

# NATIONAL Assessment Centre Services

Date In: 31/05/2019 13:41	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NA/INC19009672/K4	E-mail (within 3hrs, A/C 2hrs):		
Veh No: SMF 806G	i-Motor Claim Form: MT/1047720		
DOA: 19/05/2019 17:05	i-Motor W/O (Within: OD 2hrs/TP 4hrs)		
OD: (TP) Reporting Only	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: GBA 8448K	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
31/05/2019 09:53	- E-Box cannot upload Photos and proceed.
6/6/19 11:27am	Received email from Daniel Koh, they will not be paying the reporting fee as the claim file was not submitted in their system.

Claimant's Particulars :-	Invoice Preparation Checklist	Amt (\$) Est Bill	Amt (\$) Add Bill
Driver/Owner:	1) AR: Accident Reporting (\$30);		
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)		
Damaged Portion:	3) TF: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):	4) FT: Follow-Through Survey \$120		
Auditors' Comments :-	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) NI: Idau DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON*		
	*N3: 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-on INC) against INC \$20		
	9) N12: Idau Mobile \$0		
	Invoice dated	Fee Charged	

## LKK Paya Ubi

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**From:** Daniel Koh <daniel.koh@income.com.sg>  
**Sent:** Thursday, 6 June 2019 11:27 AM  
**To:** LKK Paya Ubi  
**Cc:** Desmond Foo Guo Hui  
**Subject:** FW: Non-payment of Claims not Registered in eBao system made on 31 May To 2 June 2019

Dear Sir/Mdm,

We will not be paying the following reporting fee as the claim file was not submitted in our system.

We have registered them in our system after 2 working days, so please do not submit the case(s) to our system anymore.

No.	CASE REFERENCE	DOA	EFILE DATE	VEH/NO	REPORTING CENTER	CASE TYPE	Late
1	MNA119071003	19/5/2019 17:05	31/5/2019 14:22	SMF806G	National Assessment Centre Services (UBI)	SUBMITTED	LAT

As our Accident Reporting Centre, we require you to create the claim file on eBao-GCS by the next working day, after submitting the e-filing at Merimen system.

The reporting fees will be paid on case basis after you have registered the claims at both systems & uploaded the GIA report and photos at our system.

With effect from 1<sup>st</sup> Sep 2011, we will only pay the Reporting Fees if and only if:

- the claim is registered in both systems by the next working day;
- GIA report &/or photos is uploaded to our system.

Meanwhile, if you have any problem using our new claims system, please contact my colleagues for assistance:

- Patrick Tan ([patrick.tan@income.com.sg](mailto:patrick.tan@income.com.sg))
- Clarence Anthony ([clarence.anthony@income.com.sg](mailto:clarence.anthony@income.com.sg))

Daniel Koh  
Senior Admin Assistant  
Motor Insurance  
T +65 6430 7901  
[www.income.com.sg](http://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](http://Income.com.sg/careers)**



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#### 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.

### 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 willful 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	31/05/2019 13:41
Date Of Accident	19/05/2019 17:05
Exact Location Of Accident	WOODLANDS CRESCENT BLK 780 (NEAR COFFEE SHOP )
Country/State of Loss	SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMF806G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NEO AUTO LEASING PTE LTD
Co Reg No	201814915N
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83000064
Alternative Phone No	OFFICE-83000064

#### Vehicle Particulars

Manufacturer	HONDA
Model	FREED HYBRID 1.5G AUTO
Exact Purpose for which vehicle was being used at time of accident	WORK
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	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	5104798553
Cover Note Number	

#### Driver

Name of Driver	PAN ZHIXIONG
NRIC No	S8802585G
Date Of Birth	25/01/1988
Occupation	OUTDOOR
Date Of Driving Pass	25/06/2008
Driving Experience	10 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83000064
Fax Number	
Contact Number	OTHERS-83000064
Email Address	NOEMAIL

