

# NATIONAL Assessment Centre Services

(Ref: JAW05)

Date In: 10/06/15	Job description	Date & Time Completed	Done by
Ref No: NA/INC19010157/13	SAS e-filing		
Veh No: SLM5440U	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 10/06/15 1110	i-Motor Claim Form	MT/1048406-001	
OD TP Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	i-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:	Veh No: 5J18308P	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

NA1904253

Claimant's Particulars:-	Invoice Preparation Checklist	Amt (\$) 1st 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		
Cat. 1:	For claiming against INC Only (wef 10 Jan 2005)		
Cat. 2/3:	6) TR: Re-inspection \$75		
	7) N1: Idac 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 (Non INC) against INC \$20		
	9) N12: Idac Mobile 30		
	Invoice dated	Fee Charged	
	Issued on		



## 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	10/06/2019 14:42
Date Of Accident	10/06/2019 11:10
Exact Location Of Accident	BUKIT TIMAH RD OUTSIDE NISSAN SERVICE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM5440U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ADNAN BIN RAMILY
NRIC No	S0286117H
Email Address	ADNANRAMLY@GMAIL.COM
Mobile Phone No	(LOCAL) +65-85110119
Alternative Phone No	OTHERS-85110119

### Vehicle Particulars

Manufacturer	NISSAN
Model	SYLPHY
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	5098774652-01
Cover Note Number	

### Driver

Name of Driver	ADNAN BIN RAMILY
NRIC No	S0286117H
Date Of Birth	03/11/1947
Occupation	INDOOR
Date Of Driving Pass	25/06/1979
Driving Experience	39 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-85110119
Fax Number	
Contact Number	OTHERS-85110119
Email Address	ADNANRAMLY@GMAIL.COM

Address	BLK 492D TAMPINES ST 45 #10-274
Postcode	523492
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	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	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	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
Remarks/ Reasons:	HAVEN'T RETRIEVE
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJJ8308P
Vehicle Make/Model/Colour	AUDI
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIE TURNG PHUNG KEN
NRIC/Passport Number	S7512130Z
Contact Number	97893436
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	




## SKETCH PLAN

### IMPORTANT NOTICE

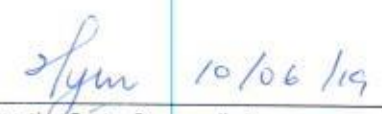
1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material 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:

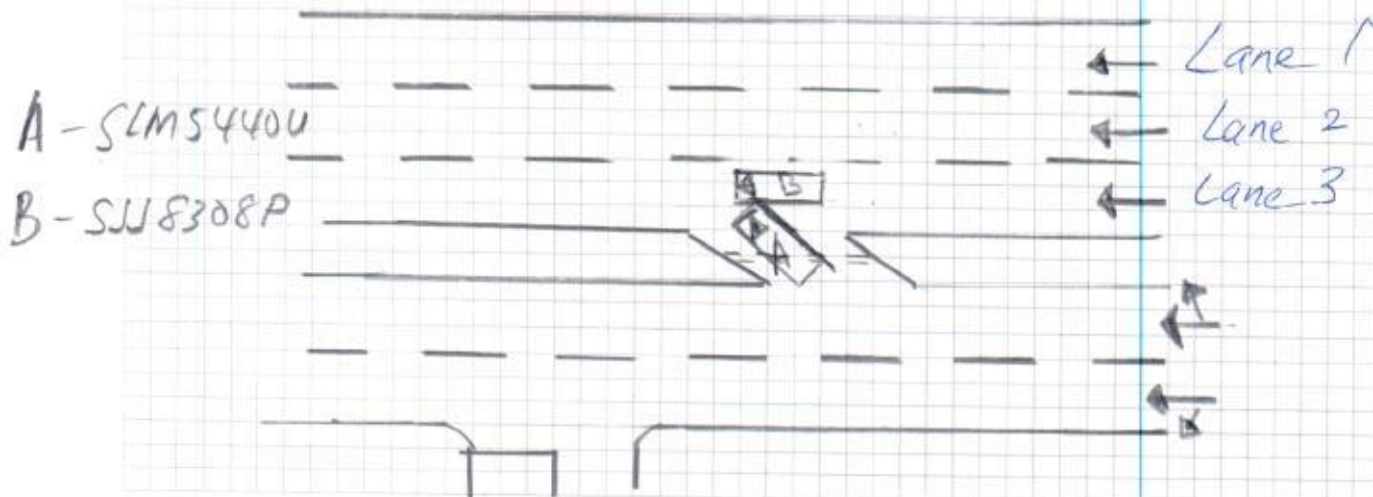
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

 10/06/19  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

BUKTI TIMAH RD



I was trying to <sup>merge</sup> ~~get~~ to lane #3.  
Before I knew it, I was hit by  
Car "B".

