

NATIONAL Assessment Centre Services

Date In: 29/07/19	Job description	Date & Time Completed	Done by
Ref No: NA/INC19013297/13	SAS e-filing		
Veh No: XE11045	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 27/07/19 1115	i-Motor Claim Form	MT/1055504	-001
OD (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: XD864T	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

NA/905777	Invoice Preparation Checklist		Amt (\$)	Amt (\$)
			1st Bill	Add Bill
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);			
Driver/Owner:	2) DA : Damage Assessment (\$100); INC (\$80)			
Contact No:	3) TF : Towing Fee \$40/\$45			
Damaged Portion:	4) FT : Follow-Through Survey \$120			
	5) FT : Follow-Through Survey (Resurvey) \$30			
	For claiming against INC Only (wef 10 Jan 2005)			
	6) TR : Re-inspection \$75			
	7) N1 : Idac DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
	OD*			
	*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 \$0			
QC Checked by (Engr-In-Charge):	Invoice dated	Fee Charged		
Auditors' Comments :-	Invoice dated	Fee Charged		
Cat. 1:				
Cat. 2 / 3:				

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	29/07/2019 17:08
Date Of Accident	27/07/2019 11:15
Exact Location Of Accident	JLN BESUT INFRT OF 9 JLN BESUT ENTRANCE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XE1104S
Insured/Policyholder	
Name Of Registered Owner	WAH & HUA PTE LTD
Co Reg No	200000076M
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-81254219

Vehicle Particulars

Manufacturer	IVECO
Model	TRAKKER
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5111430253
Cover Note Number	

Driver

Name of Driver	HOU GUIFENG
Passport No/FIN	G8473642U
Date Of Birth	24/09/1975
Occupation	OUTDOOR
Date Of Driving Pass	12/04/2010
Driving Experience	9 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88265529
Fax Number	
Contact Number	
Email Address	NELSON_NG@WAHHUA.COM

Address	11 KRANJI CRESCENT
Postcode	728656
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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?	YES
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:	WITH WORKSHOP
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XD864T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	HOU GUIFENG
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	XE1104S
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

SKETCH PLAN

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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:

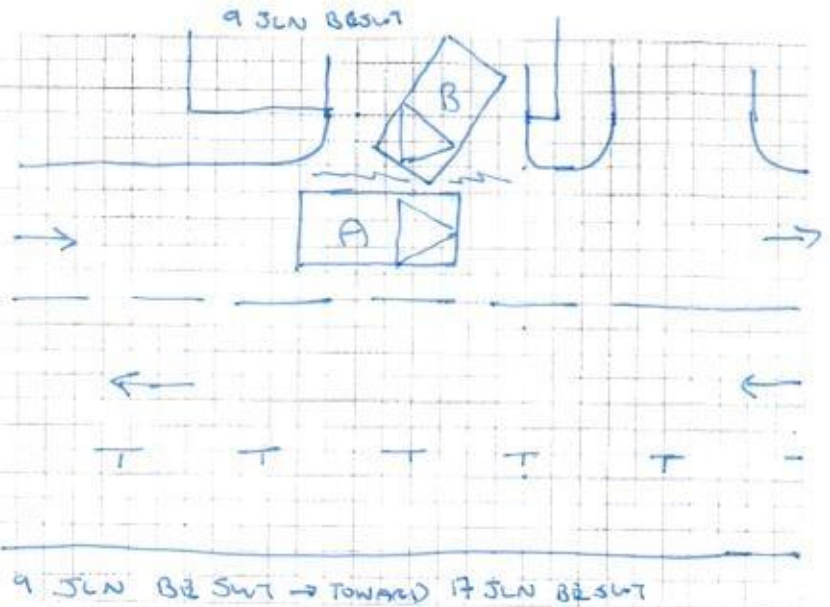
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

SKETCH PLAN

Vehicle A - XE 1104 S

Vehicle B - XD 864 T



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along JLN BESUT (direction from Burah Dr toward 17 JLN BESUT), Duo carriage way slow lane.

While driving straight ahead and when at the front of 9 Jln Besut, suddenly a vehicle just came out from the unit and hit onto the left side of my vehicle. As it was too sudden, I couldn't react or prevent from the collision.

