NATIONAL Assessment Centre S	Services (Mariano)			
	cb description	Date & Time Completed	Done	by
Ref No - MA/INC19011554/Cr3	SAS e-filing			
Veh No GBE 4861E	E-mail (within Shrs, AJC 2hrs)			
DOA 29/06/19 1700	i-Motor Claim Form	m7/1051227- 1	201	
@	i-Motor W/O (Within: OD 2hr			· ·
OD TP (Reporting Only	i-Photo Uploaded			
TP Insurer:	Assessment/Survey Report		-	
Transurer.	Ass't Report by Fax / Hand	to Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (Tel: Fax	C	
TP Particulars: Veh No:	BC91784 INC()/Non-INC()		
Owner / Driver: (Tel:)	ACCEPTED IN
Policy No: () Period	()	Cover Type: ()	
Confirmed by: (Date:	Time:)	
	e-Est. Status (WO): N: 0-2	20%; P: 21-79%. F: 80-100	0%]	
	ranty: YES () / NO ()		
Excess: (\$) Loading: \$1,000 ()/\$2,000()			
General Remarks:-	And the surface of the same			A. CHEST
 QC Check / Post Repair Inspection Upload Resurvey Photo [Repair Cost > \$3000 	()			
Injury :				
Date/Time Actions			esyaj Brandania	
				\$214
40.000	Invoice Pre	paration Checklist	Anit (\$)	Amt (\$)
NA1905177 Laimant's Particulars:-	1) AR : Acciden		1st Bill	Add Bil
	2) DA : Damage	Assessment (\$100); INC (\$80)		
Priver/Owner:	3) TF : Towing I 4) FT : Follow-T		-	
ontact No:	The Real Property and the Control of	Through Survey (Resurvey) \$3 against INC Only (wef 10 Jan 2005)	30	
amaged Portion:	6) TR : Re-inspe	ection \$	75	
		+ SMRT Survey \$16	50	
C Checked by (Engr-In-Charge):	0)111001144	onal Services:-		
	OD*			
	*N5: Courtesy *N6: Repair C	y Car / Tpt Allowance Sco-ordination S	\$5	
auditors' Comments :-	*N5: Courtesy *N6: Repair C *N7: Post Rep	y Car / Tpt Allowance Sco-ordination Scair Inspection \$5	\$5 10 25	
at 1:	OD* *N5: Courtes *N6: Repair C *N7: Post Rep *N8: DV / Co TP (N11): Th	y Car / Tpt Allowance Stoodination St	\$5 10 25 \$5 20	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	*N5: Courtes *N6: Repair C *N7: Post Rep *N8: DV / Co	y Car / Tpt Allowance Stoodination St	\$5 10 25 85	

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 witholding 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,	20 00	
AND SEASON SERVICES	ACCIDENT STATEMENT	Same and the same
Date Of Report	01/07/2019 09:25	
Date Of Accident	29/06/2019 17:00	
Exact Location Of Accident	WOODLANDS CENTRE CARPARK	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	NAME OF THE PARTY
Vehicle Registration Number	GBE4861E	
Insured/Policyholder		
Name Of Registered Owner	AVIO MEDIA	
Co Reg No	53118930M	
Email Address	AUGUSTGUY@HOTMAIL.COM	
Mobile Phone No		
Alternative Phone No	OFFICE-94884421	
Vehicle Particulars		SEPTEMBER SERVE

Manufacturer FIAT

Model DOBLO MAXI

Exact Purpose for which vehicle was being used at WORK

time of accident

Are you claiming under your own insurance policy for repair to your vehicle?

If No, Please state action to be taken

Vehicle Category COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 5106308913

Cover Note Number

Driver

Name of Driver NG CHIN SAN, ERIC (HUANG ZHENSHAN)

NRIC No S7823361C Date Of Birth 19/08/1978 Occupation INDOOR Date Of Driving Pass 22/11/2004

Driving Experience 14 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-94884421

Fax Number Contact Number

EMail Address AUGUSTGUY@HOTMAIL.COM Address

BLK 522 ANG MO KIO AVE 5

#03-4200

Postcode

560522

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)

2

involved in the accident

NO

Was any body injured in the Accident? 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)

2

Passenger 1

NAME:

: KAREN

GENDER:

: FEMALE

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

I WAS EXITING MY VEH FROM THE CARPARK LOT AT WOODLANDS CENTRE CARPARK.AFTER I EXIT FROM THE CARPARK I MAKE A RIGHT TURN TO THE SERVICE RD AND MY VEH COLLIDED INTO THE LEFT SIDE PORTION OF VEH В.