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

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

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



REPUBLIC OF SINGAPORE DRIVING LICENCE

ADNAN BIN RAMILY

000378801F

03 Nov 1947

12 Apr 2003

For LKK/NAC Use Only

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S0286117H

ADNAN BIN RAMILY

@ADNAN BIN RAMLY

عبدان بن رملی

RACE

MALAY

Date of birth

03-11-1947

Country of birth

MALAYSIA

For LKK/NAC Use Only

For LKK/NAC Use Only

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

Class 2 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

25 Jun 1979

For LKK/NAC Use Only

NP 428A

4929571

NRIC No. S0286117H

Date of issue

28-01-2013

Address

APT BLK 492D TAMPINES STREET 45

#10-274

SINGAPORE 523492

1979

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Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="10/06/2019 11:25"/>
Vehicle No.(For Motor)	<input type="text" value="SLM5440U"/>	Certificate Number	<input type="text"/>

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5098774652-01		ADNAN BIN RAMILY	S0286117H	GPC	drive CLASSIC	SLM5440U	SLM5440U	31/03/2019	30/03/2020

## 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	: 5098774652-01
The Policyholder	: ADNAN BIN RAMILY BLK 492D #10-274 TAMPINES STREET 45 SINGAPORE 523492

Period of Insurance	: 31 Mar 2019 To 30 Mar 2020
Sum Insured	: Market Value of Insured Vehicle at Time of Loss
Premium (inclusive GST)	: S\$923.26

#### Interest Insured

Cover Type	: drivo CLASSIC	Capacity	: 1600cc
Primary Driver	: ADNAN BIN RAMILY	Registration Year	: 2017
Named Driver (1)	: ZUHAIR ADNAN	Off-peak Car	: No
Named Driver (2)	: N/A	Insure with COE	: Yes
Make/Model	: NISSAN/SYLPHY	NCD Entitlement	: 50%
Registration Number	: SLM5440U	NCD Protection	: Yes(Free)
Chassis Number	: MNTBBAB17Z0028290	Loyalty Discount	: 5%
Repair at Owner's Preferred Workshop	: No		
Excess (Section 1)	: N/A		
Excess (Section 2)	: N/A		
Windscreen Excess	: S\$100		
Additional Excess	: N/A		
Unnamed Driver Excess	: Please refer to Terms and Conditions		
Hire Purchase Company	: N/A		

#### Optional Cover

Transport Allowance	: No
Excess Waiver	: Yes

**Memo A** : Vehicle Model: SYLPHY 1.6 CVT ABS D/AIRBAG 2WD 4DR

Engine Capacity: 1598 cc

**Endorsement Operative** : M4, M8

Agency	: TELESales-DIRECT MARKETING (00000601661)
Date of Issue	: 21 Feb 2019 14:18 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



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## Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="10/06/2019 11:25"/>							
Vehicle No.(For Motor)	<input type="text" value="SLM5440U"/>	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"/>	5098774652-01		ADNAN BIN RAMILY	S0286117H	GPC	drive CLASSIC	SLM5440U	SLM5440U	31/03/2019	30/03/2020
<input type="button" value="Continue"/>										