Address	BLK 213 BUKIT BATOK STREET 21 #05-215
Postcode	650213
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	SIDE SWIPE
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	3
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBA8448K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	MUHAMMAD AZIZ BIN ABDULLAH
NRIC/Passport Number	S9100419D
Contact Number	94525928
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
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Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## SKETCH PLAN

### IMPORTANT NOTICE

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:

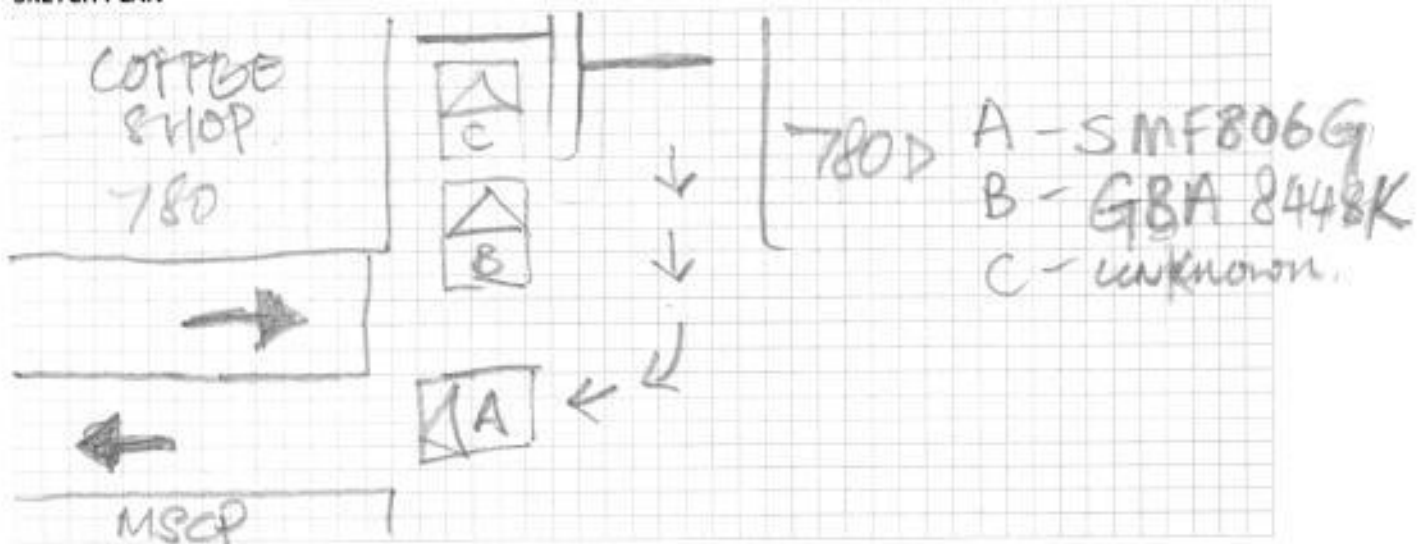
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

31/5/2019



# WOODLANDS CRESCENT.

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle A & B & C were at Woodlands Crescent, block 780 on 19 May 2019 @ approx. 5.05pm. I, mentioned on above draft as vehicle A, was turning into a opening lane behind block 780 woodlands crescent. Vehicle B & C were on stationary as they are waiting for carpark exit clearance. Suddenly, vehicle B make a quick reverse and his rear hit my side body & bumper. When it happen, I was travelling straight into a clear opening. When his reverse light is visible in my side mirror, I pressed my horn to alert him but he could not stop in time.

My side body & rear bumper was slightly damaged. Scratch & paint chip is visible after wash and polish.

