P				Ole Committee	
NATIONAL Assessment Centi	e Services	(Aer 1 January)			
Date In 14 /08/19	Jcb description	1	Date & Time Completed	Done	by
Ref No NA/INC 19014070/CB	SAS e-filing				
Veh No SKG 4533P	E-mail (within	8lirs, AIC 2hrs;			
DOA 13/08/19 1330	MT/1057704-	001			
OD TP ' Reporting Only	i-Motor W/0	O (Within: OD 2hr)			
11 Teporting Only	i-Photo Uplo	oaded			
TP Insurer	Assessment/S	urvey Report			
	Ass't Report I	oy Fax / Hand t	0 Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: {			Tel: Fa	x :)
TP Particulars: Veh No:	56637146	7 INC()/Non-INC()		
Owner / Driver: (Tel:)	
	riod: ()	Cover Type: ()	
Confirmed by : (Insured/Driver Liability: (%) F	Note Est Status (Date:	Time:)	
	Warranty: YES ()/NO(0%; P: 21-79%. F: 80-10	070]	
Excess: (\$) Loading: \$1,0					
General Remarks;-	O A Charles	No. of White Ac-			
() Walk-In Customer: Customer's info	rmation strictly Co	onfidential & Str	ictly NO refer of senairer		
() Total Loss Case : to e-mail Insure		middinial a co	loay 100 15101 0. Topoliot.		
Drive-In () / Towed-In (); Invoice	A CONTRACTOR OF STREET	VO () . T	owing Co. (<u> </u>	
277 CHI ()77 (Well-III (), INVOICE	: YES()/I	NO () ; T	owing Co. (
Remarks:- (INC horline: 6788 6616)			Date&Time Completed	Done	by
	Courtesy Car ()			
2) QC Check / Post Repair Inspection)			
3) Upload Resurvey Photo [Repair Cost > \$3	3000] ()			
Injury:					
Date/Time Actions					
			50 V 2700000		
			**		
- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1-					
NA1906116		Invoice Prep	paration Checklist	Anit (S)	Amt (\$) Add Bill
laimant's Particulars :-		1) AR : Accident	The second secon		
Priver/Owner:		2) DA : Damage . 3) TF : Towing F	Assessment (\$100); INC (\$80) cc \$40/8		
		4) FT : Follow-T	The second secon	30	
ontact No:		For claiming a	teinst INC Only (wef 10 Jan 2005)		
amaged Portion:		6) TR : Re-inspec 7) N1 : Idac DA -		75	
C Chedral Land		8) NTUC Addition	nal Services		
C Checked by (Engr-In-Charge):		*N5: Courtesy		\$5	
uditors' Comments :-		*N6; Repair Co *N7; Fost Rep	nir Inspection S	25	
t 1:	TOUR CONTRACT	350000000000000000000000000000000000000		\$5	
		9) N12: Idac Mol	ile	30	TO ME DI
it. 2 / 3)		Invoice dated	Fee Charged Fee Charged		war Jak

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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 <u>truthful</u> and <u>accurate</u> 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.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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	14/08/2019 09:19
Date Of Accident	13/08/2019 13:30
Exact Location Of Accident	PARKWAY PARADE MSCP
Country/State of Loss	SINGAPORE
T T	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKG4523P
Insured/Policyholder	
Name Of Registered Owner	LOH KAR KHENG
NRIC No	S7114043A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93631873
Alternative Phone No	OTHERS-93255443
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	GOLF
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	5079072393-02
Cover Note Number	
Driver	
Name of Driver	WONG SHER MAINE(HUANG SHIMIAN)
NRIC No	S7506156J
Date Of Birth	16/03/1975
Occupation	INDOOR
Date Of Driving Pass	28/04/1997
Driving Experience	22 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-93255443
Fax Number	(3. POCCOOCTOR) 55
Contact Number	

SHERMAINE.WONG@GMAIL.COM

Address 604B EAST COAST ROAD

Postcode 459002

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

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?

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)

16

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?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLG3714A

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

GOH XIN-SUI

NRIC/Passport Number

S7916731B

Contact Number

81006075

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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>.
- 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.
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 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:
 - (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

(Unriver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Policyholder's Signature Date & Time:

Signature

(Hariver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:





YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES!