Claim Handling

Accident MT/1048406

Policy No.	5098774652-01	Vehicle No.	SLM5440U	GST Registration No.
Certificate No.				
Policyholder Name	ADNAN BIN RAMLY			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading
Contact No.(Mobile)	85110119	Contact No.(Office)	0	Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire
▼ Accident Details				
Report Date	10/06/2019 19:47	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	10/06/2019	Time of Accident hh:mm	11:10	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	BUKIT TIMAH RD OUTSIDE NISSAN SERVICE			
▼ Excess				
Own damage Excess	0.00	Additional Excess	0	Windscreen Excess
Unnamed Driver Excess	0.00	Outside Singapore OD Excess		0.00
Third Party Excess	0.00	Outside Singapore TP Excess		0.00
▼ Benefits				
Coverage		Sum Insured		
Excess Waiver		99999999.99		
▼ GST Registered Information				
GST Registered	No	GST Registration Date		
GST Registration No.		GST Status Verified	Yes	
Modification History				
▼ Policyholder Mailing Address				
Address 1	BLK 492D #10-274	Address 2	TAMPINES STREET 45	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5098774652-01	
▼ OI Driver Info				
Driver Name	ADNAN BIN RAMLY	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	S0286117H	Driver DOB
Register Date of Driver License	01/01/1990	Driver Age	71	Driving Experience
Contact No.(Mobile)	85110119	Contact No.(Office)	0	Contact No.(Home)
Address 1	BLK 492D	Address 2	TAMPINES STREET 45	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	#10-274			
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Com.
Declaration				
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No	

Modification History

Claim 001 OD-MD New

Claim Type *	OD-MD	Insured Name	ADNAN
Contact No.(Mobile)	85110119	Contact No. (Home)	678100
Email Address	adnanramly@gmail.com	OT Vehicle Number	SLM5440U
Claim Description	SLM5440U / SJJ8308P ON 10 Jun 2019		
Preferred Workshop		Insured Liability	Fully at Fault
Contact No. Finalisation	Yes	Preferred Repair Option	income to assign workshop
Date Registered		GIA report	Received
Report Taken By		Claim Close Date	10/06/2019 19:51
		Workshop Repairer	ROSLINDA



### ASSIGNMENT (IDAC)

#### By CSO- Nature of Accident:

- 1) Vehicle hit Vehicle: 2) Vehicle hit ??
- a) Motorist ( ) a) Pedestrian ( )
- b) Motorcycle ( ) b) Animal ( )
- c) Bicycle ( )
- 3) Vehicle hit Road Side Objects:
- a) Govt Property ( ) b) Road Work Object ( )
- (E.g. signpost, 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

#### 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: SLM5440 U Yr Regn: 31 Mar 2017

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

Make & Model: Nissan Sylphy 1.6 CVT c.c. 1598

Colour: Brown Transmission Type: Auto / Manual

Eng/No: Sp. Reading 25823

C/No: MNT3BAB17Z0028290

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

Steering: Normal / Jammed / Leaked / Burnt or

Brake: Normal / Jammed / Leaked / Burnt or

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

Tyre Size: F: 195/60 R16

R: —

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

Front Rear

R/Bal. 7 mm R/Bal. 7 mm

L/Bal. 7 mm L/Bal. 7 mm

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

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

No of Repair Days: 9 Vehicle in Idac: Yes / No

D.O.I. 10/6/2019 Time: 4.15pm

#### 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:



# MOTOR CAR (Frt)

ACT001260

(1)Explan (2)Paper (3) (4)Check (5) (6)for Content (7)C

Aug 2003

## Front Portion

NAC	INC	Item	CON	AC	Qty
1001	991886	Frt Number Plate			
1002	991887	Frt Number Plate Base			
1003	991889	Frt Number Plate Garnish			
1004	991300	Frt Bumper	BR		
1005	992341	Frt Bumper Clips	NEC	6	
1006	991325	Frt Bumper Bracket			
1007	991462	Frt Bumper Side Retainer	DIS	2	
1008	991433	Frt Bumper Reinforcement	BT		
1009	991318	Frt Bumper Beam			
1010	991468	Frt Bumper Sponge	MIS		
1011	991427	Frt Bumper Protector			
1012	991420	Frt Bumper Pad			
1013	991363	Frt Bumper Grille			
1014	991301	Frt Bumper Moulding			
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	CRA		
1019	995079	Frt LH Bumper Fog Lamp			
1020	995080	Frt RH Bumper Fog Lamp	BR		
1021	991793	Frt Grille	SCR		
1022	991328	Frt Grille Emblem	NEC		
1023	991799	Frt Grille Chrome Moulding			
1024	991222	Frt Apron Panel			
1025	992013	Frt Support Panel	BT		
1026	992025	Frt Support Panel Top Garnish Cover	DIS		
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	BAC		
1034	991328	Bonnet Emblem			
1035	990287	Bonnet Lock			
1036	990285	Bonnet Insulator			
1037	990273	Bonnet Hinge			
1038	990261	Bonnet Damper			
1039	990305	Bonnet Rubber			
1040	990252	Bonnet Cable			
1041	990311	Bonnet Stand			
1042	990119	Air Con Condenser			
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	CRA		
1060	990070	Air Cleaner Assy			
1061	990056	Air Cleaner Hose			
1062	990089	Air Cleaner Resonator			
1063	991712	Frt Exhaust Manifold	CRA		
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			