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

GBC9178Y

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

LOW JIA HENG

NRIC/Passport Number

S9084174B

Contact Number

97870292

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
 - 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:
 - 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

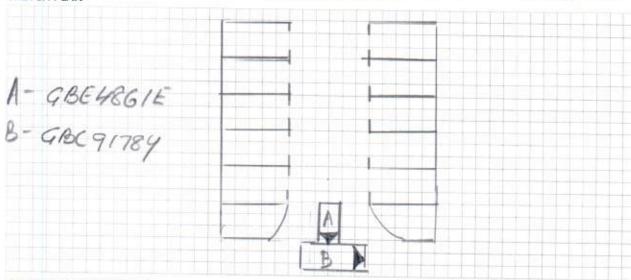
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT.

Pls	rehu	to the	statement.	
	0		00 120120	

I/We declare the g 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.:

REPUBLIC OF SINGAPORE IDENTITY CARD NO. S7823361C



NG CHIN SAN, ERIC (HUANG ZHENSHAN)

振

CHINESE Date of birth 19-08-1978

Country of birtin SINGAPORE

1 S 7 8 2 3 3 6 1 C

NG CHIN SAN, ERIC (HUANG ZHENSHAN, ERIC)

Ber Date 19 Aug 1978 Dane 01 Aug 2003

For LKK/NAC Use On





20-08-2008

APT BLK 522 ANG MO KIO AVENUE 5 #03-4200 SINGAPORE 560522

NRIC No: \$78233610

Date 18/02/2019

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

For LKK/NAC Use Only For LKK/NAC Use Only

S7823361C

s/No. 9000018672

NP 478A

ASSIGNMENT (IDAC)

sy CSO- Na	ture of Accident:					By Assessor- 1) Vehicle Information
) Vehicle hit V	ehicle:	2) Vehicle hit 27				Veh No. GBE 4861E YI Regul & Dec / 2015
a) Motorcar	()	a) Pedestrian	()		Type: M.Car / M.Cycle / Bus Van Lorry / Taxi / Prime Mover / WEV
b) Micycle	()	b) Animal	()		/Truck / Trailer or
c) Bicycle	()					Make & Model Front Doblo GroMaxi 1598
) Vehicle hit R	oad Side Objects:					Colour Red Transmission Type (Aut)/ Manual
a) Govin Proper)	y ()	b) Road Work Object	(ý		Eng/No: Sp.Reading 91859
(Lig. signboar	f, borner, tree etc)	c) Private Property	()		CAMOR XFA 263 040006B20476
) Vehicle drop	into drain		()		Gen. Cond. Good Fair / Poor / Burnt or
) Damage due	to Act of God:					Steering: morder Jammed / Leaked / Burnt or
a) Fallen Objec	1 ()	b) Flood	()		Brake: (Inordo) / Jammed / Leaked / Burnt or
c) Other,						Modi: (Nil)/S/Rim / STD A/Rim or
) Parked & For	and Damaged:					Tyre Size. F: 195/60 RH
a) Vandalism	()	b) Hif by Moving Object	1)		R: V
) Theft Case				100		(BS) DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
a) Stolen	()	b) Damage found	(TOYO / YOKO or
		when recovered.				Front Rear
3) Fire						R/Bal. 6 mm R/Bal. 6 mm
a) Whilst drivin	a (S. E.	b) Parked	W.	3		L/Bal. 6 mm L/Bal. 6 mm
WANTE CONTROL	All Park	6-80000-00000	10.8	0.7	1	TOTAL CONTRACTOR OF THE PARTY O
Accident dat	e more than 24hrs		1)		Parallel Import Yes / (No) Towed-In: Yes / No
			110	80.5		Repair Type: (LS)/ LB.I Towing Required: (Yes) / No
Remarks for in	ternal information	William Control				No of Repair Days: 6 Vehicle in Idac: (Yes) / No
						D.O.I. 1/7/209 Time: 5.50pm
						1 1 1 2 1
						By Assessor- 2) Comments
						Dy 753565801 - 27 Comments Damages not due to recent accident.
						2) Damages do not seem hit onto:
Remarks to an	pear in Works Order	& Assessment report				a.Vehicle () b.Motorcycle () c.Bicycle () d.Pedestrian ()
1) Potential Tot		u Assessment report				e.Animal () I.Govm Object () g.Road Work Object ()
2) SRS Light or						h.Private Property () i.Drain () j.Road Kerh/Grass Verge ()
	1					The state of the control of the cont
ABS Light on	()					Vehicle does not seem damaged as a result of: Fally Chical Chi
						a.Fallen Object () b.Flood () c.Vandalism (), d.Fire ()
						e.Moving Object () f.Stolen () g.Stolen & Recovered ()
						Time Started: Time completed
		**				t) CSO
						2) ASS
						Ti Entire Cueration Constelled Time:

VAN/LORRY (Frt)

GRE

Aug 2005

	nt Portion			
NA		Item	CON	AC
100	THE RESERVE		DO	AC
100	Section 1. Control		CRA	1
100	10000	0 Frt Bumper	DD	1
200			ERA	1
200		The Dumper Lower Transic	RR	1
200	4 99144	Frt Bumper LH Lower Carnish Retain	CRA	1
100	The second second	Frt Bumper Bracket		2
100	CONTRACTOR OF THE PERSON	Frt Bumper Reinforcement	-	
200		Frt Bumper Signal Lamp	00	
101	7 995100	Frt LH Bumper Fog Lamp Cover	-	
1013	991355	Frt RH Bumper Fog Lamp Cover	CAL	4
1.015	222012	PRILII Bumper Fog Lamo		
1026	利 995080	Fit RH Bumper Fog Lamp	-	-
1021	991793	Frt Grille	CRA	-
1022	991328	Frt Grille Emblem	MEC	-
2000	990247	Frt Griffe Sticker	WELL	-
1023				-
2007		Frt Panel	-	-
2008	991874	Frt Lower Panel		
2009				
2010				
1024	991893	Frt Panel Garnish		
2012	001522	Frt Apron Panel		
2013		Frt Corner Panel		
2014	995245	Frt Comer Panel Signal Lamp		10.14
2015		Frt Signal Lamp LH		J.
1029		Frt Signal Lamp RH		
1030		Frt LH Headlamp Assy	BR	
1031	995088	Frt LH Headlamp Court Bracket.	CRA	
1032	995089	Frt RH Side Lamp		
2016	992149	Frt Wiper Panel		-
2017	995043	Frt Wiper Nozzle	-	-
1120	992140	Frt Wiper Arm	_	-
1121	992142	Frt Wiper Blade		-
2018	992145	Frt Wiper Link	-	+
2019	992148	Frt Wiper Motor		-
1122	995045	Wiper Panel Garnish		+
1114	992093 1	rt Windscreen		-
1115	992097 1	rt Windscreen Rubber		-
1117	992098 F	rt Windscreen Sealant	-	-
2020	992114 F	rt Windscreen Outer Pillar		1
2021	992113 F	rt Windscreen Inner Pillar		
1118	991019 E	RP Bracket		
2022	991020 F	SRP Unit		
2023	991950 1	rt Side Mirror (Big) rt Side Mirror (Small)		
2024	991962 F	rt Side Mirror (Small) rt Side Mirror (Round)		
2025		rt Wing Mirror (Round)		
1025		rt Support Panel		-
1033	990248 B		210	-
1035	990287 B	onnet Lock	Suc/	
1037	990273 B	onnet Hinge	-	-
1039	990305 B	onnet Rubber	-	-
1042	990119 A	ir Con Condenser		-
	990122 A	ir Con Fan Assy		-
	990149 Ai	r Con Liquid Pipe		
	995066 Ai	r Con Receiver Drier	-	
1052	995074 Ra	diator		1
	992738 Ra	diator Cowling		
	992742 Ra	diator Fan Assy		
	992758 Ra	diator Hose Top		1
	992741 Ra	diator Expansion Tank		
	92596 Oil	Cooler		
059 9	94431 Pos 90151 Air	wer Steering Cooler Pipe -		
		Duct		
	90219 Bat	Cleaner Assy		
060 0	00222 Bal	iery		