PASS DATE

Class 3

Motor cars =< 3000 kg with =< 7 passengers exclusive of the driver; and motor fractors /vehicles =< 2500 kg 28 Apr 1997

For LKK/NAC Use Only

NP 428A







Certificate of Insurance

Cover : drivo CLASSIC

: WVWZZZ1KZDW044093

: LOH KAR KHENG

: 06 Sep 2018

: 05 Sep 2019

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (C	HAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES	
ROAD TRANSPORT ACT, 1987 (MALAYSIA)	

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5079072393-02

1. Index mark and Registration Number of Vehicle

Chassis Number

2. Name of Policyholder

3. Effective Date of Insurance

4. Expiry Date of Insurance

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.

: SKG4523P

- 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 : \$\$100 ADDITIONAL EXCESS : N/A

UNNAMED DRIVER EXCESS : PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : NO INSURE WITH COF : YES NCD PROTECTION : YES (FREE) TRANSPORT ALLOWANCE : NO **EXCESS WAIVER** : NO

PRIMARY DRIVER : LOH KAR KHENG NAMED DRIVER (1) : WONG SHER MAINE 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)

: ONG SOO CHONG (00000587079)

Date of Issue

: 01 Sep 2018 20:54 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

Claim Handling

Accident MT/1057704						
Policy No.	5079072393-02	Vehicle No.	SKG4523P		GST Regis	stration N
Certificate No.						
Policyholder Name	LOH KAR KHENG				Policyhold	der NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC		Loading	
Contact No.(Mobile)	93255443	Contact No.(Office)	0		Contact N	io.(Home)
Email Address		Special Remark			eCode	
KFK	- No Yes	TCA	■ No ○ Yes		eCode Rea	ason
NCD Protection	Yes	NCD Entitlement(%)	50		Private Hir	re
Accident Details						
Report Date	14/08/2019 18:16	Accident Report Within 24 hrs	Yes		Accident T	Туре
Date of Accident	13/08/2019	Time of Accident hh:mm	13:30		Country of	f Accident
Reporting Centre		Orange Force			ICM No.	
Accident Location	PARKWAY PARADE MSCP					
♥ Excess						
Own damage Excess	600.00	Additional Excess	0		Windscree	en Excess
Unnamed Driver Excess	0.00	Outside Singapore OD Excess		600.00		
Third Party Excess	0.00	Outside Singapore TP Excess		0.00		
	ion					
GST Registered	No		GST Regi	stration Date		
GST Registration No.			GST State	us Verified		Yes
Modification History						
Policyholder Mailing Add	ress					
Address 1	604B EAST COAST ROAD	Address 2	UNITED MANSION	s	Address 3	ě
Address 4		Address Type	Singapore address		Post Code	
Unit No.		Related Policy Number	5079072393-02			
♥ OI Driver Info						
Driver Name	Wong Sher Maine	Driver Type	Named Driver			
Unnamed driver Name		Driver NRIC	\$75061563		Driver DO	В
Register Date of Driver License	28/04/1997	Driver Age	43		Driving Ex	perience
Contact No.(Mobile)	93255443	Contact No.(Office)	0		Contact No	o.(Home)
Address 1	604 EAST COAST ROAD	Address 2	UNITED MANSION	NS	Address 3	
Address 4		Address Type	Singapore address	i.	Post Code	
Unit No. Does he own a Singapore Registered car?	Yes • No	Driver Vehicle No.			Driver Insu	urer Com
Declaration						
Breathalyser or Blood Test	0 mg	ACCIONES A	LLTWS COLT 2009			
Reading?	0 mg	Any injury?	Yes No			
Modification History						
Claim 001 OD-MD New	l.					
Claim Type *				OD-MD	▼ Insured	LOH KA
Contact No.(Mobile)				Nacional Control Contr	Name Contact No.	
AND THE PROPERTY OF THE PARTY O					(Home)	NIL
					OI Vehicle	SKG45
Email Address					Mr. com by min	
				SKG4523P / SLG3714A	Number ON 13 Aug 2019	20 - D
Claim Description	NOVO 225			SKG4523P / SLG3714A		
Claim Description Preferred Workshop	Preferered Liability Fully at Fault	▼ GIA		SKG4523P / SLG3714A		
Claim Description Preferred Workshop Bonuser No. Finalisation	Preferered Repair Option Prefered income to assign workshop	GIA Received	•	SKG4523P / SLG3714A		
Claim Description Preferred Workshop Bonuser No. Finalisation	Repair income to assign workshop	GIA Perstand	•	SKG4523P / SLG3714A	ON 13 Aug 2019 Claim Close	
Email Address Claim Description Preferred Workshop Bonuse No. Yes Finalisation Date Registered Report Taken By	Repair income to assign workshop	GIA Perstand	•		ON 13 Aug 2019	

