

NATIONAL Assessment Centre Services

Date In: 07/05/2019 13:29	Job description	Date & Time Completed	Done by
Ref No: NA/INC19008043/K4	SAS e-filing		
Veh No: SKD 5410R	E-mail (within 8hrs, A/C 2hrs)		
D.O.A: 01/05/2018 02:15	i-Motor Claim Form	MT/1043448-001	8/5/19/10:02
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: Kerv	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
18/6/18/10:32AM	Have E-mail to OD claim for the outcome. ? NTUC (Zuraimie reply) (For Year Action)
18/6/19/15:40	Call NTUC Mr Clearance inform they have to wait for the Court to give green light and the owner pass away and I have inform the vehicle was here from 7/5/19. After Court as given letter than we can clear the cases.
18/6/2019	E-mail to NTUC to Zuraimie and reply on 18/6/19 @ 4:26 PM ✓ ok

Claimant's Particulars :-	Invoice Preparation Checklist	Ant (\$) 1st Bill	Ant (\$) 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		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2009)		
	6) TR: Re-inspection \$75		
	7) N1: Idue DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON*		
	*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 (N-a INC) against INC \$20		
	9) N12: Idue Mobile 30		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	



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: SKD540R Date In: _____ Time In: _____ with Keys: Yes / No

For Office use

Attended by: _____

Workshop Collection of Vehicle

Workshop: Hua Hong

Collection Date: 08/11/19 Time: 10:30 AM with Keys: Yes / No

Tow Truck No: 207198L Tow Man: Li Qiang NRIC: 57368763B

Signature: X.

For office use

98892478

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: _____

LKK Paya Ubi

From: Teng Ken Leong <kenleong.teng@income.com.sg>
Sent: Monday, 24 June 2019 11:08 AM
To: Jonathan Tan (Hua Hong)
Cc: Hua Hong Pte Ltd (Tender); Adele Koh (Hua Hong); NAC Paya Ubi; Daniel Koh; Annie Koh; Cynthia Ang; Teng Ken Leong
Subject: Vehicle No SKD5410R - Successful Tender for Wreck Vehicle

Our Ref: MT/CA/OD/077/1043448-001/ZBM/TKL

24 Jun 2019

HUA HONG PTE LTD
25D SUNGEI KADUT STREET 1
SINGAPORE 729332

Dear Sir

CLAIM NUMBER: MT/1043448-001
VEHICLE NUMBER: SKD5410R

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

Award Date: 24 Jun 2019
Make: MITSUBISHI
Model: LANCER EX
Location: NATIONAL ASSESSMENT CENTRE (PAYA UBI)
Address:

If you have any queries, please contact Zuraimee Bin Mantau at 64307881 or email us at motor@income.com.sg.

Yours sincerely
Jenny Pe
Deputy Vice President
Motor Insurance

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LKK Paya Ubi

From: Clarence Richard Anthony <clarence.anthony@income.com.sg>
Sent: Monday, 8 July 2019 11:34 AM
To: LKK Paya Ubi
Subject: RE: VEH NO: SKD 5410R OWN DAMAGE MT/1043448

Hi Shan Hui

Pls hold first. If the claim is repudiated, the cost will have to be billed to the insured's next of kin.

Regards

Clarence Anthony
Manager
Motor Insurance
T +65 6430 7877
www.income.com.sg



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in with you

From: LKK Paya Ubi [<mailto:rspu@lkkauto.com>]
Sent: 8 July, 2019 11:33 AM
To: Clarence Richard Anthony <clarence.anthony@income.com.sg>
Subject: RE: VEH NO: SKD 5410R OWN DAMAGE MT/1043448

Hi Clarence,

As management instruction, we will bill the storage fees from 01of june till now, per day \$20.

Thanks

Best Regards,

Shan Hui | Admin

National Assessment Centre Services (LKK Group)

Phone: 6841-0055 | email: rspu@lkkauto.com | fax: 6841-6315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Clarence Richard Anthony [<mailto:clarence.anthony@income.com.sg>]
Sent: Saturday, 6 July 2019 9:00 AM
To: LKK Paya Ubi
Subject: RE: VEH NO: SKD 5410R OWN DAMAGE MT/1043448

Hi Shan Hui

The policyholder's (deceased) wife is not co-operative and is not providing the necessary documents to get this total loss claim moving.