Vehicle No:

SLM 54404

NAC	INC	Item	CON	AC	Qty
1071	992205	Fuse Box			
1072	994011	Relay Box			
1073	995053	Wiper Washer Tank	DD		
1074	995052	Wiper Washer Tank Motor	CRA		
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	CRA		
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	BT		
1093	991520	Frt RH Chassis Member	DD R		
1094	990728	Frt Vertical Cross Member			
1095	991863	Frt Lower Cross Member			
1096	995070	Frt LH Fender	SCR R		
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	CRA		
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	BAC		
1106	991739	Frt RH Fender Inner Panel			
1107	991744	Frt RH Fender Lamp			
1108	991752	Frt RH Fender Protector			
1109	991740	Frt RH Fender Inner Shield	CRA		
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			
		Frt LH Door	SCR R		
		Air Con Condenser Deflector			
		Headlamp Lower Bracket	CRA		
		RH			

No of Items:

Accessories:



> Back to OneMotoring

1598cc

m.v. \$66K

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Singapore NRIC  
Owner ID: 6117H

### Vehicle Details

Vehicle No.: SLM5440U  
Vehicle to be Exported: No  
Intended Deregistration Date: 12 Jun 2019  
Vehicle Make: NISSAN  
Vehicle Model: SYLPHY 1.6 CVT ABS D/AIRBAG 2WD 4DR  
Primary Colour: Brown  
Manufacturing Year: 2016  
Engine No.: HR16995757B  
Chassis No.: MNTBBAB17Z0028290  
Maximum Power Output: 85.0 kW (113 bhp)  
Open Market Value: \$16,547.00  
Original Registration Date: 31 Mar 2017  
First Registration Date: 31 Mar 2017  
Transfer Count: 0  
Actual ARF Paid: \$16,547.00

### Intended PARF Rebate Details

PARF Eligibility: Yes  
PARF Eligibility Expiry Date: 30 Mar 2027  
PARF Rebate Amount: \$12,410.00

### Intended COE Rebate Details

COE Expiry Date: 30 Mar 2027  
COE Category: A - Car up to 1600cc & 97kW (130bhp)  
COE Period(Years): 10  
QP Paid: \$51,765.00  
COE Rebate Amount: \$40,368.00  
**Total Rebate Amount: \$52,778.00**

The information contained herein is correct as at 10 Jun 2019

OK

## Claim Handling

## ▼ Accident MT/1048406

Task Transfer Exit

LOS SAL SUB

Policy No.	5098774652-01	Vehicle No.	SLM5440U	GST Registration No.	
Certificate No.					
Policyholder Name	ADNAN BIN RAMILY			Policyholder NRIC	S0286117H
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	85110119	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No ▼
KFK	<input type="radio"/> No <input checked="" type="radio"/> Yes	TCA	<input type="radio"/> No <input checked="" type="radio"/> Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	No

## ▼ Accident Details

Report Date	10/06/2019 19:47	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	10/06/2019	Time of Accident hh:mm	11:10	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	ICM No.	
Accident Location	BUKIT TIMAH RD OUTSIDE NISSAN SERVICE				

## ▼ Excess

Own damage Excess	0.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	0.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

## ▼ Benefits

Coverage	Sum Insured		
Excess Waiver	99999999.99		

## ▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

## ▼ Policyholder Mailing Address

Address 1	BLK 492D #10-274	Address 2	TAMPINES STREET 45	Address 3	SINGAPORE 523492
Address 4		Address Type	Singapore address	Post Code	523492
Unit No.		Related Policy Number	5098774652-01		

## ▼ OI Driver Info

Driver Name	ADNAN BIN RAMILY	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S0286117H	Driver DOB	03/11/1947
Register Date of Driver License	01/01/1990	Driver Age	71	Driving Experience	29
Contact No.(Mobile)	85110119	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 492D	Address 2	TAMPINES STREET 45	Address 3	SINGAPORE 523492
Address 4		Address Type	Singapore address	Post Code	523492
Unit No.	#10-274				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