ASSIGNMENT (DAC)

By C50-Platine of Accident				By Assessor	(1) Vehic	le kato	ensition	10	
L) Vehicle hit Wehicle.	2) Vehicle bit 77			VIIIIISKG	4523	P	7) Forgin	6 SAP	2012
a) blotorear ()	a) Pedestran	1)	Type (CO)	M.Cycle / Bu	s / Van /	Long/Tast	Primo Movi	er Long
b) Micycle ()	b) Anmal	()	/ frm.k	/Trailer or	•	CIFI	4	0
() Lie yel: ()				Make & Model	Volksmes	ben No	EN KOLL I	. , . /	390
3) Vehicle fill Road Side Objects:				Colon WE	ite '	la Ta	ananission fy	(I) (I)	(lanual)
(i) t = o(ii) (yop (i)) ()	h) Road Work Object	10)	Ling/Ho			Spilocad	89	7
(for signle and, butter, free de-	c) Private Property).	WAN MAN	V2227	LKZ	DW 04	4093	>
4) Vehicle drop into drain		7	j	Con Cond	5 /1-ar/P	en / Ban	ul er		
5) Damage due to Act of God.				Steering 1600	🗅 / Jammed	I / Leake	d/Burnt or		
a) Laffen Object ()	b) Flood	3)	Bake hod	🕽 / Janumer	I/Leake	d/Burnt or		
c) Office,				Modi: Nit 6	SRD / SII				
6) Parked & Found Damaged:				- Tyre Size - F:	22	2/4	2151	\	
a) Vandalism ()	b) Hit by Moving Object	()	R	_	_>		725	
7) Theft Case		10		BS / DUN / EX	NOVA / GY /	FS/LIZ	A / MIC / OH	rsu (PIR) s	JIMI /
a) Stolen ()	b) Damage found	1):	TOYO / YOKO	O or				
	when recovered			Front			Roar	\mathcal{C}	
8) Fire				R/Bal.	4	111111	R/Bal.	þ	mm;
a) Whilst driving ()	b) Parked	1)	1.763 (4	4		L/Dal	6	THE
9) Accident date more than 24hrs		(r.	Parallel Import	Yes (No)	Towerd-In:	Yes	/ No
				Repair Type: ((S) LBJ		Towing Reg	med (6)	/ No
Remarks for internal information				No of Repair D	6		Vehicle in Id	\simeq	l No
				100	18/2010	1		5,20 p	
									10
				By Assessor	- 2) Com	nents			
				1) Damages ne	of due to rec	ent acci	dent_		
				2) Damages d	o not seem l	iit onto:			
Remarks to appear in Works Order	& Assessment report			a.Vehicle () b.Molorc	ycle ()	c.Bicycle () d.Pedestr	con ()
l) Polential Total Loss ()				e.Animal () LGovin C	bject () - g.Road We	ik Object (=)	
2) SRS Light on. ()				h.Private Pr	operty ()	Drain () j.Road 6	ab/Grass Ver	ge()
3) ABS Light on ()				3) Vehicle doe	s not seem)	lamage	d as a result.	of:	
				a Fallen Ob	ject () b.E	lood ()	c.Vandalisr	n(),dEm	:()
				e Moving Ol	bject () 13	Glolen () g.Stolen 8	Recovered	().
				Tr.	ne Staded		Time cor	nplated	

1) (23)

3) I office Execution Completed Time:

The state of the last	C INC		Teo	NIA	Qiy	Г	NAC	1 1016	Vehicle N	SKG	42	23
100	01 9918	6 Frt Number Plate			Viy		NAC				CON	AC
100		7 Frt Number Plate Base	DO		-		1071		5 Fuse Box			
100	3 99188	9 Frt Number Plate Garnish	CKI	1			1072	Contract of the Contract of th				
100	04 99130	0 Frt Bumper	00	-	+		1073	99505	3 Wiper Washer T	ank		15.
100	5 99234	1 Frt Bumper Clips	KEC		t	-	1074	99505	2 Wiper Washer T	ank Motor		
100	6 99132	5 Frt Bumper Bracket	ACI	-	6	1-	1075	99015	9 Alternator Assy			
100	7 99146	2 Frt Bumper Side Retainer I H	DIS	1	-		1076					
100	8 99143	3 Frt Bumper Reinforcement	BT				1077	Access to the second		ump		
100	9 99131	6 Frt Bumper Beam	DI			-	1078		the second second second second	lelt		12
101	0 99146	8 Frt Bumper Sponge	CRI	1	-		1079	99443		Cooler Pipe		
101	1 99142	7 Frt Bumper Protector		1		-	1081	99269		lose		
101	2 99142	Frt Bumper Pad				100	1082	THE RESERVE OF THE PARTY OF THE	the state of the state of the state of	ol Unit		
101	3 99136	Frt Bumper Grille	CRF	1			1083	99042		np Assy		
101	4 99130	Frt Bumper Moulding				100	1084	99040	Brake Booster Pu Engine Top Cove	mp Assy		
101.	99140	7 Frt Bumper Lower Spoiler		1			1085	99101	Engine 1 op Cove	T		
1010	6 99143	Fit Bumper Sensor	CUT	/		-	1086	99094	The second secon	ver	-	
101	7 99510	Frt LH Bumper Fog Lump Cover		13			1087	99094	The second secon			
1018	1 99135	Frt RH Bumper Fog Lamp Cover		17		1	088		Engine Mounting	rrt .		
1019	99507	Fit LH Bumper Fog Lamp		?		-	089	99095	Engine Mounting	DU	-	
1020	99508	Frt RH Bumper Fog Lamp		2		- Inner	090	99095	Engine Mounting	Ren		1
1022	00133	Frt Grille	CRA	1			091	992234	Gear Box Mounti	no /	-	-
1023	99132	Frt Grille Emblem	CRA	/		1000	092	991520	Frt LH Chassis M	ember		
1024	001225	Frt Grille Chrome Moulding				1	093	991520	Frt RH Chassis M	ember	-	-
1025	902013	Frt Apron Panel Frt Support Panel	-			-	094	990728	Frt Vertical Cross	Member		-
1026	00202	Fri Support Panel	CRP			1	095	991863	Frt Lower Cross N	Aember .	-	-
1027	992416	Frt Support Panel Top Garnish Cover				1	096	995070	Frt Lil Fender	Zellioci	Buc	-
1028		Frt Brace Panel		1		1	097	995072	Frt LH Fender Inn	er Panel	DUC	-
1029	995153	Frt LH Headlamp Assy		?		1	098	995147	Frt LH Fender Las	np		
1030	991821	Frt RH Headlamp Assy	CRA			1	099	995148	Frt LH Fender Pro	tector	1	
1031	995088	Fr. LH Side Lamp		1		1	100	991740	Frt LH Fender Inn	THE RESERVE AND ADDRESS OF THE PARTY OF THE	ORA-	1
1032	995089	Frt RH Side Lamp				1	101	995179	Frt LH Mudflap	THE RESERVE OF THE	4)	
1033	990248	Bonnet	no	-		- China	102	995170	Frt LH Wheel Rin	1000		
1034	991328	Bonnet Emblem	DD		_	3111111	103	994025	Frt LH Rim Cover	the state of the state of	84	