In view of this, we will escalating this case to our management for a decision.

We will keep you updated.

Regards

Clarence Anthony
Manager
Motor Insurance
T +65 6430 7877
www.income.com.sg



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From: LKK Paya Ubi [<mailto:rspu@lkkauto.com>]
Sent: 5 July, 2019 11:46 AM
To: Clarence Richard Anthony <clarence.anthony@income.com.sg>
Subject: VEH NO: SKD 5410R OWN DAMAGE

Hi Clarence,

Above mentioned total loss veh SKD5410R, Understand that the veh already awarded to Hua Hong Pte Ltd on 24 Jun 2019, but I try to call the workshop on yesterday for tow out the veh from our premises due to my boss mentioned the veh already put so long on our premises otherwise he will take action for charging the storage fees per day. Thru the phone communication, Hua Hong Pte Ltd mentioned got some issue with this veh so she ask me to clarify with NTUC. May I know the status for this veh so that I can feed back to my boss. Thanks

Best Regards,

Shan Hui | Admin

National Assessment Centre Services (LKK Group)

Phone: 6841-0055 | email: rspu@lkkauto.com | fax: 6841-6315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



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LKK Paya Ubi

From: Zuraimee Bin Mantau <zuraimee.mantau@income.com.sg>
Sent: Tuesday, 18 June 2019 4:26 PM
To: LKK Paya Ubi
Cc: Clarence Richard Anthony
Subject: RE: REGARDING VEHICLE NO: SKD5410R / CLAIM NO: MT/1043448-001 /

Dear NAC Paya Ubi

We noted on your concern to the vehicle condition.

However, we would appreciate if you will allow the vehicle to be at your premises till next week before we can appoint a wreck buyer.

Furthermore, the deceased spouse has yet to come back for any update on the LOA.

Your co-operation and utmost understanding is greatly appreciated.

Sincerely

Zuraimee Bin Mantau
Senior Executive
Motor Insurance
T +65 6430 7891
www.income.com.sg



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Find out more at income.com.sg/careers

in with you

From: LKK Paya Ubi [mailto:rspu@lkkauto.com]
Sent: Tuesday, 18 June 2019 4:02 PM
To: Zuraimee Bin Mantau
Subject: REGARDING VEHICLE NO: SKD5410R / CLAIM NO: MT/1043448-001 /

Hi

We would like to inform you that we will charges for the storages at idac ubi from date of 07/05/2019 for vehicle no : SKD5410R and please arrange wants the administrative matters from the court has been settled and pls send the expected outcome asap.

Thank You

Krishnasamy (Admin)
Ubi Idac

From: Zuraimee Bin Mantau [<mailto:zuraimee.mantau@income.com.sg>]
Sent: Tuesday, 18 June 2019 11:28 AM
To: LKK Paya Ubi <rspu@lkkauto.com>
Cc: Clarence Richard Anthony <clarence.anthony@income.com.sg>
Subject: RE: REGARDING : VEHICLE NO: SKD5410R / MT/1043448-001 / OD / TOTAL LOSSES /

Dear NAC Paya Ubi

We are awaiting for the outcome from the deceased spouse to provide the Letter of Administration for the claim matters.

No settlement has been reached. No reply update from the spouse also.

The vehicle finance company has been updated the same.

Regards

Zuraimee Bin Mantau
Senior Executive
Motor Insurance
T +65 6430 7891
www.income.com.sg



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Find out more at Income.com.sg/careers

in with you

From: LKK Paya Ubi [<mailto:rspu@lkkauto.com>]
Sent: Tuesday, 18 June 2019 10:52 AM
To: ODsupport <ODsupport@income.com.sg>
Subject: REGARDING : VEHICLE NO: SKD5410R / MT/1043448-001 / OD / TOTAL LOSSES /

Hi

May I know the expected outcome of this vehicle no: SKD5410R / Claim no: MT/1043448-001 / and the vehicle was tow in at idac on the 07/05/2019 and may I know the outcome.

