NATIONAL Assessment Centre	Services.	part i Jamos) .	MMA 119113	625.	
Date In: 28/8/19 14:25	Jeb description	0	Date &Time Completed		ic by
Refile NA/ INC 19015178/14	SAS e-filing				
Veh Fire SMF 3727 G.	The second secon	i Shis, AIC 2hrs)			
11 11 28 18 119 13:00.	I-Motor Cla	lm Form	MT/1059955 001	29/8/1	9 09:40
	I-Motor W/6	O (Within: OD 2hra,	The state of the s	1	-
O The Reporting Only	i-Photo Uplo	anded		١.	
	Assessment/S	urvey Report			4
H* Insurer	Ass't Report l	y Fax / Hand to	Owner/Wksn		
Proformi Wksp / BC Assign Wksp / QW: (	University of the second	A CONTRACTOR OF THE PARTY OF TH	Tol:	Fax:	)
TP Particulars: Veh No: 5	57H 1971E	. INC(	)/Non-INC( ).		
Owner / Driver: (			Tel:	)	
Policy No: ( ) Perio	od: (	)	Cover Type: (	)	
Confirmed by : (		Date:	Time:	)	
Insured/Driver Liability: ( %) [No	ote-Est. Status (	WO): N: 0-20	%; P: 21-79%. P: 80-	100%]	1
Year of Registration: ( ) W:	arranty: YES (	)/NO( )	)		
Excess: (\$ ) Loading: \$1,000					
Concentration that the second	CAR COMPANY		<b>建筑的影片水水水水。</b> 第25	Section 1	<u>, , , , , , , , , , , , , , , , , , , </u>
( ) Walk-In Customar: Customer's Inform		nlidential & Stri	ctly NO refer of repairer		
( ) Total Loss Case : to e-mail Insurer	URGENTLY.	, and the second	<u>, ` · .) , .</u>		
Drive-In ( ) / Towed-In ( ); Invoice:	YES( )/I	10 ( ); To	wing Co: (		)
(Comparison of CING Modulation Proposed Comparison	Tirk.			A Cipon	p'py
1) Apply for Transfort Allowance ( )/Cou	irtesy Car (	)			
2) QC Check / Post Repair Inspection	( •)	n.			
1) Upload Resurvey Photo [Repair Cost > \$300	00] (	) :			
Injury:			1,		
Date Time & Action \$2,000 and \$3,000 and	CIANACANA MASSAYA	GATERIA DE NAMEDA O		THE STATE OF	Control of the
Section 19 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	COURT AND COLUMN SERVICE	urrene presentation de la constitución de la consti	** **	MADAPENT VI	-
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Clauminus Prorrigulavy as a post of the National		1) AR 1 Annident R	sporting (530);	32.22	
Driver/Owner:	OWNERSTAND	2) DA : Damege As 3) TP : Towing Pee	. 54	0/545	
The state of the s		4) PT : Follow-Thro	ough Survey ough Survey (Resurvey)	\$120 \$30	
Contact No:		For plainting ata	DaUNG Oaly (Wal 10 Jan 200)	\$75	
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Checked by (Engr-In-Charge):	DESTABLISHED TO ST	6) TR: Re-inspectic 7) NI: Idae DA + S 8) NTUC Additions OD.* *NS: Courtesy Co *N6: Repair Co- *N7: Fost Repair	MRT Survey  Il Services:  of / Tpt Allowance  ordination  Inspection	\$160 \$3 \$10 10.00	
C Checked by (Engr-In-Charge):		6) TR: Re-inspectic 7) NI: Idae DA + S 8) NTUC Additions OD: *NS: Courtesy Co *N6: Rapeir Co-t *N7: Fost Repair *N8: DV / Collec	MRT Survey  I Services:  If / Tpt Allowance  ordination  Inspection  It Excess Coordination	\$160 \$10 10.00	*
Checked by (Engr-In-Charge):  Variators Communities:		6) TR: Re-inspectic 7) NI: Idae DA + S 8) NTUC Additions OD: *NS: Courtesy Co *N6: Rapeir Co-t *N7: Fost Repair *N8: DV / Collec	MRT Survey  I Services:  of / Tpt Allowance  ordination  Inspection  It Excess Coordination  Can INC) against INC	3160	S. April M. M.

## 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 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.

- 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

foresaid.	
with her was a substitute of the substitute of t	ACCIDENT STATEMENT
Date Of Report	28/08/2019 14:25
Date Of Accident	28/08/2019 13:00
Exact Location Of Accident	PIE TWDS CHANGI NEAR LORNIE EXIT
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SMF3727G
Insured/Policyholder	
Name Of Registered Owner	CHOU KEAT KEONG
NRIC No	S9029862C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-86888524
Alternative Phone No	OFFICE-86888524
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	130
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	5104974151
Cover Note Number	•
Driver	
Name of Driver	CHOU KEAT KEONG
NRIC No	S9029862C
Date Of Birth	07/08/1990
Occupation	OUTDOOR
Date Of Driving Pass	11/01/2012
Driving Experience	7 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86888524
Fax Number	
Contact Number	OFFICE-86888524

NOEMAIL

Address BLK 220A SUMANG LANE #16-89

Postcode 821220

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 DRIZZLING
Road Surface WET

## Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

1

## **Details of Police Action**

Was the accident reported to the police?