1035	990287	Bonnet Lock	-	づ	-	- Princes	104	995065	Frt LH Tyre			
036	990285	Bonnet Insulator		-	-	Total Contraction of the Contrac	105	995071	Frt RH Fender			
1037	990273	Bonnet Hinge	1				106	991739	Frt RH Fender Inn	er Panel		
038	990261	Bonnet Damper			-		108	991744	Frt RH Fender Lar	np		
039	990305	Bonnet Rubber				Trendere.	109	991740	Frt RH Fender Pro Frt RH Fender Inn	tector	140	
040	990252	Bonnet Cable				*****	40000	991884	Frt RH Mudflap	econieid	-	
041	990311	Bonnet Stand				- more reports	III	992087	Frt RH Wheel Rim			
043	990119	Air Con Condenser	DD	1	200	-		994025	Frt RH Rim Cover			-
044	000122	Air Con Fan Assy		7		Processor.	13	995065	Frt RH Tyre		-	-
045	990134	Air Con Suction Pipe (Low Pressure)		?		10000	14	992093	Frt Windscreen Gl			
046	990116	Air Con Suction Hose				-	15	902117	Frt Windscreen Ru	hhan	-	
047	V90133	Air Con Discharge Pipe (High Pressure)		5		1	16	992108	Frt Windscreen Mo	ulding	-	
048	000140	Air Con Discharge Hose Air Con Liquid Pipe		_		- Contract	17	992098	Frt Windscreen Sea	lant		-
049	995066	Air Con Liquid Pipe Air Con Receiver Drier		7	9	- Description of	18	991019	ERP Bracket	THE PARTY OF THE P		-
050	990111	Air Con Receiver Drier Air Con Compressor Assy		2		The Contract of the Contract o	19	991020	ERP Unit		-	+-
051	995294	Air Con Belt					20	992140	Frt Wiper Arm			-
)52.	995074	Radiator	100	-		and the last of the last	21	992142	Frt Wiper Blade			-
153		Radiator Cowling	CRA.	1	-	11	22	995045	Wiper Panel Garnis	h		
)54	992742	Radiator Fan Assy		3	-	11	23	991126	Firewall Panel			100
)55	992745	Radiator Fan Clutch	-	-	-	11	24	990753	Dashboard Assy			-
156	992758	Radiator Hose Top		-		11	25	992282	Glove Box Cover			-
57	992757	Radistor Hose Bottom	-	-		11	26	992281	Glove Box Compar	tment		-
58	992741	Radiator Expansion Tank		2		113	27	994483	Steering Wheel Air	bag		1
59	990151	Air Duct		-	-	113	28	994485	Steering Wheel Air	ong Sensor	-	-
60	990070	Air Cleaner Assy	ONT -	7		117	29	990749	Dashboard Airbag			-
61	9900561	Air Cleaner Hose				113	30 9	990750	Dashboard Airbag S	ensor		-
62	9900891	Air Cleaner Resonator				113	31 9	990029	Airbag Control Unit		-	-
63	991712	rt Exhaust Manifold				113	32 9	990864	Fr: Driver Seat			1
64	9917131	rt Exhaust Manifold Cover		-		113	13 9	91922	Fit RH Seat Belt As	sy		-
65	991054	rt Exhaust Manifold Sensor (Oxygen)	-	4	-	113	14 5	91899	Frt Passenger Seat			+
56	991714	ront Exhaust Pipe				113	5 5	95182	Frt LH Seat Belt As	W.		-
7	990219	affect •				113	6 0	90247	Sticker	******		-
18	990224 F	ittery Cover			-							1
	500000	affery Bracket		1								- Interes
10	29022346	afficiv Birnevet										