Then after I alight from my vehicle and realized it was a vehicle with licence plate number (XD 864 T) that collided to the left side of my vehicle when he failed to check on on-going vehicle and drove out from the unit.

Vehicle A - XE 1104 S

Vehicle B - XD 864 T.

DECLARATION

We declare the foregoing particulars are true in every respect.



Policyholder's Signature
Date & Time:

Netze

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

[Signature]

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

[Signature] 29/07/19

Vehicle No.	XE 11045		Model / Make	IVECO TRAKKER
Date of Accident	27/07/2019			
Time of Accident	11 15		HRS	
Location of Accident	JLN BASUT, INFRONT OF 9 JLN BASUT ENTRANCE.			
Exact purpose use during accident	WORKING HOUR			
Name of Owner	WAH & HUA PTE LTD			
Telephone No.	H/P: 8125 4219	Home:	Office:	
NRIC	2000 000 76 M			
Address	WAH & HUA PTE LTD, 11 KRANJI CRESCENT S(728656)			
Claim type	OD <u>THIRD PARTY</u> REPORTING ONLY			
Insurance Company	NTUC			
Type of Coverage	Comprehensive Third Party Third Party / Fire / Theft			
Policy No.	5111430253-000006			
Name of Driver	As Above If <u>No</u> , HOH GUIFENG			
NRIC	C 8473642 M		Any Passengers: NIL	
Date of birth	24 SEP 1975			
Occupation	Outdoor / <u>Indoor</u>			
Driving License Pass Date	12 APR 2010			
Gender	<u>Male</u> / Female			
Contact No.	H/P: 8826 5529	Home:	Office:	
Address				
Driver have any own vehicle	<u>No</u> , If yes, Reg No.			
Relationship	<u>Employee</u> , If no, state			
Weather condition	<u>Clear</u> Raining Other			
Road Surface	<u>Dry</u> Wet Other			
Any Injuries	<u>No</u> , If <u>Yes</u> , Who?			
Name And Contact No.	HOH GUIFENG, 8826 5529.			
Name And Contact No.				
Police Report	<u>No</u> , If Yes, Where?			
Vehicle B No.	XD 864T		Any Passengers:	
Name of Driver			Contact No.:	
Vehicle C No.			Any Passengers:	
Vehicle D No.			Any Passengers:	
Vehicle E no.			Any Passengers:	
Vehicle F No.			Any Passengers:	
Vehicle G No.			Any Passengers:	
Witness Name			Witness Contact:	
Accident Portion	LEFT SIDE OF VEHICLE.			
Camera Recorder	<u>Yes</u> / No			
Email Address	nelson_ng@wahhua.com			
PARTICULAR WORKSHOP	TWINCAR AUTOMOTIVE PTE LTD			
CONTACT NO.	6842 0051 / 6744 0510			
CONTACT PERSON	IAN			
FAX NO	6741 0510			
WORKSHOP EMAIL ADDRESS	sales@n51.com.sg			

WORK PERMIT
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer
WAH & HUA PTE LTD



Name
HOU GUIFENG

Work Permit No.
O 73202633

Sector
MANUFACTURING

For LKK/NAC Use Only



K0997349

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **G8473642U**
Name:

HOU GUIFENG



For LKK/NAC Use Only

Birth Date: **24 Sep 1975**

Issue Date: **23 Mar 2019**

Valid Till **25/03/2024**



002915665H

VISIT PASS
Immigration Regulations

03-12-2019

Name
HOU GUIFENG



FIN
G8473642U

Date of Birth: **24-09-1975** Sex: **M**

Nationality
CHINESE

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.