Thank You,

Krishnasamy (Admin)

NATIONAL ASSESSMENT CENTRE SERVICES
51 Ubi Ave 1, #01-25, Paya Ubi Industrial Park,
Singapore 408933 Tel: 68410055 Fax : 68416315



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LKK Paya Ubi

From: ODsupport <ODsupport@income.com.sg>
Sent: Tuesday, 18 June 2019 11:22 AM
To: LKK Paya Ubi; Zuraimee Bin Mantau
Subject: RE: REGARDING : VEHICLE NO: SKD5410R / MT/1043448-001 / OD / TOTAL LOSSES /

Hi Zuraimee,

For your action.

Warmest Regards

Annie Koh
Senior Admin,
Motor Insurance
T +65 64307899
www.income.com.sg



From: LKK Paya Ubi [mailto:rspu@lkkauto.com]
Sent: Tuesday, 18 June 2019 10:52 AM
To: ODsupport <ODsupport@income.com.sg>
Subject: REGARDING : VEHICLE NO: SKD5410R / MT/1043448-001 / OD / TOTAL LOSSES /

Hi

May I know the expected outcome of this vehicle no: SKD5410R / Claim no: MT/1043448-001 / and the vehicle was tow in at idac on the 07/05/2019 and may I know the outcome.

Thank You,

Krishnasamy (Admin)

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51 Ubi Ave 1, #01-25, Paya Ubi Industrial Park,
Singapore 408933 Tel: 68410055 Fax : 68416315



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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	07/05/2019 13:29
Date Of Accident	01/05/2018 02:15
Exact Location Of Accident	EAST COAST PARKWAY TWDS AIRPORT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKD5410R
Insured/Policyholder	
Name Of Registered Owner	LOH YUAN HAN
NRIC No	S8814149J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93840216
Alternative Phone No	OTHERS-93840216

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER EX
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	5094110018
Cover Note Number	

Driver

Name of Driver	LOH YUAN HAN
NRIC No	S8814149J
Date Of Birth	01/05/1988
Occupation	INDOOR
Date Of Driving Pass	09/12/2013
Driving Experience	4 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93840216
Fax Number	
Contact Number	OTHERS-93840216
Email Address	NOEMAIL

Address	BLK 10A BENDEMEER ROAD #13-107
Postcode	331010
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 - MAJOR/MINOR RD
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?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	NO
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	KOLAM AYER NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 72 GEYLANG BAHRU #01-3038 , POSTCODE: 330072 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2969999 - FAX NO: 62937659
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : A/20180509/2163

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 INJURED PERSON 1

Name	LOH YUAN HAN
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SKD5410R
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
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: 7/5/19

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

SKETCH PLAN

NO IDEA WHAT HAPPEN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

pls refer to the police Report
A/20180509/2163

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: 7/5/19

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Reported on 7/5/2019
@ 1320HRS.

ACCIDENT STATEMENT

ACCIDENT DATE: 01/5/2018 (DD/MM/YYYY), TIME: 02:15 AM (HH:MM)

LOCATION: East Coast Parkway to Airport

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SKD 5410 R
b) INSURANCE COMPANY: _____
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: _____
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: _____ (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: _____ (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: 93840216
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) OWNER
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

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

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: Kerb MODEL: _____
b) DRIVER'S NAME: _____
c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

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

* No of passengers
(Including driver)
(1)

* No of passengers
(Including driver)
()

* No of passengers
(Including driver)
()

Vehicle tow
in to Idae.
for
Total losses Email =
no key given fax =
VIDE.O =
OK



**SINGAPORE
POLICE FORCE**



A/20180509/2163

1 of 2

POLICE REPORT (NP322)

Report No. A/20180509/2163

Police Station Of Origin
Kolam Ayer NPP
72 Geylang Bahru #01-3038 SINGAPORE
330072
Tel No: 1800-2969999

Date/Time Report Made 09/05/2018 18:54	Vide Report No. A/20180504/2079	Station Diary No. 27	
Name Of Informant MINDY HUANG YINGJIA	Address APT BLK 10A BENDEMEER ROAD #13-107 SINGAPORE 331010		
ID Type / ID No. NRIC NO / S8700702B	Contact No. Home/Office	Mobile 9384 0216	
Nationality SINGAPORE CITIZEN	Email Address		
Occupation After-sales adviser / Client account service executive	Sex Female	Age 31	Date of Birth 20/01/1987
Institution/School Name	Race Chinese		
Date/Time Of Incident 01/05/2018 02:15	Location Of Incident EAST COAST PARKWAY SINGAPORE East Coast Parkway towards Airport		

Brief details.