No of Items:

Agressore

Claim Handling

Accident MT/1057704 LOS SAL SUB Policy No. 5079072393-02 Vehicle No. SKG4523P GST Registration No. Certificate No. Policyholder Name LOH KAR KHENG Policyholder NRIC S7114043A Product Code PRIVATE CAR INSURANCE Cover Type drivo CLASSIC Loading Ö Contact No.(Mobile) 93255443 Contact No.(Office) Contact No.(Home) 0 Email Address Special Remark eCode No * No Yes TCA . No Yes eCode Reason NCD Protection Yes NCD Entitlement(%) 50 Private Hire No Accident Details Accident Report Within Report Date 14/08/2019 18:16 Yes Accident Type Collision - Head to Rear Date of Accident 13/08/2019 Time of Accident hh:mm 13:30 Country of Accident Singapore Reporting Centre NATIONAL ASSESSMENT CENTR Orange Force No ICM No. Accident Location PARKWAY PARADE MSCP **♥** Excess Own damage Excess 600.00 Additional Excess Windscreen Excess 100.00 Outside Singapore OD Unnamed Driver Excess 0.00 600.00 Excess Outside Singapore TP Third Party Excess 0.00 0.00 Excess **▽** Benefits ♥ GST Registered Information **GST** Registered No GST Registration Date GST Registration No. **GST Status Verified** Yes Modification History Address 1 604B EAST COAST ROAD Address 2 UNITED MANSIONS Address 3 SINGAPORE 459002 Address 4 Address Type Singapore address Post Code 459002 Unit No. Related Policy Number 5079072393-02 OI Driver Info Driver Name Wong Sher Maine Driver Type Named Driver Unnamed driver Name Driver NRIC 57506156) Driver DOB 16/08/1975 Register Date of Driver 28/04/1997 Driver Age 43 Driving Experience License 22 Contact No.(Mobile) Contact No.(Office) Contact No.(Home) 0 Address 1 604 EAST COAST ROAD Address 2 UNITED MANSIONS Address 3 SINGAPORE 459002 Address 4 Address Type Singapore address Post Code 459002 Unit No. 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 Tan Siew Choo Claim Type OD-MD Insured Name LOH KAR KHENG Insured NRIC 57114043A Contact No. (Home) Contact No.(Mobile) Contact No. (Office) NIL Email Address OI Vehicle Number SKG4523P TP Vehicle Number SLG3714A Claim Description Name of Preferred SKG4523P / SLG3714A ON 13 Aug 2019 Workshop Preferred Insured Fully at February Resolved Workshop Bonuice Nephisation Yes Preferered income to Repair assign workshop Option Date Registered 14/08/2019 18:22 Claim Close Date Date Received 15/08/2019 10:0 Workshop Report Taken By Total Loss but ROSLINDA Repaired Repaire OD Excess Print AK letter Collected by Workshop Modification History

· Task Transfer · Exit

Approval		Reason			
lemarks					
damage asse	essment Attachment				
	ifo				
ehicle Make	VOLKSWAGEN	Vehicle Model	GOLF	Engine Capcity	
Date of Registration	06/09/2012	Classis No.	WVWZZZ1KZDW044093		
owing Required •	● Yes ○ No	Vehicle in IDAC •	● Yes ◎ No	Parallel Import *	⊚ Yes ● No
ype of Tender	Own Damage *	Assessor Name *	SIMON	Survey Current Status	(132,122)
DAC/Workshop lame	NATIONAL ASSESSMENT CENTR	IDAC/Workshop Location	51 UBT AVENUE 1 #01-25 PAYA	1/1	
Vindscreen arts & Labour lost		Total Loss *	○ Yes ● No		
tarket alue(\$)		Scrape Value(\$)		Economical Repair Value(\$)	
	NO OF REPAIR:06 DAYS:AIRCON SUG	CTION PIPE-UNCONFIRM, AIRCON L	IQUID PIPE-UNCONFIRM, AIR DUCT-REPLA	CE,AIR CLEANER-UNCONFIRM	
emark					

