

# NATIONAL Assessment Centre Services

[ver 1 Jan'03]

MMA 119083933

Date In: 28/6/19 09:15	Job description	Date & Time Completed	Done by
Ref No: NAT INC 190 11450 /h4	SAS e-filing		
Veh No: SJE 992 D	E-mail (within 2hrs, A/C 2hrs)		
DDA: 27/6/19 13:05	I-Motor Claim Form	MT/1051018-001	28/6/19 14:50.
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 Ass'n Wksp / GW: ( )	Tel: ( )	Fax: ( )
TP Particulars:	Veh No: FGG 9149 K	INC ( ) / Non-INC ( )
Owner / Driver: ( )	Tel: ( )	
Policy No: ( )	Period: ( )	Cover Type: ( )
Confirmed by: ( )	Date: ( )	Time: ( )
Insured/Driver Liability: ( ) % [Note-Est. Status (WO): N: 0-20%; P: 21-79%; P: 80-100%]		
Year of Registration: ( )	Warranty: YBS ( ) / 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: 190 11450 /h4)

1) Apply for Transport Allowance ( ) / Courtesy Car ( )

2) QC Check / Post Repair Inspection ( )

3) Upload Resurvey Photo [Repair Cost > \$3000] ( )

Injury: ( )

Date/Time	Action

Comments Particulars:	NA 190 4801	Invoice No: 119083933	Amount (\$): 70.00	PAID (\$):
Driver/Owner:		1) AR: Accident Reporting (\$30)		
Contact No:		2) DA: Damage Assessment (\$100); INC (\$50)		
Damaged Portion:		3) TP: Towing Fee \$40/\$45		
QC Checked by (Engn-In-Charge):		4) PT: Follow-Through Survey \$120		
Auditors' Comments:		5) PT: Follow-Through Survey (Resurvey) \$30		
Tel: 1:		For obtaining status (UNC Only) (ver 10 Jan 2003)		
Tel: 2/3:		6) TR: Re-inspection \$75		
		7) NI: Idan 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 License Coordination \$5		
		TP (N11): TP (Non INC) against INC \$20		
		9) N12: Idan Mobile \$0		
		Invoice dated	Fee Charged	
		Invoice dated	Fee Charged	



## 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	28/06/2019 09:15
Date Of Accident	27/06/2019 13:05
Exact Location Of Accident	UPP SERANGOON RD TWDS SENGKANG EAST DR
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJE997D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	QUIK HOCK SOON
NRIC No	S1771519D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97832789
Alternative Phone No	OFFICE-97832789

### Vehicle Particulars

Manufacturer	TOYOTA
Model	ALTIS
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?	NO
If No, Please state action to be taken	THIRD PARTY
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	5083619957-02
Cover Note Number	-

### Driver

Name of Driver	QUIK HOCK SOON
NRIC No	S1771519D
Date Of Birth	11/10/1966
Occupation	OUTDOOR
Date Of Driving Pass	04/10/2012
Driving Experience	6 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97832789
Fax Number	
Contact Number	OFFICE-97832789
Email Address	NOEMAIL

Address	BLK 242 SERANGOON AVE 3 #07-196
Postcode	550242
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 - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SERANGOON NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 50 SERANGOON AVE 2 #01-02 , POSTCODE: 556129 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4880999 - FAX NO: 64883561
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBG9149K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	MUHAMMAD UQBAH BIN MOHD AZMI
NRIC/Passport Number	S9637047D
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:

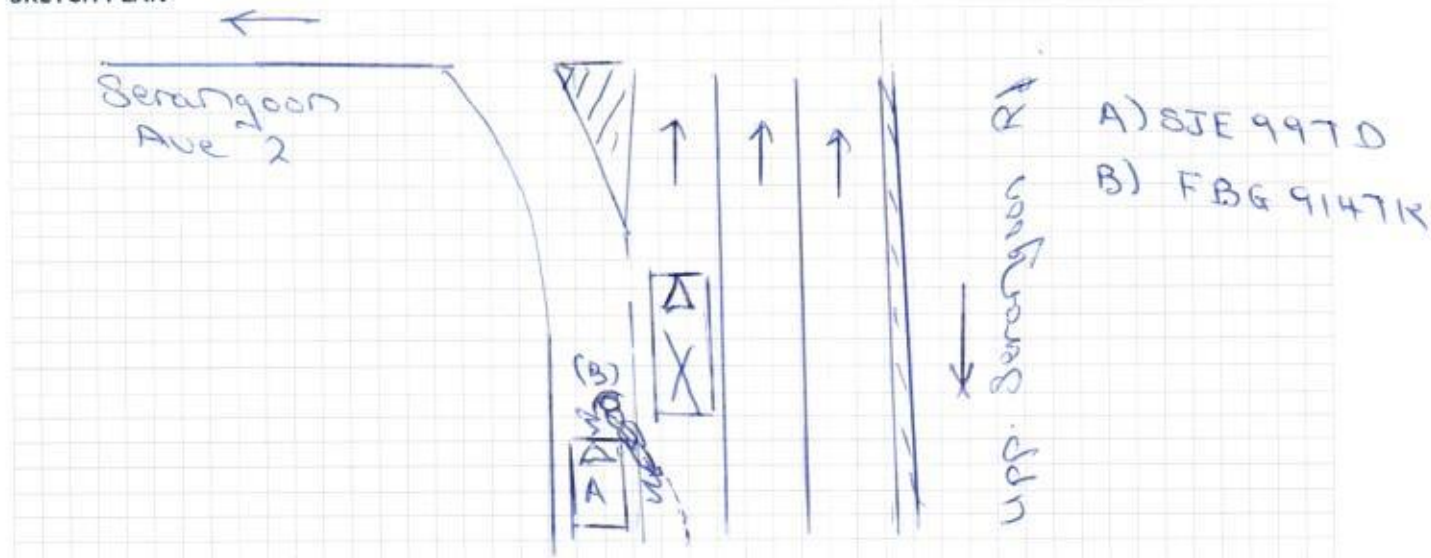
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Upp. Serangoon Rd. in the turning lane to Serangoon Ave 2. A SBS ~~of~~ was on my right ~~stopping~~ slowing down ~~to a stop~~. I proceeded to drive on when the motorcyclist that was behind the bus suddenly switch to my lane. I brake immediately but could not avoid the ~~car~~ collision. Police & ambulance came & the rider motorcyclist was conveyed to the hospital.

## DECLARATION

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

*[Signature]*

Policyholder's Signature  
Date & Time:

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

*[Signature]*

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



VEHICLE NO : <u>GJE997D</u>		MAKE/MODEL : <u>Toyota Altis</u>	
Date of Accident	<u>27.6.19</u>	Time: <u>13.15h</u>	Foreign Veh Involved YES / NO
Location of Accident	<u>Upper S'ra Serangoon</u>		Foreign Veh No
Country of Loss	<u>Serangoon Rd</u>		
Vehicle Damaged		No. of Veh Involved :	
Claim Type	<u>OD / TP / REPORTING</u>	Was There Any Witness	YES / NO
INSURANCE CO	<u>NTUC Income</u>	Name of Witness :	
Coverage	<u>Comprehensive/TPFT/Third Party Only</u>	Contact No :	
Policy No	<u>508361995T-02</u>		
Fleet Policy	<u>YES / NO</u>		
		<b>OTHER VEHICLES</b>	
OWNER / CO. NAME	<u>Quick Hock Soon</u>	VEHICLE B :	<u>FBG 9149K</u>
NRIC / Co's Reg No.	<u>S1771519D</u>	Category :	
Address	<u>Blk 242 Serangoon Ave</u>	Driver's Name :	<u>Muhamad Yaqub B. Mohd Azmi</u>
	<u>3 # 07-196 (550242)</u>	NRIC No :	<u>S9637047D</u>
Contact / Mobile No	<u>97832789</u>	Contact No :	
Email Address		No. of Passenger :	
Date of Birth	<u>11.10.1966</u>		
Gender	<u>M / F</u>	VEHICLE C :	
DRIVER'S NAME	<u>as above</u>	Category :	
NRIC No		Driver's Name :	
Address		NRIC No :	
		Contact No :	
Contact / Mobile No		No. of Passenger :	
Email Address			
Date of Birth		VEHICLE D :	
Gender	<u>M / F</u>	Category :	
LICENSE PASSED DATE		Driver's Name :	
		NRIC No :	
Occupation	<u>Indoor / Outdoor</u>	Contact No :	
Relation with Owner	<u>owner</u>	No. of Passenger :	
Does Driver Own Any Other Veh ? YES / NO			
Vehicle Reg No			
Insurance Co			
Weather Condition	<u>Clear / Raining / Others</u>	Video Captured :	Yes / No
Road Surface	<u>Dry / Wet / Others</u>		
<b>INJURED</b> : YES / NO			
Name of Injured :		Police Report :	YES/NO
Convey To Hospital by Ambulance :	YES / NO	If YES, Where :	
<b>NO. OF PASSENGERS</b> :			
Name of Passenger :		M / F	INJURED? YES/NO
Name of Passenger :		M / F	INJURED? YES/NO
Name of Passenger :		M / F	INJURED? YES/NO
Name of Passenger :		M / F	INJURED? YES/NO
<b>REMARKS</b> :			
Name of Workshop :	<u>SUCCESS UNITED PTE LTD</u>	Contact No :	
Address :	<u>2 Kaki Bukit AutoHub</u>	Email :	
	<u>Kaki Bukit Ave 2, #01-33/#02-29</u>		
	<u>Singapore 417921</u>		
	<u>Tel: 6746 1515 Fax: 6748 5015</u>		



