



## 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	26/07/2019 13:24
Date Of Accident	25/07/2019 19:20
Exact Location Of Accident	PIE (TUAS) AFTER CTE EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJQ4802T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GOH SAIK HUANG
NRIC No	S8781126C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90733321
Alternative Phone No	OFFICE-90733321

### Vehicle Particulars

Manufacturer	HONDA
Model	FIT
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	5106604572
Cover Note Number	-

### Driver

Name of Driver	GOH SAIK HUANG
NRIC No	S8781126C
Date Of Birth	11/03/1987
Occupation	OUTDOOR
Date Of Driving Pass	25/11/2016
Driving Experience	2 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90733321
Fax Number	
Contact Number	OFFICE-90733321
EEmail Address	NOEMAIL

Address	BLK 3 PINE CLOSE #05-153
Postcode	392003
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 - HEAD TO REAR
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)	2
Passenger 1	NAME: : UNKNOWN
	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 TRAVELLING ALONG PIE(TUAS) AFTER CTE EXIT ON THE FIRST LANE, SUDDENLY VEH B WHICH WAS INFRONT OF ME JAMMED BRAKE, I MANAGE TO STOP BUT CANNOT STOP IN TIME, AS THE RESULT, MY VEH HIT ONTO THE VEH B REAR PORTION.

### 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	SJF1883L
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

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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.

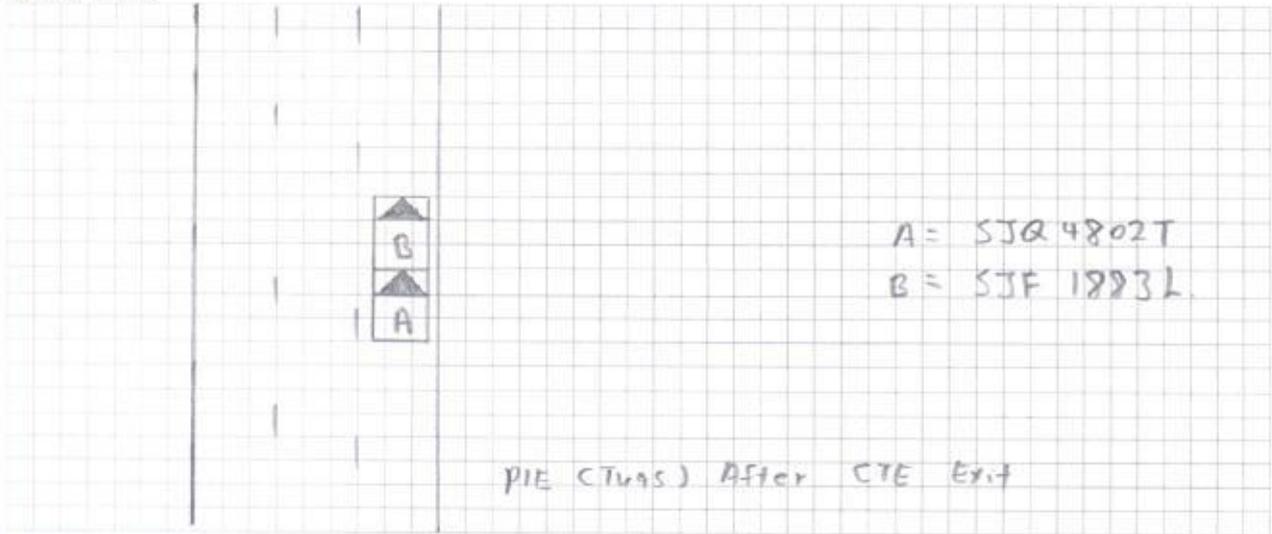
  
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

26/07/2019

  
\_\_\_\_\_  
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

Please Refer to Statement

DECLARATION

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

  
Policyholder's Signature  
Date & Time:  
26/07/2019

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

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

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

**ADDENDUM**

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : MNA119097804 Vehicle Registration No: SJQ4802T  
 Name(as shown in NRIC) : GOH SAIK HUANG NRIC/FIN/Passport No : S8781126C  
 (\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
 Address : \_\_\_\_\_ Singapore( )  
 Contact (Tel) : \_\_\_\_\_ Mobile No. : 90733321  
 Email Address : \_\_\_\_\_  
 Date of Accident : 25/07/2019 Time of Accident : 19:20  
 Place of Accident : PIE (TUAS) AFTER CTE EXIT  
 Insurance Company: NTUC