On 01/05/2018 vide report A/20180504/2079, my husband was driving his car and he was involved in an accident along East Cost Parkway. The car was towed back to Traffic Police (TP) compound.

As I had my passport in the said car, TP officials mentioned that they could not find my passport as the car was a total wreck.

Signature Of Officer Recording The Report:

A / Sgt 2 MUHAMMAD ALIF ABDULLAH

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
A / Central Police Divisional Investigation Branch /
ASP BERNICE LOW XIAO TING
Contact No.: 6557 5076

Signature Of Informant:

Date/Time:
09/05/2018 18:54

Classification Of Case:

Authentication Stamp



Singapore Police Force

FUPO hotline number: 68429645



**SINGAPORE
POLICE FORCE**



A/20180509/2163

2 of 2

POLICE REPORT (NP322)

CONTINUATION OF REPORT

Report No. A/20180509/2163

As such I am lodging this report to replace my said passport.

Property Information								
S/N	Item	Type	Brand/ Account/ Property/ Security- Type	Make/ Model/ Bank/ Address/ Counter	Serial No./ IMEI/ Acct No.	Quantity	Value	Description
1	Passport	Lost				1		SINGAPORE

Signature Of Officer Recording The Report:

A / Sgt 2 MUHAMMAD ALIF ABDULLAH

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
A / Central Police Divisional Investigation Branch /
ASP BERNICE LOW XIAO TING
Contact No.: 6557 5076

Authentication Stamp

Signature Of Informant:

Date/Time:
09/05/2018 18:54

Classification Of Case:

FUPO hotline number: 68429645

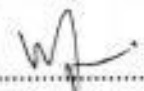


Driver

REPUBLIC OF SINGAPORE
CERTIFICATE OF REGISTRATION OF DEATH

DEATH REGISTRATION NO

273745J

DECEASED	Death registered at		FORENSIC MEDICINE DIV, HEALTH SCIENCES AUTHORITY			
	Full name of deceased		LOH YUAN HAN			
	NRIC/Identification Document No.		S8814149J		Sex	MALE
	Race/Dialect Group		CHINESE/CANTONESE		Nationality	SINGAPORE CITIZEN
	Home Address		APT BLK 10A BENDEMEER ROAD #13-107 SINGAPORE 331010		Date of birth	01/05/1988
	Place or Address where death occurred		EAST COAST PARKWAY EXPRESSWAY TOWARDS AIRPORT, 3.5KM, LP 447F		Country/Place of birth	SINGAPORE
CAUSE OF DEATH BY CERTIFIER	I		(a) MULTIPLE INJURIES		Date and hour of death	
	Disease or Condition leading to death				01/05/2018 0214	
	(b)				Approximate interval between onset and death	
	Antecedent Causes				Years Months Days Hours	
	(c)					
	II					
	Other Significant conditions					
Name and official status of person certifying cause of death		DR CHAN SHIHIA, CONSULTANT FORENSIC PATHOLOGIST		Certificate of Cause of Death Reference No.: 1851-02541 Date: 01/05/2018		
INFORMANT	Name		MINDY HUANG YINGJIA		I certify that the above information given by me is correct.	
	Address		APT BLK 10A BENDEMEER ROAD #13-107 SINGAPORE 331010		 01 MAY 2018 Informant's Signature/Thumb impression Date	
	NRIC/Identification Document No.		S8700702B			
	Relationship		WIFE			
REGISTRATION OFFICER	Name of Registration Officer		MUTHMAINNAH BINTE DAILAMI		 for Registrar of Births and Deaths	
	Designation		REGISTRATION OFFICER			
	Date		01/05/2018			

For LKK/NAC Use Only

Informance by Wife



Driver

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8700702B**



Name
MINDY HUANG YINGJIA
黄 滢 家

Race
CHINESE

Date of birth
20-01-1987

Country/Place of birth
SINGAPORE

Sex
F

5538382

For LKK/NAC Use Only

REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number **S8814149J**

Name
LOH YUAN HAN

Birth Date **01 May 1988**

Issue Date **09 Dec 2013**

002354011J

For LKK/NAC Use Only

5538382



NRIC No. **S8700702B**



Date of issue
07-12-2015

APT BLK 30A CENDAMEER ROAD #13-147
SINGAPORE 331019

NRIC No: **S8700702B** Date: **07/02/2017**

For LKK/NAC Use Only

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

EFFECTIVE DATE

Class 1 Motor Cars < 3000kg with < 7 passengers, exclusive of the driver; and other motor vehicles > 2500kg 09 Dec 2013