Police Station Of Origin:  
Serangoon N.P.C  
50 Serangoon Avenue 2 #01-02 SINGAPORE  
556129  
Tel No: 1800-4880999

Report No. T/20190627/2101

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 27/06/2019 15:52	Vide Report No.: F/20190627/0076	Station Diary No.: 53
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**Informant's Particulars**

Name of Informant: QUIK HOCK SOON			Address: APT BLK 242 SERANGOON AVENUE 3 #07-196 SINGAPORE 550242		
ID Type / ID No.: NRIC NO / S1771519D			Contact No.: Home/Office: Mobile: 97832789		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 52	Date of Birth: 11/10/1966	Type of Informant: Driver		
Race: Chinese			Language: Chinese		Institution / School Name:
Occupation: CONSTRUCTION			Driving Licence Information: Class: Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 27/06/2019 13:05	Type of Location: T-Junction
Location: Along Road 1 Traveling Toward Road 2 UPPER SERANGOON ROAD SENGKANG EAST DRIVE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBG9149K	Motorcycle					0
SBS3737P	Bus/Coach/Minibus					10
SJE997D	Car	TOYOTA	COROLLA ALTIS 1.6 AUTO	Blue		0





Police Station Of Origin:

Serangoon N.P.C

50 Serangoon Avenue 2 #01-02 SINGAPORE

556129

Tel No: 1800-4880999

Report No. T/20190627/2101

**CONTINUATION OF REPORT**

<b>Details of Vehicle Insurance</b>				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJE997D	NTUC Income Insurance Co-Operative Limited	5083619957-02	15/10/2018	14/10/2019

<b>Details of Person Involved</b>				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
<b>Rider</b>				
Name	Muhammad Uqbah Bin Mohd Azmi		ID No.	S9637047D
Related Vehicle	FBG9149K (Motorcycle)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL
<b>Driver</b>				
Name	QUIK HOCK SOON		ID No.	S1771519D
Related Vehicle	SJE997D (Car)		Contact No.	97832789
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL

**Brief Details.**

On 27/06/2019 at about 1305hrs, I was travelling along Upper Serangoon Road towards Sengkang East Drive. I was turning left into Serangoon Ave 2 at the T-Junction of Upper Serangoon Road and Serangoon Ave 2. There was a bus slowing down to stop at lane 3 and I was in lane 4 turning into Serangoon Ave 2 using the filter lane which is lane 4. Out of a sudden, one motorcycle, came from my right who was seen to be taking over the bus from the left at lane 3. I was unable to stop in time and I hit into the side portion of the motorcycle. Subsequently, TP arrived and the rider of the motorcycle was conveyed to hospital.



**SINGAPORE  
POLICE FORCE**



T/20190627/2101

3 of 3

Police Station Of Origin:  
Serangoon N.P.C  
50 Serangoon Avenue 2 #01-02 SINGAPORE  
556129  
Tel No: 1800-4880999

Report No. T/20190627/2101

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:  
F /  
Sgt 3 ONG ZHEN ZUO

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
27/06/2019 15:52

Officer In Charge Of Case:  
TP / GIT /  
Staff Sgt MOHAMED HUSNUL TAUFIC BIN MD  
YUSOF  
Contact No.: 65476358

Classification Of Case:

SN 154

Authentication Stamp  
NP168



Signature:

Singapore Police Force



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S1771519D**

Name  
**QUIK HOCK SOON**

Birth Date **11 Oct 1966**  
Issue Date **04 Oct 2012**

002111035A

For LKK/NAC Use Only

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S1771519D**

Name  
**QUIK HOCK SOON**

郭 福 順

Race  
**CHINESE**

Date of birth **11-10-1966** Sex **M**

Country of birth  
**SINGAPORE**

431

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

EFFECTIVE DATE

Class 3 Motor Cars=< 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 04 Oct 2012

NP 428A

Licence No. S1771519D

For LKK/NAC Use Only

NRIC No. **S1771519D**

Date of issue  
**06-04-2009**

Address  
**APT BLK 242 SERANGOON AVENUE 3  
#07-196  
SINGAPORE 550242**

## 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)

Certificate Number: 5083619957-02

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : SJE997D  
Chassis Number : MR053ZEE106101697
2. Name of Policyholder : QUIK HOCK SOON
3. Effective Date of Insurance : 15 Oct 2018
4. Expiry Date of Insurance : 14 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 business or profession.