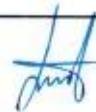
**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

AMEND REVERT FROM REPORTING TO OD CLAIMS

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Policyholder / Driver's Signature  
 Date: 29 July 2019

  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:  
 Date: 29/7/19

REPUBLIC OF SINGAPORE  
 IDENTITY CARD NO. S8781126C



Name  
 GOH SAIK HUANG

Race  
 CHINESE

Date of birth  
 11-03-1987

Country/Place of birth  
 MALAYSIA

Sex  
 M




REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S8781126C

Name  
 GOH SAIK HUANG

Birth Date: 11 Mar 1987

Issue Date: 25 Nov 2016

002632875C




9322781.



NRIC No. S8781126C



Nationality  
 MALAYSIAN

Date of issue  
 27-02-2014

APT BLK 3 PINE CLOSE #05-153  
 SINGAPORE 392003

NRIC No: S8781126C Date: 26/07/2017

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

	EFFECTIVE DATE
Class 2B Motorcycles =< 200 cc	25 Nov 2016
Class 3 Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg	25 Nov 2016

NP 426A

Licence No: S8781126C



For LKK/NAC Use Only

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.  Date of Accident

Vehicle No. (For Motor)  Certificate Number

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5106604572		GOH SAIK HUANG	58781126C	GPC	drive CLASSIC	SJQ4802T	SJQ4802T	03/01/2019	02/01/2020

Continue

## Claim Handling

## Accident MT/1055206

Policy No.	5106604572	Vehicle No.	SJQ4802T	GST Registration No.
Certificate No.				
Policyholder Name	GOH SAIK HUANG			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading
Contact No.(Mobile)	90733321	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	0	Private Hire

▼ Accident Details

Report Date	26/07/2019 17:57	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	25/07/2019	Time of Accident hh:mm	19:20	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	PIE (TUAS) AFTER CTE EXIT			

▼ Excess

Own damage Excess	600.00	Additional Excess	0	Windscreen Excess
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	600.00	
Third Party Excess	0.00	Outside Singapore TP Excess	0.00	

▼ Benefits

▼ GST Registered Information

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

▼ Policyholder Mailing Address

Address 1	BLK 3 #05-153	Address 2	PINE CLOSE	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	05-153	Related Policy Number	5106604572	

▼ OI Driver Info

Driver Name	GOH SAIK HUANG	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	S8781126C	Driver DOB
Register Date of Driver License	25/11/2016	Driver Age	32	Driving Experience
Contact No.(Mobile)	90733321	Contact No.(Office)		Contact No.(Home)
Address 1	BLK 3 #05-153	Address 2	PINE CLOSE	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	05-153			
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Comp.

Declaration

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

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	GOH SAIK HUANG
Contact No.(Mobile)	NIL	Contact No.(Home)	
Email Address		OI Vehicle Number	SJQ4802T
Claim Description	SJQ4802T / SJF1683L ON 25 Jul 2019		
Preferred Workshop Finalisation	0	Insured Liability	Fully at Fault
Repair Option	Preferred	Preferred Workshop, Name unknown	GIA report
Date Registered	26/07/2019 18:00	Received	
Report Taken By	LIEW SHAN HUI	Claim Close Date	

Print AK letter

Save Submit

Attachment

Accident No. MT/1055206 Claim No. 001  
 Last Doc. Received  Yes  No Upload Date 26/07/2019 18:01

Path *	Category *	Confidential
Choose File No file chosen	Clear Please Select	NO
Choose File No file chosen	Clear Please Select	NO
Choose File No file chosen	Clear Please Select	NO
Choose File No file chosen	Clear Please Select	NO
Choose File No file chosen	Clear Please Select	NO
Choose File No file chosen	Clear Please Select	NO
Message Read	Clear Please Select	NO

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Descr
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 26 Jul 2019 18:01	NRIC/ Driving License	Normal	NRIC/ Driving Li
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 26 Jul 2019 18:01	SAS	Normal	SAS 20
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 26 Jul 2019 18:01	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 26 Jul 2019 18:01	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 26 Jul 2019 18:01	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 26 Jul 2019 18:01	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 26 Jul 2019 18:01	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 26 Jul 2019 18:01	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 26 Jul 2019 18:01	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 26 Jul 2019 18:01	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 26 Jul 2019 18:01	Photos	Normal	Photos 2