## ▼ Declaration

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

## ▼ Investigation

## Claim 001 OD-MD

## ▼ Claim Case Officer Yap Chee Ling

Claim Type	OD-MD	Insured Name	ADNAN BIN RAMILY	Insured NRIC	S0286117H
Contact No.(Mobile)	85110119	Contact No. (Home)	67810070	Contact No. (Office)	
Email Address	adnanramily@gmail.com	OI Vehicle Number	SLM5440U	TP Vehicle Number	SJJ8308P
Claim Description	SLM5440U / SJJ8308P ON 10 Jun 2019			Name of Preferred Workshop	
Preferred Workshop					
Contract Realisation	Yes	Preferred Repair Option			
		Income to assign workshop			
		Insured Eligibility report			
		Fully at Resolved			
Date Registered	10/06/2019 19:52	Claim Close Date		Date Received	11/06/2019 15:4
Report Taken By	ROSLINDA	Workshop Repairer		Total Loss but Repaired	
				OD Excess	



[Print AK letter](#)Collected by  
Workshop[Modification History](#)

## Special Claim Creation Approval

Approval	Reason
Remarks	

damage assessment

Attachment

## Vehicle Info

Vehicle Make	NISSAN	Vehicle Model	SYLPHY	Engine Capacity	
Date of Registration	31/03/2017	Classis No.	MNTBBAB17Z0028290		
Towing Required *	<input checked="" type="radio"/> Yes <input type="radio"/> No	Vehicle in IDAC *	<input checked="" type="radio"/> Yes <input type="radio"/> No	Parallel Import *	<input type="radio"/> Yes <input checked="" type="radio"/> 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 *	<input type="radio"/> Yes <input checked="" type="radio"/> No		
Market Value(\$)		Scrape Value(\$)		Economical Repair Value(\$)	

NO OF REPAIR:09 DAYS:FRT SUPPORT PANEL TOP GARNISH COVER-REPLACE,AIRCON SUCTION PIPE(LOW PRESSURE)-UNCONFIRM,AIRCON LIQUID PIPE-UNCONFIRM,AIR DUCT-AIRCON CONDENSER DEFLECTOR-UNCONFIRM,HEADLAMP RH LOWER BRACKET-REPLACE

Remark

Remark for  
Supplementary

## Damage Listing

No.	Part No.	Description	Qty *	Repair Code *
1	16000101	BUMPER (FRONT)	1	Replace
2	16002401	BUMPER CLIPS (FRONT)	6	Replace
3	16005101	BUMPER RETAINER (FRONT LEFT)	1	Replace
4	16005102	BUMPER RETAINER (FRONT RIGHT)	1	Replace
5	16005001	BUMPER REINFORCEMENT (FRONT)	1	Replace
6	16005901	BUMPER SPONGE (FRONT)	1	Replace
7	16002901	BUMPER FOG LAMP COVER (FRONT LEFT)	1	Unconfirm
8	16002902	BUMPER FOG LAMP COVER (FRONT RIGHT)	1	Replace
9	16002701	BUMPER FOG LAMP (FRONT LEFT)	1	Unconfirm
10	16002702	BUMPER FOG LAMP (FRONT RIGHT)	1	Replace
11	27100101	GRILLE (FRONT)	1	Replace
12	27100801	GRILLE EMBLEM (FRONT)	1	Replace
13	41300101	SUPPORT PANEL (FRONT)	1	Replace
14	27700101	HEAD LAMP (LEFT)	1	Unconfirm
15	27700102	HEAD LAMP (RIGHT)	1	Replace
16	149001	BONNET	1	Replace
17	14903401	BONNET LOCK (LOWER )	1	Unconfirm
18	14902201	BONNET HINGE (LEFT)	1	Unconfirm
19	14902202	BONNET HINGE (RIGHT)	1	Unconfirm
20	112023	AIR CON CONDENSER	1	Unconfirm
21	112044	AIR CON DISCHARGE PIPE	1	Unconfirm
22	344001	RADIATOR	1	Unconfirm
23	344005	RADIATOR COWLING	1	Unconfirm
24	344008	RADIATOR FAN	1	Unconfirm
25	344011	RADIATOR FAN CLUTCH	1	Unconfirm
26	344007	RADIATOR EXPANSION TANK	1	Unconfirm
27	454012	WIPER WASHER TANK	1	Replace
28	454014	WIPER WASHER TANK MOTOR	1	Replace
29	243014	ENGINE LOWER COVER	1	Replace