**This Policy does not cover**

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) 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\$600
EXCESS (SECTION 2)	: N/A
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	: QUIK HOCK SOON
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
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 : REV AUTO PTE LTD (00000571335)

Date of Issue : 21 Sep 2018 00:10 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

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



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



## Claim Handling

Accident MT/1051018

Policy No.	5083619957-02	Vehicle No.	SJE997D	GST Registration No.	
Certificate No.					
Policyholder Name	QUIK HOCK SOON			Policyholder NRIC	S17711
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	97832789	Contact No.(Office)		Contact No.(Home)	
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	No	NCD Entitlement(%)	20	Private Hire	No
<b>Accident Details</b>					
Report Date	28/06/2019 14:47	Accident Report Within 24 hrs	Yes	Accident Type	Collisio
Date of Accident	27/06/2019	Time of Accident hh:mm	13:05	Country of Accident	Singap
Reporting Centre		Orange Force		ICM No.	
Accident Location	UPP SERANGOON RD TWDS SENGKANG EAST DR				
<b>Excess</b>					
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		
<b>Benefits</b>					
<b>GST Registered Information</b>					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified	Yes		
Modification History					
<b>Policyholder Mailing Address</b>					
Address 1	BLK 242 #07-196	Address 2	SERANGOON AVENUE 3	Address 3	SINGA
Address 4		Address Type	Singapore address	Post Code	55024
Unit No.	07-196	Related Policy Number	5083619957-02		
<b>OI Driver Info</b>					
Driver Name	QUIK HOCK SOON	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S1771519D	Driver DOB	11/10/
Register Date of Driver License	04/10/2012	Driver Age	52	Driving Experience	6
Contact No.(Mobile)	97832789	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 242 #07-196	Address 2	SERANGOON AVENUE 3	Address 3	SINGA
Address 4		Address Type	Singapore address	Post Code	55024
Unit No.	07-196				
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No		

Modification History

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	QUIK HOCK SOON
Contact No.(Mobile)		Contact No.(Home)	NIL
Email Address		Vehicle Number	SJE997D
Claim Description	SJE997D / FBG9149K ON 27 Jun 2019		
Preferred Workshop	0	Insured Liability	Not at Fault
Workshop No.	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Finalisation		GIA report	Received
Date Registered		Claim Close Date	28/06/2019 14:49
Report Taken By			LIJEW SHAN HUI
<input checked="" type="checkbox"/> Print AK letter			

Save Submit

## Attachment

Accident No.	MT/1051018	Claim No.	001
--------------	------------	-----------	-----

Last Doc. Received

☒ Yes ☐ No

Upload Date

28/06/2019 14:50

Path \*

Category \*

Confidential

Urgency \*

Choose File No file chosen  
 Choose File No file chosen  
 Choose File No file chosen  
 Choose File No file chosen  
 Choose File No file chosen  
 Choose File No file chosen  
 Message Read

Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
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Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jun 2019 14:50	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-6-28
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jun 2019 14:50	SAS	Normal	SAS 2019-6-28
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jun 2019 14:50	Photos	Normal	Photos 2019-6-28
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jun 2019 14:50	Photos	Normal	Photos 2019-6-28
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jun 2019 14:50	Photos	Normal	Photos 2019-6-28
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jun 2019 14:50	Photos	Normal	Photos 2019-6-28
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jun 2019 14:50	Photos	Normal	Photos 2019-6-28
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jun 2019 14:50	Photos	Normal	Photos 2019-6-28
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jun 2019 14:49	Photos	Normal	Photos 2019-6-28
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jun 2019 14:49	Photos	Normal	Photos 2019-6-28
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jun 2019 14:49	Photos	Normal	Photos 2019-6-28
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jun 2019 14:49	Photos	Normal	Photos 2019-6-28
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jun 2019 14:49	Photos	Normal	Photos 2019-6-28
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jun 2019 14:49	Photos	Normal	Photos 2019-6-28
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jun 2019 14:49	Photos	Normal	Photos 2019-6-28

Video List

Uploaded By/Date	Folder Date	File Name	Source
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