Video List

Uploaded By/Date	Folder Date	File Name
<input type="button" value="Display in New Window"/> <input type="button" value="Scan and uploading"/>		



MOTOR CAR (Frt)

Front Portion

Vehicle No: **SJQ-48027**

NAC	INC	Item	CON	AC	Qty
1001	991886	Frnt Number Plate			
1002	991887	Frnt Number Plate Base	CRA		
1003	991889	Frnt Number Plate Garnish			
1004	991300	Frnt Bumper	DD		
1005	992341	Frnt Bumper Clips	MEC		
1006	991325	Frnt Bumper Bracket			
1007	991462	Frnt Bumper Side Retainer			
1008	991433	Frnt Bumper Reinforcement	DIS		
1009	991318	Frnt Bumper Beam	BT		
1010	991468	Frnt Bumper Sponge			
1011	991427	Frnt Bumper Protector			
1012	991420	Frnt Bumper Pad			
1013	991363	Frnt Bumper Grille			
1014	991301	Frnt Bumper Moulding			
1015	991407	Frnt Bumper Lower Spoiler			
1016	991438	Frnt Bumper Sensor			
1017	995100	Frnt LH Bumper Fog Lamp Cover			
1018	991355	Frnt RH Bumper Fog Lamp Cover			
1019	995079	Frnt LH Bumper Fog Lamp			
1020	995080	Frnt RH Bumper Fog Lamp			
1021	991793	Frnt Grille			
1022	991328	Frnt Grille Emblem	CRA		
1023	991799	Frnt Grille Chrome Moulding			
1024	991222	Frnt Apron Panel			
1025	992013	Frnt Support Panel	BT		
1026	992025	Frnt Support Panel Top Garnish Cover			
1027	992416	Horn			
1028	991277	Frnt Brace Panel			
1029	995153	Frnt LH Headlamp Assy			
1030	991821	Frnt RH Headlamp Assy			
1031	995088	Frnt LH Side Lamp			
1032	995089	Frnt RH Side Lamp			
1033	990248	Bonnet			
1034	991328	Bonnet Emblem	BK		
1035	990287	Bonnet Lock			
1036	990285	Bonnet Insulator	BT		
1037	990273	Bonnet Hinge			
1038	990261	Bonnet Damper	BT		
1039	990305	Bonnet Rubber			
1040	990252	Bonnet Cable			
1041	990311	Bonnet Stand			
1042	990119	Air Con Condenser	DD		
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			
1060	990070	Air Cleaner Assy			
1061	990056	Air Cleaner Hose			
1062	990089	Air Cleaner Resonator			
1063	991712	Frnt Exhaust Manifold			
1064	991713	Frnt Exhaust Manifold Cover			
1065	991054	Frnt Exhaust Manifold Sensor (Oxygen)			
1066	991714	Front Exhaust Pipe			
1067	990219	Battery			
1068	990224	Battery Cover			
1069	990223	Battery Bracket			
1070	990229	Battery Tray			

NAC	INC	Item	CON	AC	Qty
1071	992205	Fuse Box			
1072	994011	Relay Box			
1073	995053	Wiper Washer Tank			
1074	995052	Wiper Washer Tank Motor			
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			
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	Frnt LH Chassis Member			
1093	991520	Frnt RH Chassis Member			
1094	990728	Frnt Vertical Cross Member			
1095	991863	Frnt Lower Cross Member			
1096	995070	Frnt LH Fender			
1097	995072	Frnt LH Fender Inner Panel			
1098	995147	Frnt LH Fender Lamp			
1099	995148	Frnt LH Fender Protector			
1100	991740	Frnt LH Fender Inner Shield			
1101	995179	Frnt LH Mudflap			
1102	995170	Frnt LH Wheel Rim			
1103	994025	Frnt LH Rim Cover			
1104	995065	Frnt LH Tyre			
1105	995071	Frnt RH Fender			
1106	991739	Frnt RH Fender Inner Panel			
1107	991744	Frnt RH Fender Lamp			
1108	991752	Frnt RH Fender Protector			
1109	991740	Frnt RH Fender Inner Shield			
1110	991884	Frnt RH Mudflap			
1111	992087	Frnt RH Wheel Rim			
1112	994025	Frnt RH Rim Cover			
1113	995065	Frnt RH Tyre			
1114	992093	Frnt Windscreen Glass			
1115	992117	Frnt Windscreen Rubber			
1116	992108	Frnt Windscreen Moulding			
1117	992098	Frnt Windscreen Sealant			
1118	991019	ERP Bracket			
1119	991020	ERP Unit			
1120	992140	Frnt Wiper Arm			
1121	992142	Frnt 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	Frnt Driver Seat			
1133	991922	Frnt RH Seat Belt Assy			
1134	991899	Frnt Passenger Seat			
1135	995182	Frnt LH Seat Belt Assy			
1136	990247	Sticker			