Download SGWorkPass
App to check status



For LKK/NAC Use Only

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

EFFECTIVE DATE

Class 2B	Motorcycles =< 200 cc	26 Mar 2009
Class 3	Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg	26 Mar 2009
Class 4	Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg Motor vehicles which are not constructed to carry load or passengers and the unladen weight =< 7250kg	12 Apr 2010

For LKK/NAC Use Only



Licence No: G8473642U

NP 428A

10 Sin Ming Drive Singapore 575701
Tel: 1800-CALL LTA (1800-2255 582) Fax: (65) 6553 5329

Our ref 1010152301N047012464

10 Oct 2015

WAH & HUA PTE LTD
11 KRANJI CRESCENT
SINGAPORE 728656

004549



Dear Sir/Madam

**NOTIFICATION OF SUCCESSFUL AMENDMENT OF VEHICLE SPECIFICATION FOR
VEHICLE NO. XE1104S**

We are pleased to inform you that your vehicle, XE1104S, has been successfully converted from B30 - Goods (Open) Lorry (Wooden Body)/Normal to B66 - Goods (Open) Garbage/Sanitary Wagon/Normal with effect from 10 Oct 2015. We have updated the following specification(s) for your vehicle as well. The Business Transaction Reference No. is 20151010093438386608.

Vehicle Details:	Original Specifications	New Specifications
Body Code :	30	66
Attachment 1 :	No Attachment	With Roll On/Off
Unladen Weight(kg) :	9920	12000

2. The following are the key owner and vehicle particulars for the vehicle. The full particulars are given at Annex A. Please check and ensure that the details are correct.

1. Name : WAH & HUA PTE LTD
2. Identification No. Type : Company
3. Identification No. : 200000076M
4. Place Of Passport Issue : -
5. Vehicle No. : XE1104S
6. Vehicle Type : B66 - Goods (Open) Garbage/Sanitary Wagon
7. Vehicle Scheme : Normal
8. Vehicle Make : IVECO
9. Vehicle Model : TRAKKER AUTO AT260T41 (MY2013, EURO V)
10. Remarks : -

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 : 5111430253-000006

Cover : Preferred Workshop Plan

- | | |
|---|---|
| 1. Index mark and Registration Number of Vehicle | : XE1104S |
| Chassis Number | : WJME2NSS40C283328 |
| 2. Name of Policyholder | : WAH & HUA PTE LTD |
| 3. Effective Date of Insurance | : 22 Jul 2019 |
| 4. Expiry Date of Insurance | : 21 Jul 2020 |
| 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. | |
| (b) Use for the carriage of passengers or goods in connection with the Policyholder's business. | |

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$1,500
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$200
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: HONG LEONG FINANCE LIMITED
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 : TAN INSURANCE BROKERS PTE LTD (00000690287)
Date of Issue : 25 Jul 2019 17:14 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Transaction ref 20151010093438386608

The owner and vehicle particulars for Vehicle No. XE1104S as at 10 Oct 2015 are as follows:

1.	Name	: WAH & HUA PTE LTD
2.	Identification No. Type	: Company
3.	Identification No.	: 200000076M
4.	Place Of Passport Issue	: -
5.	Vehicle No.	: XE1104S
6.	Previous Vehicle No.	: -
7.	Effective Date of Ownership	: 09 Oct 2015
8.	Original Registration Date	: 09 Oct 2015
9.	First Registration Date	: 09 Oct 2015
10.	Vehicle Type	: B66 - Goods (Open) Garbage/Sanitary Wagon
11.	Vehicle Scheme	: Normal
12.	Attachment 1	: With Roll On/Off
13.	Attachment 2	: -
14.	Attachment 3	: -
15.	Vehicle Make	: IVECO
16.	Vehicle Model	: TRAKKER AUTO AT260T41 (MY2013, EURO V)
17.	Year of Manufacture	: 2013
18.	Primary Colour	: White
19.	Secondary Colour	: -
20.	Passenger Capacity	: 1
21.	Chassis/Trailer Chassis No.	: WJME2NSS40C283328
22.	Propellant	: Diesel
23.	Engine No./Motor No.	: F3BE3681DS451220565
24.	Engine Capacity(cc)/Power Rating(kW)	: 12,882.0
25.	Unladen Weight(kg)	: 12000
26.	Maximum Laden Weight(kg)	: 28000
27.	Open Market Value	: \$124,584.00
28.	PARF Eligibility	: No
29.	PARF Eligibility Expiry Date	: -
30.	Minimum PARF Benefit	: -
31.	No. of Transfers	: 0
32.	IU Label No.	: -
33.	COE No.	: 2015100905000742M
34.	COE Expiry Date	: 08 Oct 2025
35.	COE Category	: C - Goods Vehicle & Bus
36.	Quota Premium/Prevailing Quota Premium	: \$43,311.00
37.	Actual Quota Premium/PQP Paid	: \$43,311.00
38.	Actual ARF Paid	: \$6,230.00
39.	CO2 Emission(g/km)	: -
40.	Actual CEVS Rebate Utilised	: -
41.	CEVS Surcharge Paid	: -
42.	Actual Green Vehicle Rebate Utilised	: -
43.	Vehicle Lifespan Expiry Date	: 08 Oct 2035
44.	Road Tax Amount	: \$0.00
45.	Road Tax Start Date	: 09 Oct 2015
46.	Road Tax End Date	: 08 Apr 2016
47.	Remarks	: -