NAC	INC	Vehicle No: GBE 1	100	-	=
1085	991011	Engine Under Cover	CC)N A	CQ
1086	990046	Engine Under Cover Engine Mounting			
2027	990940	Engine Mounting			
2027	331200	Frt Cabin Assy			1
2028	991501	Frt Cabin Mounting			
THE PERSON NAMED IN	991502	Frt Cabin Rear Panel			
1092	991520	Frt LH Chassis Member			+
1093	991520	Frt RH Chassis Member		-	1
1094	990728	Frt Vertical Cross Member			15
1095	991863	Frt Lower Cross Member	-	+	+
2030	990143	Air Con Evaporator Assy		-	-
2031	990106	Air Con Blower	-	-	-
1082	990427	Brake Master Pump Assy	-	-	-
1083	990403	Brake Booster Pump Assy	-		
2032	990431	Brake Pedal			
2033					
2034	THE RESERVE AND ADDRESS OF THE PARTY.	Accelerator Pedal			
1127	990627	Clutch Pedal			
CONTRACTOR OF THE PARTY OF THE	994483	Steering Wheel Airbag			
1128	994485	Steering Wheel Airbag Sensor		1	-
1131	990029	Airbag Control Unit			
	991922	Frt RH Seat Belt Assv		1	-
1135	995182	Frt LH Seat Belt Assy	1	-	-
1124	990753	Dashboard Assv	-	-	-
1125	992282	Glove Box Cover	-	-	-
1126	992281	Glove Box Compartment	-	-	_
		Frt LH Fender	10	-	-
ACCUPATION AND ADDRESS OF	995072	Frt LH Fender Inner Panel	Bus	1	
100	991740	Fed I U Fander Inner Panel			
PERSONAL PROPERTY.	005120	rt LH Fender Inner Shield		17	W
MARIE	9931/9 1	rt LH Mudflap			
2035	994966 1	rt LH Wheel Guard			
102	995170 1	rt LH Wheel Rim	1		-
104	995065 I	rt LH Tyre			-
105	995071 I	rt RH Fender			
106	91739 F	rt RH Fender Inner Panel	1		-
109 9	91740 F	rt RH Fender Inner Shield	-		-
110 5	91884 F	rt RH Mudflap			-
036 9	94966 F	rt RH Wheel Guard	-		_
111 9	92087 F	rt RH Wheel Rim	-		
	95065 13	rt RH Tyre			
255 9	95326 17	rt LH Door	-		
The second lines			SCR	R	
	95140 F	rt LH Door Protector		1	
Territoria	95104 F	rt LH Door Hinge	U.		
258 9	95142 F	rt LH Door Wing Mirror		x	
262 9	95103 F	rt LH Door Glass	-	-	-
263 9	91595 F	rt LH Door Glass Regulator			-
264 9	91596 F	rt LH Door Glass Regulator Motor		-	
265 9	91662 F	t LH Door Rubber		-	
66 9	91636 F	t LH Door Outer Handle	•	-	
72 9	91617 Fr	t LH Door Inner Trim Board	-		
16 9	95327 F	t RH Door	-	-	
17 9	91654 F	t RH Door Protector			
18 90	01601 Fr	t RH Door Hinge	-		_
	1685 Fr	PH Door W: A C			
WITH A STORY		t RH Door Wing Mirror			
Ministration of the last		t RH Door Glass			
Address	1595 Fr	t RH Door Glass Regulator			7
	1596 Fr	t RH Door Glass Regulator Motor			95
26 99	1002 Fr	RH Door Rubber			-
27 99	1636 Fr	t RH Door Outer Handle		-	-
超 99	1617 Fr	RH Door Inner Trim Board		-	-
37 99	1644 Frt	Door Frt Pillar	-	-	-
		Door Rear Pillar		-	-
		Wheel Arch Panel			
10 99	2069 Frt	Wheel Arch Panel Garnish			HI
		Stan David			
12 00	1400 P	Step Panel			
2 99	1438 Lit	Step Panel Top Garnish			
3 99	1495 Frt	Step Panel Inner Garnish			T
3 99;	5053 Wi	per Washer Tank			
	1247 Stic	ker		-	
6 990	-				
6 996	First	No. Plate Garnish.	17	1	