Damage Listing

Remark for Supplementary

a Part	GVCC	271310075			
root .	No.	Part No.	Description	Qty *	Repair Code
Not Applicable	1	32200101	NUMBER PLATE (FRONT)	1	Replace
ABS	2	32200201	NUMBER PLATE BASE (FRONT)	1	Replace
ABSORBER ACCELERATOR	3	16000101	BUMPER (FRONT)		Replace
ACTUATOR	4	16002401			
ADVERTISEMENT STICKER		100000000000000000000000000000000000000	BUMPER CLIPS (FRONT)	6	Replace
AIR BAG	5	16005101	BUMPER RETAINER (FRONT LEFT)	1	Replace
AIR BLOWER	6	16005001	BUMPER REINFORCEMENT (FRONT)	1	Replace
AIR BOX	7	16005901	BUMPER SPONGE (FRONT)	1	Replace
AIR CHAMBER BOX	8	16003201	BUMPER GRILLE (FRONT)		Replace
AIR CLEANER AIR COMPRESSOR	9	16005501		4	
AIR COMPRESSOR			BUMPER SENSOR (FRONT)	1	Replace
AIR CON (VAN)	10	41300101	SUPPORT PANEL (FRONT)	1	Replace
AIR COOLER	11	28500101	HORN (LEFT)	1	Unconfirm
AIR DISTRIBUTOR	12	28500102	HORN (RIGHT)	1	Unconfirm
AIR FILTER	13	27700101	HEAD LAMP (LEFT)		Replace
AIR FLOW	14	27700102	Charles and Address to the		
AIR GRILLE AIR HORN		VE 34.000 - 10.00	HEAD LAMP (RIGHT)	1	Unconfirm
AIR INTAKE	15	149001	BONNET	1	Replace
AIR RESONATOR BOX	16	14903401	BONNET LOCK (LOWER)	1	Unconfirm
AIR THROTTLE BODY AND SENSOR	17	25400102	FENDER (FRONT LEFT)	1	Replace
ALARM	18	25400901	FENDER INNER SHIELD (FRONT LEFT)		Replace
ALTERNATOR ALUMINIUM PANEL - SIDE	19	16002902	BUMPER FOG LAMP COVER (FRONT RIGHT)		
AMPLIFIER	20				Unconfirm
ANTENNA		16002901	BUMPER FOG LAMP COVER (FRONT LEFT)	1	Unconfirm
ANTI ROLL	21	16002701	BUMPER FOG LAMP (FRONT LEFT)	1	Unconfirm
APRON	22	16002702	BUMPER FOG LAMP (FRONT RIGHT)	1	Unconfirm
ARCH ARM REST	23	27100101	GRILLE (FRONT)	1	Replace
ASH TRAY	24	27100801	GRILLE EMBLEM (FRONT)	1	Replace
AUTO CLUTCH	25	112023	AIR CON CONDENSER		
AUTO COOLER PIPE	26		3/318/39/10/20/20/20/20/20	4	Replace
AUTO CRUISE MOTOR		112060	AIR CON FAN	1	Unconfirm
AUTO TRANSMISSION	27	112044	AIR CON DISCHARGE PIPE	1	Unconfirm
AXLE BACK DEST AND	28	344001	RADIATOR	1	Replace
BACK REST (M/C) BACK SEAT	29	344005	RADIATOR COWLING	1	Unconfirm
THE PARTY OF THE P	30	344008	RADIATOR FAN		Unconfirm

8/15/2019

Claim Handling (damage assessment Claim Task MT/1057704 / Claim 001 OD-MD)

Save Submit

31

344007

RADIATOR EXPANSION TANK

1

Unconfirm



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-Ir	<u>1</u>				1
Vehicle No:	(CL4K 23 P -	_ Date In:		Time In:	with Keys: Yes / No
				For Office us	re
			16	Attended by:_	
	er salman en en en en		-		
Workshop Collec	ction of Vehicle				1
	ew Goon				
Collection Date: _	16/08/19	Time: _	7107	_ with Keys: Yes / No	¥ ====================================
Tow Truck No:	WZEYEK.	_ Tow Man: _	Jadas	LeoNRIC	180000
	9668/023				
For office use					
Attended by:	Indeson.			Approved by	
	•		2 W 22 2 229		(A)
Workshop Retui	rn of Vehicle				9 8
Workshop:	. 18		-		
Returned Date: _		Time: _		_ with Key: Yes / No	
* Tow In / Drive Tow Man / Work	In shop Representative:			NRIC:	
Signature:				For office u	se
				Attended by:	
Owner Collection	on of Vehicle				
Collection Date:	9	Time:		_ with Key: Yes / No	
			_ NRIC: _		
Signature:					
For office use					
Attended by:				Approved	1 by:

LKK Paya Ubi

From:

Ng Hak Joo <hakjoo.ng@income.com.sg>

Sent: To: Friday, 16 August 2019 9:46 AM Chew Goon Motor - Mrs Chew Zuraimee Bin Mantau; LKK Paya Ubi

Cc: Subject:

CLAIM NUMBER: MT/1057704-001, REPAIR OF VEHICLE NUMBER: SKG4523P

Importance:

High

Dear Chew Goon

Please tow this vehicle from Idac and contact owner named driver Mrs Loh at 93255443 when the vehicle arrived at your workshop to revert on the repair days required, excess \$600/-.

Our Ref: MT/CA/OD/051/1057704-001/ZBM/NHJ

16 Aug 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/1057704-001

REPAIR OF VEHICLE NUMBER: SKG4523P

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

follows:

Award Date: 16 Aug 2019 Make: VOLKSWAGEN

Model: GOLF

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 Zuraimee Bin Mantau at 64307890 or email us at

motor@income.com.sg.

Yours sincerely Jenny Pe

Deputy Vice President

Motor Insurance

Thank You

Ng Hak Joo

Executive Motor Insurance T+65 64307890

www.income.com.sg















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