NP 428A

For LKK/NAC Use Only



Copy
Entry No. 991239

THE REPUBLIC OF SINGAPORE
The Women's Charter (Chapter 353)

Certificate of Marriage

(Section 31)
The Marriage

between LOH YUAN HAN () S/PINK
(Bridegroom) SR8141491)
and MINDY HUANG YINGJIA () S/PINK
(Bride) SR700702B)
was solemnized by MDM KWEH BEE HWA ELISE
at REGISTRY OF MARRIAGES SINGAPORE on 31 MAY 2016
in the presence of
LOH WING CHEONG () S/PINK
(Witness) S1196614D)
and NG KOK GENE () S/PINK
(Witness) S1401066A)

and was registered by me at Registry of Marriages Singapore on 31 MAY 2016

MDM KWEH BEE HWA ELISE

Deputy Registrar of Marriages, Singapore

IF282587

REGISTRY OF MARRIAGES
SINGAPORE



THE SCHEDULE

Private Car Insurance Policy

This Policy sets out the terms of a contract between NTUC Income Insurance Co-operative Limited (INCOME) and you (the Policyholder named in the schedule to this Policy).

The statements, information and declaration provided by you at the time of proposal shall form the basis of this contract.

We (INCOME) will provide the insurance set out in this Policy in respect of events occurring during the Period of Insurance shown in the Schedule and any further period for which we may accept a renewal premium.

The provision of this Insurance is subject to:

1. any Endorsement specified as operative in the Schedule
2. the Conditions and General Exclusions of this Policy, and
3. the payment of the premium specified in the Schedule.

This Policy, the Schedule and the Certificate of Insurance are to be read together as one document.
GST Reg No. M4-0003030-8

Policy Number	: 5094110018		
The Policyholder	: LOH YUAN HAN		
	: BLK 10A #13-107		
	: BENDEMEER ROAD		
	: BENDEMEER LIGHT		
	: SINGAPORE 331010		
Period of Insurance	: 22 Oct 2017 To 21 Oct 2018		
Sum Insured	: Market Value of Insured Vehicle at Time of Loss		
Premium (inclusive GST)	: S\$1,319.71		
Interest Insured			
Cover Type	: drive CLASSIC		
Primary Driver	: LOH YUAN HAN		
Named Driver (1)	: N/A		
Named Driver (2)	: N/A		
Make/Model	: MITSUBISHI/LANCER EX	Capacity	: 2000cc
Registration Number	: SKD5410R	Registration Date	: 22 Apr 2010
Chassis Number	: JMF5MCY4AAU000253	Off-peak Car	: No
Repair at Owner's Preferred Workshop	: No	Insure with COE	: Yes
Excess (Section 1)	: S\$600	NCD Entitlement	: 10%
Excess (Section 2)	: N/A	NCD Protection	: No
Windscreen Excess	: S\$100		
Additional Excess	: N/A		
Unnamed Driver Excess	: Please refer to Terms and Conditions		
Hire Purchase Company	: HONG LEONG FINANCE LTD		
Optional Cover			
Transport Allowance	: No		
Excess Waiver	: No		

Memo A : N/A

Endorsement Operative : N/A

Agency : INSURANCE AGENCY (00000572538)
Date of Issue : 13 Sep 2017 15:59 hrs

DUTY OF DISCLOSURE

We would remind you that you must disclose to us, fully and faithfully, the facts you know or ought to know, otherwise you may not receive any benefit from your Policy.