1069 990223 Battery Bracket

Claim Handling

LOS 3AL SUB Policy No. 5106308913 Vehicle No. G8E4861E GST Registration No. Certificate No. Policyholder Name AVIO MEDIA Policyholder NRIC 53118930M Product Code COMMERCIAL VEHICLE INSURAN Cover Type Comprehensive Loading 0 Contact No.(Mobile) 94884421 Contact No.(Office) Contact No.(Home) 0 Email Address Special Remark No T KFK . No Yes TCA No Yes eCode Reason NCD Protection No NCD Entitlement(%) 20 Private Hire No V Accident Details Report Date Accident Report Within 01/07/2019 09:38 Accident Type Side Swipe Date of Accident 29/06/2019 Time of Accident hh:mm 17:00 Country of Accident Singapore Reporting Centre NATIONAL ASSESSMENT CENTR. Orange Force No ICM No. Accident Location WOODLANDS CENTRE CARPARK **▽** Excess Own damage Excess 600.00 Additional Excess Windscreen Excess 100.00 Unnamed Driver Excess Outside Singapore OD Excess Outside Singapore TP Third Party Excess 0:00 Excess **▽** Benefits GST Registered Information GST Registered No GST Registration Date GST Registration No. GST Status Verified Yes Modification History 01/07/2019 10:09:05 System changed GST Status Verified from No to Yes Address 1 BLK 3026 #02-156 Address 2 UBI ROAD 1 Address 3 KAMPONG UBI INDUSTRIAL EST Address 4 SINGAPORE 408719 Address Type Singapore address Post Code 408719 Unit No. 02-156 Related Policy Number 5106308913 ♥ OI Driver Info Driver Name Unnamed Driver Driver Type Unnamed Driver Unnamed driver Name NG CHIN SAN, ERIC (HUANG ZHE Driver NRIC 57823361C Driver DOB 19/08/1978 Register Date of Driver 22/11/2004 Driver Age 40 Driving Experience 14 Contact No.(Mobile) 94884421 Contact No.(Office) 0 Contact No.(Home) 0 Address 1 BLK 522 Address 2 ANG MO KIO AVENUE 5 Address 3 SINGAPORE 560522 Address 4 Address Type Singapore address Post Code 560522 Unit No. #03-4200 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 **♥** Investigation Claim 001 OD-MD Claim Case Officer Zuraimee Bin Mantau Claim Type OD-MD Insured Name AVIO MEDIA Insured NRIC 53118930M Contact No.(Mobile) Contact No. Contact No. (Office) 94884421 Email Address OI Vehicle Number GBE4861E TP Vehicle Number GBC9178Y Claim Description GBE4861E / GBC9178Y ON 29 Jun 2019 Name of Preferred Preferred income to Insured Fully at assign report Resolved Workshop Bonniet Nealisation Yes Preferered Repair Option Date Registered 01/07/2019 10:12 Claim Close Date Date Received 02/07/2019 09:1 Report Taken By Workshop ROSLINDA Total Loss but Repairer Repaired **OD Excess** Print AK letter Collected by Workshop Modification History