## 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.:

31/5/2019



## Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960  
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

<b>Certificate Number:</b> 5104798553  1. Index mark and Registration Number of Vehicle : SMF806G Chassis Number : GB71076655 2. Name of Policyholder : NEO AUTO LEASING PTE LTD 3. Effective Date of Insurance : 26 Oct 2018 4. Expiry Date of Insurance : 25 Oct 2019 5. Persons or Classes of Persons entitled to drive# (a) The Policyholder. (b) Any other person who is driving on the Policyholder's order or with his/her permission. Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. 6. Limitations as to Use# (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.	<b>Cover :</b> drive CLASSIC  <b>SMF806G</b> <b>GB71076655</b> <b>NEO AUTO LEASING PTE LTD</b> <b>26 Oct 2018</b> <b>25 Oct 2019</b>
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**This Policy does not cover**

- (a) Use for racing, pace-making, reliability trial or speed testing.
  - (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
  - (c) Use for any purpose in connection with the Motor Trade.
- # Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$1,500
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: THINK ONE CREDIT PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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

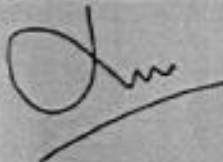
Agency : ANIKA INS BROKERS & CONSULTANTS P/L (00000690423)  
 Date of Issue : 18 Oct 2018 08:43 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

\_\_\_\_\_  
 Authorised Officer



\_\_\_\_\_  
 Chief Executive

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S8802585G



Name

PAN ZHIXIONG

潘志雄

Race

CHINESE

Date of birth

25-01-1988

Country/Place of birth

SINGAPORE

Sex

M

For LKK/NAC Use Only

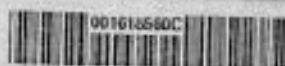
REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S8802585G

PAN ZHIXIONG

Birth Date 25 Jan 1988

Valid Date 25 Jun 2008



For LKK/NAC Use Only

5267557



NRIC No. S8802585G



Date of issue  
23-01-2014

Address

APT BLK 213 BUKIT BATOK STREET 21  
#05-213  
SINGAPORE 650213

For LKK/NAC Use Only

ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CATEGORIES

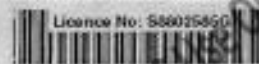
Class 3 Motor cars up to 3500 kg with up to 7 passengers, exclusive of the driver, and motor tractors/hotels up to 2500 kg

Valid Date 25 Jan 2008

S8802585G

S / No 9000265318

NP 428A



For LKK/NAC Use Only

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="19/05/2019 17:00"/>
Vehicle No.(For Motor)	<input type="text" value="SMF806G"/>	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"/>	5104798553		NEO AUTO LEASING PTE LTD	201814915N	GFT	drive CLASSIC	SMF806G	SMF806G	26/10/2018	

### Policy Information

Policy No.	5104798553	Policyholder Name	NEO AUTO LEASING PTE LTD	Policyholder NRIC	201814915N
Certificate No.					
Address	BLK 31 #17-204 EUNOS CRESCENT EUNOS COURT SINGAPORE 400031				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	18/10/2018	Effective Date	18/10/2018 00:00	Expiry Date	24/09/2019 23:59
Third Party Excess	1500	Own damage Excess	1500	Windscreen Excess	100
Additional Excess	0	OS Premium	5616.19		
Outside Singapore OD Excess	1500	Outside Singapore TP Excess	1500		
Agent	ANIKA INS BROKERS & CONSUL	Agent Tel.	66729988	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

### Policyholder Mailing Address

Address 1	BLK 31 #17-204	Address 2	EUNOS CRESCENT	Address 3	EUNOS COURT
Address 4	SINGAPORE 400031	Address Type	Singapore address	Post Code	400031
Unit No.	17-204	Related Policy Number	5104798553		

### Insured Object: SMF806G

### Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	18/10/2018 00:00	Basic Information Endorsement	000001286928022	Endorsement Take Effective	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. SLJ8974S 24-10-2018 \$1,064.32 2. SLK5314L 24-10-2018 \$1,064.32 3. SLK8304X 24-10-2018 \$1,064.32 4. SLN7706K 24-10-2018 \$1,064.32 5. SLN833Y 24-10-2018 \$1,064.32 In view of this amendment, an additional premium of \$5,321.60 (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