Claim Handling

Accident MT/1055504

Policy No.	5111430253	Vehicle No.	XE1104S	GST Registration No.
Certificate No.	5111430253-000006			
Policyholder Name	WAH & HUA PTE LTD			Policyholder NRIC
Product Code	FLEET MASTER INSURANCE	Cover Type	Preferred Workshop Plan	Loading
Contact No.(Mobile)	81254219	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	No	NCD Entitlement(%)	0	Private Hire

Accident Details

Report Date	29/07/2019 17:37	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	27/07/2019	Time of Accident hh:mm	11:15	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	JLN BESUT INFRT OF 9 JLN BESUT ENTRANCE			

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	200.00	
OD Standard Excess		TP Standard Excess		
YIED OD Excess		YIED TP Excess	0.00	Driver is Covered?
Additional Excess				
Total OD Excess Applicable		Total TP Excess Applicable	0.00	

Benefits

Coverage		Sum Insured	
Third Party Working Risk		999999999.99	

GST Registered Information

GST Registered	Yes	GST Registration Date	03/01/20
GST Registration No.	200000076M	GST Status Verified	Yes
Modification History	29/07/2019 17:39:12 System changed GST Registration Date from 01/01/2015 to 03/01/2000 29/07/2019 17:39:12 System changed GST Status Verified from No to Yes		

Policyholder Mailing Address

Address 1	11 KRANJI CRESCENT	Address 2	SINGAPORE 728656	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5111431474	

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	HOU GUIFENG	Driver NRIC	G8473642U	Driver DOB
Register Date of Driver License	12/04/2010	Driver Age	43	Driving Experience
Contact No.(Mobile)	88265529	Contact No.(Office)	0	Contact No.(Home)
Address 1	11 KRANJI CRESCENT	Address 2	WH BUILDING	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.				
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 checked="" type="radio"/> Yes <input type="radio"/> No

Modification History

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	WAH &
Contact No.(Mobile)		Contact No. (Home)	
Email Address		OI Vehicle Number	XE1104
Claim Description	XE1104S / XD864T ON 27 Jul 2019		
Preferred Workshop	Yes	Insured Liability	Preferred Workshop, Name unknown
Preferred Repair		GIA report	Received

Date Registered

Option

29/07/2019 17:41

Claim
Close
Date

Report Taken By

ROSLINDA

Workshop
Repairer☒ Print AK letter

Attachment

Accident No.	MT/1055504	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	29/07/2019 00:00
Path *		Category *	Confidential
<input type="button" value="Choose File"/> No file chosen		<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>
<input type="button" value="Choose File"/> No file chosen		<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>
<input type="button" value="Choose File"/> No file chosen		<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>
<input type="button" value="Choose File"/> No file chosen		<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>
<input type="button" value="Choose File"/> No file chosen		<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>
<input type="button" value="Choose File"/> No file chosen		<input type="button" value="Clear"/> Please Select	<input type="button" value="NO"/>
<input type="button" value="Message Read"/>			

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Des
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jul 2019 17:41	NRIC/ Driving License	Normal	NRIC/ Driving I
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jul 2019 17:41	SAS	Normal	SAS 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jul 2019 17:41	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jul 2019 17:41	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jul 2019 17:40	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jul 2019 17:40	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jul 2019 17:40	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jul 2019 17:40	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jul 2019 17:40	Photos	Normal	Photos

Video List

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