https://giclaim.income.com.sg/gcs/icm/eclaim/damageAssessmentSave.do

· Task Transfer · Exit

pproval			Reason			
emarks						
damage asse	essment Attachment					
♥ Vehicle In	ifo					
ehicle Make	FIAT	Vehicle N	Model	DOBLO CARGO	Engine Capcity	
ate of egistration	18/12/2015	Classis M	No.	ZFA26300006B20476	engine capeity	0,965
owing equired •	● Yes ◎ No	Vehicle i	n IDAC *	● Yes □ No	Parallel Import *	0 w. 0
ype of Tender	Own Damage	* Assessor	r Name *	SIMON	Survey Current Statu	
DAC/Workshop ame	NATIONAL ASSESSMENT CENT	TR IDAC/W	orkshop Location	51 UBI AVENUE 1 #01-25 PAYA	Survey Current Statu	is .
/indscreen arts & Labour ost		Total Los	ss *	○ Yes ● No		
larket alue(\$)		Scrape V	/alue(\$)		Economical Repair Va	L. area
8100	NO DE REPAIR-OF DAVE ERT	BUMBER LOWER CAR		UMPER LH LOWER GARNISH RETAINER-RE		
emark for upplementary						
□ Damage L	isting					
Damage Lind a Part	isting	No.	Part No.	Description	*0	NY * Danie Code
Damage Lind a Part root Not Appli		No. 1	Part No. 32200101	Description NUMBER PLATE (FR	- Property of the Parket of th	2ty * Repair Code 1 Replace
Damage Lind a Part root Not Appli ABS	cable			NUMBER PLATE (FR	ONT)	1 Replace
Damage Lind a Part root Not Appli ABS ABSORB	cable ER	1	32200101	NUMBER PLATE (FR NUMBER PLATE BASE	ONT) [1 Replace
Damage Lind a Part root Not Appli ABS	cable ER	1 2	32200101 32200201	NUMBER PLATE (FR NUMBER PLATE BASE BUMPER (FRON	(FRONT)	1 Replace 1 Replace 1 Replace
Damage Li ind a Part root Not Appli ABS ABSORB ACCELE ACTUATI ADVERTI	cable ER	1 2 3	32200101 32200201 16000101	NUMBER PLATE (FR NUMBER PLATE BASE BUMPER (FRON BUMPER SPONGE (FI	(FRONT)	1 Replace 1 Replace 1 Replace 1 Replace
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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

ehicle Check-In			
/ehicle No: <u>68 E 486(E</u>	Date In:	Time In:	with Keys: Yes / No
		For Office use	
		Attended by:	
Workshop Collection of Vehicle			1
Workshop: Sey Goon			
Collection Date: 03/07/18	Time: 16	24 with Keys: Yes / No	
Tow Truck No: WFEGGE	Tow Man:	NRIC:	1822610C
Signature: \$ 8669102		V	
Signature: 2009/02	5.		
For office use		923 STM	
Attended by: Shan Hui		Approved by:	
Workshop Return of Vehicle Workshop:			8
Returned Date:		with Key: Yes / No	
* Tow In / Drive In		k()	
Tow Man / Workshop Representative: _		NRIC:	
Signature:		For office us	e
		Attended by:	
Owner Collection of Vehicle			
Collection Date:	Time:	with Key: Yes / No	
Owner:		NRIC:	1
Signature:			
For office use			
Attended by:		Approved	by:

LKK Paya Ubi

From:

Zuraimee Bin Mantau <zuraimee.mantau@income.com.sg>

Sent:

Wednesday, 3 July 2019 2:38 PM

To: Cc: Chew Goon Motor - Mrs Chew LKK Paya Ubi

Subject:

Vehicle GBE4861E, OD Claim No: MT/1051227-001, DOA: 29/06/2019

Dear Chew Goon Motor

Excess \$600 applies.

Vehicle is currently at NAC Paya Ubi.

Please arrange to tow away the vehicle and update Mr Eric Ng at 94884421 once vehicle is in the workshop.

Strictly no further supplementary is allowed.

Please forward the invoice and DV within 7 working days to us once repairs has been done. Update the 'Repair Status' when repairs are done.

Our Ref: MT/CA/OD/051/1051227-001/ZBM

03 Jul 2019

CHEW GOON MOTOR

BLK 10 AMK IND PARK 2A AVE 5 #01-15.16&17 AMK AUTOPOINT

SINGAPORE 568047

Dear Sir

CLAIM NUMBER: MT/1051227-001

REPAIR OF VEHICLE NUMBER: GBE4861E

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

follows:

Award Date: 03 Jul 2019

Make: FIAT

Model: DOBLO CARGO Estimated Repair Days: 6

Location: NATIONAL ASSESSMENT CENTRE SERVICES

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

Benefits Applicable: N/A Excess Applicable: 600.00

Please note that supplementary items will not be allowed.

If you have any queries, please contact Zuraimee Bin Mantau at 64307891 or email us at

motor@income.com.sg.

Yours sincerely

Jenny Pe

Deputy Vice President

Motor Insurance

Thank you

Zuraimee Bin Mantau

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











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