**Claim Handling**

[Task Transfer](#) [Exit](#)

▼ **Accident MT/1055206**

[LOS](#) [SAL](#) [SUB](#)

Policy No.	5106604572	Vehicle No.	SJQ4802T	GST Registration No.	
Certificate No.					
Policyholder Name	GOH SAIK HUANG	Policyholder NRIC	S8781126C		
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	90733321	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(%)	0	Private Hire	No

▼ **Accident Details**

Report Date	26/07/2019 17:57	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	25/07/2019	Time of Accident hh:mm	19:20	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	ICM No.	
Accident Location	PIE (TUAS) AFTER CTE EXIT				

▼ **Excess**

Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

▼ **Benefits**

▼ **GST Registered Information**

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

▼ **Policyholder Mailing Address**

Address 1	BLK 3 #05-153	Address 2	PINE CLOSE	Address 3	SINGAPORE 392003
Address 4		Address Type	Singapore address	Post Code	392003
Unit No.	05-153	Related Policy Number	5106604572		

▼ **OI Driver Info**

Driver Name	GOH SAIK HUANG	Driver Type	Main Driver	Driver DOB	11/03/1987
Unnamed driver Name		Driver NRIC	S8781126C	Driving Experience	2
Register Date of Driver License	25/11/2016	Driver Age	32	Contact No.(Home)	
Contact No.(Mobile)	90733321	Contact No.(Office)		Address 3	SINGAPORE 392003
Address 1	BLK 3 #05-153	Address 2	PINE CLOSE	Post Code	392003
Address 4		Address Type	Singapore address		
Unit No.	05-153				
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
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Modification History

▼ **Investigation**

**Claim 001 OD-MD**

▼ **Claim Case Officer Tan Siew Choo**

Claim Type	OD-MD	Insured Name	GOH SAIK HUANG	Insured NRIC	S8781126C
Contact No.(Mobile)	NIL	Contact No. (Home)		Contact No. (Office)	
Email Address		OI Vehicle Number	SJQ4802T	TP Vehicle Number	SJF1883L
Claim Description	SJQ4802T / SJF1883L ON 25 Jul 2019			Name of Preferred Workshop	0
Preferred Workshop	<input type="radio"/> No <input checked="" type="radio"/> Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Insured Liability report	Fully at fault
Date Registered	26/07/2019 18:02	Claim Close Date		Date Received	30/07/2019 09:4
Report Taken By	LIEW SHAN HUI	Workshop Repairer		Total Loss but Repaired	
				OD Excess Collected by Workshop	

Print AK letter

Modification History

Special Claim Creation Approval

Approval Reason

Remarks

damage assessment Activity Handling Attachment

Vehicle Info

Vehicle Make	HONDA	Vehicle Model	FIT	Engine Capacity
Date of Registration	13/05/2009	Classis No.	GE61149631	
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 *
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(\$)

REMARK:NO OF REPAIR DAYS:6 DAYS.1X AIR CON SUCTION PIPE - UNCONFIRM.1X AIRCON LIQUID PIPE - UNCONFIRM.1X AIR DUCT - UNCONFIRM.