Signed in Singapore by order of the Board of Directors

Chief Executive

Hello, NAC_PAYA_UBI_800601

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

Policy Query

Policy No.		Date of Accident:	01/05/2018 02:15
Vehicle No. (For Motor)	SKD5410R	Certificate Number	

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
☐	5094110018		LOH YUAN HAN	S88141493	GPC	drive CLASSIC	SKD5410R	SKD5410R	22/10/2017	21/10/2018

Policy Information

Policy No.	5094110018	Policyholder Name	LOH YUAN HAN	Policyholder NRIC	S8814149J
Certificate No.					
Address	BLK 10A #13-107 BENDEMEER ROAD BENDEMEER LIGHT SINGAPORE 331010				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	13/09/2017	Effective Date	22/10/2017 00:00	Expiry Date	21/10/2018 23:59
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		
Agent	I INSURANCE AGENCY	Agent Tel.	67026779	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

Policyholder Mailing Address

Address 1	BLK 10A #13-107	Address 2	BENDEMEER ROAD	Address 3	BENDEMEER LIGHT
Address 4	SINGAPORE 331010	Address Type	Singapore address	Post Code	331010
Unit No.	13-107	Related Policy Number	5094110018		

Insured Object: SKD5410R

Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
Continue Cancel				

Claim Handling

Accident MT/1043448

Policy No.	5094110018	Vehicle No.	SKD5410R	GST Registration No.
Certificate No.				
Policyholder Name	LOH YUAN HAN			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading
Contact No.(Mobile)	93840216	Contact No.(Office)	0	Contact No.(Home)
Email Address		Special Remark		eCode
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	10	Private Hire

▼ Accident Details

Report Date	08/05/2019 09:54	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	01/05/2018	Time of Accident hh:mm	02:15	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	EAST COAST PARKWAY TWDS AIRPORT			

▼ 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 104 #13-107	Address 2	BENDEMEER ROAD	Address 3
Address 4	SINGAPORE 331010	Address Type	Singapore address	Post Code
Unit No.	13-107	Related Policy Number	5094110018	

▼ 01 Driver Info

Driver Name	LOH YUAN HAN	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	S8814149J	Driver DOB
Register Date of Driver License	09/12/2013	Driver Age	30	Driving Experience
Contact No.(Mobile)	93840216	Contact No.(Office)	0	Contact No.(Home)
Address 1	BLK 104	Address 2	BENDEMEER ROAD	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	#13-107			
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.		Driver Insurer Code

Declaration

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

Modification History

Claim 001 OD-MD **NEW**

Claim Type *	OD-MD	Insured Name	LOH YU
Contact No.(Mobile)	96423113	Contact No.(Home)	848136
Email Address	yuanhan.loh@gmail.com	Vehicle Number	SKD541
Claim Description	SKD5410R / KERB ON 1 May 2018		
Preferred Workshop	Insured Liability	Partially at Fault	
Workshop No. Finalisation	Repair Option	Preferred Workshop, Name unknown	GIA report
Date Registered	08/05/2019 10:04	Claim Close Date	
Report Taken By		Workshop Repairer	
☒ Print AK letter			

Save Submit

Attachment



Accident No.	MT/1043448	Claim No.	001
Last Doc. Received	☒ Yes ☐ No	Upload Date	08/05/2019 10:00
Path *		Category *	Confidential
Choose File No file chosen		Clear Please Select	NO
Choose File No file chosen		Clear Please Select	NO
Choose File No file chosen		Clear Please Select	NO
Choose File No file chosen		Clear Please Select	NO
Choose File No file chosen		Clear Please Select	NO
Choose File No file chosen		Clear Please Select	NO
Message Read		Clear Please Select	NO

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Des
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 10:02	NRIC/ Driving License	Normal	NRIC/ Driving
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 10:02	NRIC/ Driving License	Normal	NRIC/ Driving
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 10:02	NRIC/ Driving License	Normal	NRIC/ Driving
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 10:00	SAS	Normal	SAS ;
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 09:59	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 09:59	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 09:59	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 09:59	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 09:59	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 09:59	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 09:59	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 09:59	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 09:59	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 09:58	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 09:58	Photos	Normal	Photos



Video List

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 09:58	Photos	Normal	Photos
NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 09:58	Photos	Normal	Photos
NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 09:58	Photos	Normal	Photos
NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 May 2019 09:58	Photos	Normal	Photos

