconfirm	☒
AIR FILTER	17	27700101	HEAD LAMP (LEFT)	1	Unconfirm	☒
AIR FLOW	18	27700102	HEAD LAMP (RIGHT)	1	Replace	☒
AIR GRILLE	19	149001	BONNET	1	Replace	☒
AIR HORN	20	149016	BONNET EMBLEM	1	Replace	☒
AIR INTAKE	21	14903401	BONNET LOCK (LOWER)	1	Replace	☒
AIR RESONATOR BOX	22	149041	BONNET RUBBER (CENTRE)	1	Unconfirm	☒
AIR THROTTLE BODY AND SENSOR	23	112023	AIR CON CONDENSER	1	Replace	☒
ALARM	24	344001	RADIATOR	1	Unconfirm	☒
ALTERNATOR	25	344005	RADIATOR COWLING	1	Unconfirm	☒
ALUMINIUM PANEL - SIDE	26	344008	RADIATOR FAN	1	Unconfirm	☒
AMPLIFIER	27	344011	RADIATOR FAN CLUTCH	1	Unconfirm	☒
ANTENNA	28	338007	POWER STEERING COOLER PIPE	1	Unconfirm	☒
ANTI ROLL	29	25400103	FENDER (FRONT RIGHT)	1	Replace	☒
APRON						
ARCH						
ARM REST						
ASH TRAY						
AUTO CLUTCH						
AUTO COOLER PIPE						
AUTO CRUISE MOTOR						
AUTO TRANSMISSION						
AXLE						
BACK REST (WC)						
BACK SEAT						
BALANCER						
BATTERY						
BEADING (WC)						

Save Submit

LKK Paya Ubi

From: Yap Chee Ling <CheeLing.Yap@income.com.sg>
Sent: Tuesday, 7 May 2019 2:25 PM
To: 'YT(KB)'; YT(HQ); LKK Paya Ubi
Subject: SLM754Y | MT/1043059 (Awarding Letter to Yew Tee Auto)
Importance: High

Hi IDAC and Yew Tee Auto,

Vehicle is currently with IDAC.

Excess of \$600 is applicable.

Please liaise with the owner – Mr Lim Wei Biao at tel: 8777 5736 on the necessary and to let him know where the vehicle will be towed to.

Thank you.

Yap Chee Ling (Ms)
Executive
Motor Insurance
T +65 6430 7893
www.income.com.sg



At Income, we are 'In with You' on Performance, Growth, Innovation and Impact. These attributes reflect what we promise as an employer and what we want our people to exemplify.
Find out more at Income.com.sg/careers

in with you

Our Ref: MT/CA/OD/051/1043059-001/YCL

07 May 2019

YEW TEE AUTOMOBILE TECH PTE LTD
399F WOODLANDS ROAD
SINGAPORE 678006
YEW TEE IND EST

Dear Sir

CLAIM NUMBER: MT/1043059-001
REPAIR OF VEHICLE NUMBER: SLM754Y

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

Award Date: 07 May 2019

Make: MERCEDES BENZ

Model: C180K

Estimated Repair Days: 7

Location: NATIONAL ASSESSMENT CENTRE SERVICES

Address: 51 UBI AVENUE 1 #01-25 PAYA UBI INDUSTRIAL PARK SINGAPORE 408933

Benefits: Not applicable

Excess Applicable: 600

Please note that supplementary items will not be allowed.

If you have any queries, please contact Yap Chee Ling at 6430-7893 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.



**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: SCM 7544 Date In: _____ Time In: _____ with Keys: Yes / No

For Office use

Attended by: _____

Workshop Collection of Vehicle

Workshop: YEW TEE

Collection Date: 07/05/19 Time: 1600hr with Keys: Yes / No

Tow Truck No: YAN 4005A Tow Man: PANG NRIC: 57989090

Signature: [Signature]

For office use

Attended by: _____

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: _____