Remark

Remark for Supplementary

Damage Listing

Find a Part	No.	Part No.	Description	Qty *	Repair Code *
root					
Not Applicable	1	32200101	NUMBER PLATE (FRONT)	1	Replace
ABS	2	32200201	NUMBER PLATE BASE (FRONT)	1	Replace
ABSORBER	3	16000101	BUMPER (FRONT)	1	Replace
ACCELERATOR	4	16002401	BUMPER CLIPS (FRONT)	6	Replace
ADVERTISMENT STICKER	5	16005101	BUMPER RETAINER (FRONT LEFT)	1	Replace
AIR BAG	6	16005102	BUMPER RETAINER (FRONT RIGHT)	1	Replace
AIR BLOWER	7	16005001	BUMPER REINFORCEMENT (FRONT)	1	Replace
AIR BOX	8	16003201	BUMPER GRILLE (FRONT)	1	Unconfirm
AIR CHAMBER BOX	9	27100101	GRILLE (FRONT)	1	Replace
AIR CLEANER	10	27100801	GRILLE EMBLEM (FRONT)	1	Replace
AIR COMPRESSOR	11	41300101	SUPPORT PANEL (FRONT)	1	Replace
AIR CON	12	28500101	HORN (LEFT)	1	Unconfirm
AIR CON (VAN)	13	28500102	HORN (RIGHT)	1	Unconfirm
AIR COOLER	14	15600101	BRACE PANEL (FRONT)	1	Unconfirm
AIR DISTRIBUTOR	15	27700101	HEAD LAMP (LEFT)	1	Unconfirm
AIR FILTER	16	27700102	HEAD LAMP (RIGHT)	1	Unconfirm
AIR FLOW	17	149001	BONNET	1	Replace
AIR GRILLE	18	14903401	BONNET LOCK (LOWER )	1	Replace
AIR HORN	19	14902201	BONNET HINGE (LEFT)	1	Replace
AIR INTAKE	20	14902202	BONNET HINGE (RIGHT)	1	Replace
AIR RESONATOR BOX	21	112023	AIR CON CONDENSER	1	Replace
AIR THROTTLE BODY AND SENSOR	22	112060	AIR CON FAN	1	Unconfirm
ALARM	23	112044	AIR CON DISCHARGE PIPE	1	Unconfirm
ALTERNATOR	24	344001	RADIATOR	1	Unconfirm
ALUMINIUM PANEL - SIDE	25	344005	RADIATOR COWLING	1	Unconfirm
AMPLIFIER	26	344008	RADIATOR FAN	1	Unconfirm
ANTENNA	27	344007	RADIATOR EXPANSION TANK	1	Unconfirm
ANTI ROLL	28	141001	BATTERY	1	Unconfirm

Save Submit



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: SJQ 4802T Date In: \_\_\_\_\_ Time In: \_\_\_\_\_ with Keys: Yes / No

*For Office use*

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

Workshop Collection of Vehicle

Workshop: ABWIN

Collection Date: 31/7/2019 Time: 1245 with Keys:  Yes /  No

Tow Truck No: GP5319G Tow Man: LEONG NRIC: S1645987I

Signature: [Signature] 86803200 (YNI)

*For office use*

Attended by: ROSLINDA

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:** Tan Siew Choo <siewchoo.tan@income.com.sg>  
**Sent:** Tuesday, 30 July 2019 4:05 PM  
**To:** NAC ; Abwin - Abby Lim (abbylim@abwinm9.com); Abwin-Sharifah (sharifah@abwinm9.com); Abwin-Jack Goh (jackgoh@AbwinM9.com); Abwin (motorclaims@AbwinM9.com)  
**Subject:** SJQ4802T, OD claim no : MT/1055206  
**Importance:** High

Dear IDAC and Abwin,

Learnt that veh is in IDAC (IDAC – pls confirm), do assist with the necessary arrangement asap.

**Dear Abwin,**

OD excess of \$600/- is applicable, pls assist to liaise with owner Mr Goh at tel : 90733321.

No survey required only for this repair works.

**FOR PAYMENT:** Please forward the Invoice & Discharge Voucher together with some photos on after repairs within 14 days after the repair has been done/ finalized with Surveyor to my email.

Regards.

**Tan Siew Choo**  
Senior Executive  
Motor Insurance  
T +65 6430 7882  
[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)



Our Ref: MT/CA/OD/051/1055206-001/TSC

30 Jul 2019

ABWIN SERVICE PTE. LTD.

8 KAKI BUKIT AVENUE 4

#07-48 PREMIER @ KAKI BUKIT GATE 2

SINGAPORE 415875

Dear Sir

**CLAIM NUMBER: MT/1055206-001**

**REPAIR OF VEHICLE NUMBER: SJQ4802T**

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

Award Date: 30 Jul 2019

Make: HONDA

Model: FIT

Estimated Repair Days: 7

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 Tan Siew Choo at 64307882 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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