Uploaded By/Date

Folder Date

File Name



Display in New Window

Scan and uploading

Claim Handling

Task Transfer Exit

Accident MT/1043448

LOS SAL SUB

Policy No.	5094110018	Vehicle No.	SKD5410R	GST Registration No.	
Certificate No.					
Policyholder Name	LOH YUAN HAN			Policyholder NRIC	S8814149J
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	93840216	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
KPK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	10	Private Hire	No

Accident Details

Report Date	08/05/2019 09:54	Accident Report Within 24 hrs	No	Accident Type	Collision - Major Minor Road
Date of Accident	01/05/2018	Time of Accident hh:mm	02:15	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	JCM No.	
Accident Location	EAST COAST PARKWAY TWDS AIRPORT				

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 10A #13-107	Address 2	BENDEMEER ROAD	Address 3	BENDEMEER LIGHT
Address 4	SINGAPORE 331010	Address Type	Singapore address	Post Code	331010
Unit No.	13-107	Related Policy Number	5094110018		

OI Driver Info

Driver Name	LOH YUAN HAN	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S8814149J	Driver DOB	01/05/1988
Register Date of Driver License	09/12/2013	Driver Age	30	Driving Experience	4
Contact No.(Mobile)	93840216	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 10A	Address 2	BENDEMEER ROAD	Address 3	
Address 4		Address Type	Singapore address	Post Code	331010
Unit No.	#13-107				
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
Modification History	08/05/2019 15:27 6025755 Modify Accident Report Within 24 hrs(Yes-->No)		

Investigation

Claim 001 OD-MD

Claim Case Officer Yap Chee Ling

Claim Type	OD-MD	Insured Name	LOH YUAN HAN	Insured NRIC	S8814
Contact No.(Mobile)	96423113	Contact No.(Home)	64813607	Contact No.(Office)	63371
Email Address	yuanhan.loh@gmail.com	OI Vehicle Number	SKDS410R	TP Vehicle Number	KER8
Claim Description	SKDS410R / KER8 ON 1 May 2018			Name of Preferred Workshop	
Preferred Workshop	GOBERG	Preferred Repair Option		Preferred Workshop Name	unknown
Insured Liability report	Partially at fault				
Date Registered	08/05/2019 10:05	Claim Close Date		Date Received	08/05/
Report Taken By		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



Accident No.	MT/1043448	Claim No.	001
Last Doc. Received	☒ Yes ☐ No	Upload Date	08/05/2019 17:14

Path *

Choose File No file chosen

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Message Read

Category *

Confidential

Urgency *

Clear	Please Select	NO	Normal
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Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 17:14	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 10:02	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 10:02	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 10:02	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 10:00	SAS	Normal	SAS 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 09:59	Photos	Normal	Photos 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 09:59	Photos	Normal	Photos 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 09:59	Photos	Normal	Photos 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 09:59	Photos	Normal	Photos 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 09:59	Photos	Normal	Photos 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 09:59	Photos	Normal	Photos 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 09:59	Photos	Normal	Photos 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 09:59	Photos	Normal	Photos 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 09:59	Photos	Normal	Photos 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 09:59	Photos	Normal	Photos 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 09:59	Photos	Normal	Photos 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 09:59	Photos	Normal	Photos 2019-5-8
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SER VICES) on 08 May 2019 09:59	Photos	Normal	Photos 2019-5-8

Figure 1 consists of six panels arranged vertically, showing the progression of a single cell from a single cell to a cluster of cells. The panels are labeled 1 through 6. Panel 1 shows a single cell. Panel 2 shows a cell with a small cluster of cells. Panel 3 shows a cell with a larger cluster of cells. Panel 4 shows a cell with a very large cluster of cells. Panel 5 shows a cell with a very large cluster of cells. Panel 6 shows a cell with a very large cluster of cells.

Photos 2019-5-8

Photos 2019-5-8

Photos 2019-5-8

Photos 2019-5-8

Photos 2019-5-8

Source

Scan and uploading

ASSIGNMENT (IDAC)

* Vehicle has been deregistered.

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) Govt 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 information

- Total lost due to very badly damaged.