Find a Part	30	19600501	CHASSIS MEMBER (FRONT LEFT)	<input type="text" value="1"/>	<input type="button" value="Replace"/>
root	31	19600502	CHASSIS MEMBER (FRONT RIGHT)	<input type="text" value="1"/>	<input type="button" value="Repair"/>
Not Applicable	32	25400102	FENDER (FRONT LEFT)	<input type="text" value="1"/>	<input type="button" value="Repair"/>
ABS	33	25400901	FENDER INNER SHIELD (FRONT LEFT)	<input type="text" value="1"/>	<input type="button" value="Replace"/>
ABSORBER	34	25400103	FENDER (FRONT RIGHT)	<input type="text" value="1"/>	<input type="button" value="Replace"/>
ACCELERATOR	35	110037	AIR CLEANER RESONATOR	<input type="text" value="1"/>	<input type="button" value="Replace"/>
ACTUATOR	36	23300201	DOOR (FRONT LEFT)	<input type="text" value="1"/>	<input type="button" value="Repair"/>
ADVERTISEMENT STICKER	37	25400902	FENDER INNER SHIELD (FRONT RIGHT)	<input type="text" value="1"/>	<input type="button" value="Replace"/>
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					
AIR INTAKE					
AIR RESONATOR BOX					
AIR THROTTLE BODY AND SENSOR					
ALARM					
ALTERNATOR					
ALUMINIUM PANEL - SIDE					
AMPLIFIER					
ANTENNA					
ANTI ROLL					
APRON					
ARCH					
ARM REST					
ASH TRAY					
AUTO CLUTCH					
AUTO COOLER PIPE					
AUTO CRUISE MOTOR					
AUTO TRANSMISSION					
AXLE					
BACK REST (M/C)					
BACK SEAT					
BALANCER					
BATTERY					
BEADING (M/C)					
BELT COVER (M/C)					
BELT TENSIONER					
BODY					
BODY (M/C)					





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: SLM 54407 Date In: \_\_\_\_\_ Time In: \_\_\_\_\_ with Keys: Yes / No

*For Office use*

Attended by: \_\_\_\_\_

Workshop Collection of Vehicle

Workshop: Bodyfix

Collection Date: 12/06/19 Time: 1514 with Keys: Yes / No

Tow Truck No: YN7940K Tow Man: July Lico NRIC: 1822610C

Signature: [Signature] 96691023

*For office use*

Attended by: ROSINDA

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

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**From:** Yap Chee Ling <CheeLing.Yap@income.com.sg>  
**Sent:** Wednesday, 12 June 2019 2:49 PM  
**To:** amkautopoint; LKK Paya Ubi  
**Subject:** SLM5440U | MT/1048406 (Awarding Letter to AMK Autopoint)

**Importance:** High

Hi IDAC and AMK Autopoint,

Vehicle is in IDAC.

Excess waiver is applicable.

Please liaise with the owner – Mr Anand Bin Ramily at tel: 8511 0119 on the necessary.

\*\* Kindly assist to expedite the repairs..

Thank you.

**Yap Chee Ling (Ms)**  
Executive  
Motor Insurance  
T +65 6430 7893  
[www.income.com.sg](http://www.income.com.sg)



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**in** with you

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Our Ref: MT/CA/OD/051/1048406-001/YCL

12 Jun 2019

AMK AUTOPOINT PTE LTD  
BLK 10 ANG MO KIO INDUSTRIAL PARK 2A  
#01-22 AMK AUTOPOINT  
SINGAPORE 568047

Dear Sir

**CLAIM NUMBER: MT/1048406-001**  
**REPAIR OF VEHICLE NUMBER: SLM5440U**

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

Award Date: 12 Jun 2019



Make: NISSAN

Model: SYLPHY

Estimated Repair Days: 6

Location: NATIONAL ASSESSMENT CENTRE SERVICES

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

Benefits Applicable: Excess Waiver

Excess Applicable: 0

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](mailto:motor@income.com.sg).

Yours sincerely

Jenny Pe

Deputy Vice President

Motor Insurance

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