Remarks 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: SKD 5410 R Vr Regn: - / -

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

Make & Model: Mit Lancer C.C. -

Colour: Dark Blue Transmission Type: Auto / Manual

Eng/No: _____ Sp. Reading: -

C/No: -

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

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 245/40 R18

R: -

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front: _____ Rear: _____

R/Bal. 6 mm R/Bal. 4 mm

L/Bal. 6 mm L/Bal. 4 mm

Parallel Import: Yes / No Towed-In: Yes / No

Repair Type: LS / I.B.I Towing Required: Yes / No

No of Repair Days: _____ Vehicle in Idac: Yes / No

D.O.I. 7/5/2019 Time: 4.10 pm

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. Govt 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:

> Back to OneMotoring

Please note the following:

- Vehicle has been deregistered. No enquiry of transfer fee is allowed. [WR03834]

Enquire Transfer Fee

Input Details

Vehicle No. * :

SKD5410R

Owner ID Type * :

Singapore NRIC (e.g. S1234567D) ▼

Owner ID * :

(Input last 5 characters e.g. 4567D)

4149j

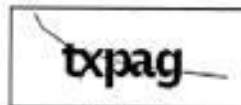
Transfer Details

Intended Transfer Date * :

08052019

* Mandatory field

☒ I have read and I agree to the [terms and conditions](#)



[Refresh](#)

Enter text shown above

Next

Clear

Claim Handling

Task Transfer Exit

Accident MT/1043448

LOS SAL SUB

Policy No.	5094110018	Vehicle No.	SKD5410R	GST Registration No.	
Certificate No.					
Policyholder Name	LOH YUAN HAN			Policyholder NRIC	58814149J
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	93840216	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	10	Private Hire	No

Accident Details

Report Date	08/05/2019 09:54	Accident Report Within 24 hrs	No	Accident Type	Collision - Major Minor Road
Date of Accident	01/05/2018	Time of Accident (hh:mm)	02:15	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	ICM No.	
Accident Location	EAST COAST PARKWAY TWO5 AIRPORT				

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 10A #13-107	Address 2	BENDEMEER ROAD	Address 3	BENDEMEER LIGHT
Address 4	SINGAPORE 331010	Address Type	Singapore address	Post Code	331010
Unit No.	13-107	Related Policy Number	5094110018		

OI Driver Info

Driver Name	LOH YUAN HAN	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	58814149J	Driver DOB	01/05/1988
Register Date of Driver License	09/12/2013	Driver Age	30	Driving Experience	4
Contact No.(Mobile)	93840216	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 10A	Address 2	BENDEMEER ROAD	Address 3	
Address 4		Address Type	Singapore address	Post Code	331010
Unit No.	#13-107				
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 08/05/2019 15:27 s025755 Modify Accident Report Within 24 hrs(Yes-->No)

Investigation

Claim 001 OD-MD

Claim Case Officer Yap Chee Ling

Claim Type	OD-MD	Insured Name	LOH YUAN HAN	Insured NRIC	58814149J
Contact No.(Mobile)	96423113	Contact No. (Home)	64813607	Contact No. (Office)	63371886
Email Address	yuanhan.joh@gmail.com	OI Vehicle Number	SKD5410R	TP Vehicle Number	KERB
Claim Description	SKD5410R / KERB ON 1 May 2018				Name of Preferred Workshop
Preferred Workshop	☒ Yes	Preferred Repair Option	Preferred Workshop Name	Insured Liability report	Partially at Fault Received
Date Registered	08/05/2019 10:05	Claim Close Date		Date Received	08/05/2019 17:
Report Taken By		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	MITSUBISHI	Vehicle Model	LANCER EX	Engine Capacity	
Date of Registration	22/04/2010	Classis No.	JMF5MCY4AAU000253		
Towing Required *	☒ Yes ☐ No	Vehicle in IDAC *	☒ Yes ☐ No	Parallel Import *	☐ Yes ☒ No
Type of Tender *	Own Damage	Assessor Name *	SIMON	Survey Current Status	
IDAC/Workshop Name	NATIONAL ASSESSMENT CENTR	IDAC/Workshop Location	51 UBI AVENUE 1 #01-25 PAYA		
Windscreen Parts & Labour Cost		Total Loss *	☒ Yes ☐ No		
Market Value(\$) *		Scrap Value(\$) *		Economical Repair Value(\$) *	
TOTAL LOST DUE TO VERY BADLY DAMAGED /VEHICLE HAS BEEN DEREGISTERED, NO ENQUIRY OF TRANSFER FEE IS ALLOWED, (WR03834)					
Remark *					

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