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 TWDS CHANGI NEAR LORNIE EXIT ON THE SECOND LANE FROM THE LEFT, 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 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 SJH1971E

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

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. 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.:

TCH PLAN	1 1	1   1				
Lornie Exit			PIE - Changi			F 37276,
CRIBE CI	RCUMSTANCES O	F THE ACCIDE	NT			
	Please	Refer	- +0	Sta	tement	
CLARATIO	ON the foregoing partic				ľ	10.40

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.:

SUNDAY SENDENDAY OF VS.

<b>eBao</b> Tech										Genera	lClaim
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My Desktop	Polic	cy Query									
Notice of Loss	Policy N	lo.				Date	of Accident		28/08/2019	14:23	7
	Vehicle	No.(For Motor)	SMF37	'27G		Cert	ificate Numbe	er			
						Search					
	Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	9	5104974151		CHOU KEAT KEONG	S9029862C	GPC	drivo CLASSIC	SMF3727G	SMF3727G	07/11/2018	06/11/2019
						Continue					

#### Claim Handling Accident MT/1059955 GST Registration No. Vehicle No. Policy No. 5104974151 Certificate No. Policyholder NRIC 59029862C Policyholder Name CHOU KEAT KEONG Loading Cover Type drive CLASSIC Product Code PRIVATE CAR INSURANCE Contact No.(Home) Contact No./Office) Contact No.(Mobile) 85888524 No \* Special Remark eCode: Email Address eCode Reason TCA KEK e No: Yes Private Hire NCD Entitlement(%) NCD Protection Collision - Head to Rear Accident Type 29/08/2019 09:37 Accident Report Within 24 hrs Vec Singapore Country of Accident Time of Accident hh: mm Date of Accident 28/08/2019 13:00 Drange Force ICM No. Reporting Centre Accident Location PIE TWDS CHANGI NEAR LORNIE EXIT T Excess Windscreen Excess 100.00 Additional Excess Own damage Excess 600.00 0.00 **Outside Singapore OD Excess** 600.00 Outside Singapore TP Excess 0.00 Third Party Excess 0.00 GST Registered Information GST Registration Date GST Registered GST Status Verified OST Registration No. Modification History Policyholder Mailing Address MATILDA EDGE Address 3 BLK 220A #16-89 Address 2 SUMANG LANE Singapore address Post Code 821220 Address Type SINGAPORE 821220 Address 4 Unit No. 16-89 Related Policy Number 5104974151 ▽ OI Driver Info Main Driver Driver Type Driver Name CHOU KEAT KEONG Driver DOB 07/08/1990 \$9029862C Unnamed driver Name Driver NRIC Driver Age Driving Experience 17 Register Date of Driver License 11/01/2002 Contact No.(Home) 86888524 Contact No.(Mobile) Contact No.(Office) MATILDA EDGE Address 2 SUMANG LANE Address 3 BLK 220A #16-89 Address 1 821220 Singapore address Address 4 SINGAPORE 821220 Address Type Unit No. 16-89 Does he own a Singapore Registered car? Driver Insurer Company Yes - No Driver Vehicle No. Breathalyser or Blood Test Reading? Yes w No Any injury? Modification History Claim 001 New Name CHOU KEAT KEONG S9029862C OD-MD Claim Type + Contact No. (Office) 86889524 Contact No.(Mobile) OI Vehicle Number TP Vehicle Number Dieqiang@hotmail.sg SJH1971E Email Address SMF3727G / SJH1971E ON 28 Aug 2019 Claim Description red Liability Fully at Fault GIA Received Workshop Bonwer No. Yes Finalisation income to assign workshop Date Received 29/08/2019 00 29/08/2019 09:39 Date Registered LIEW SHAN HUI Report Taken By OD Excess Collected F. Print AK letter by Workshop Save Submit Attachment Claim No. Accident No. MT/1050055 29/08/2019 09:40 Ves No Upload Date Last Doc, Received Confidential Urgency \* Category \* \* NO Y. Normal Clear Please Select Choose File No file chosen y NO \* Normal \* Clear Please Select Choose File No file chosen \* NO \* Normal • Clear Please Select Choose File No file chosen • Clear Please Select \* NO \* Normal Choose File No file chosen \* Normal • \* NO Choose File No file chosen Clear Please Select ٠ \* NO \* Normal Choose File No file chosen Clear Please Select

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Display in New Window Scan and uploading

Assessor

Mobile:

YES / NO

# ASSIGNMENT (IDAC)

By CSO- Nature of Acciden	í:			By Assessor- 1) Vehicle Information
) Vehicle hit Vehicle:	2) Vehicle hit ??			Veh No: SMF 3727 G Yr Regn: 7 Nov /2018
a) Motorcar ( )	a) Pedestrian	(	)	Type: (Ca) / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / MPV
b) M/cycle ( )	b) Animal	(	)	/ Truck / Trailer or
c) Bicycle ( )				Make & Model: Hyundai I 30 PDE 1. 4 c.c 1353
3) Vehicle hit/Road Side Objects:				Colour Transmission Type; Auto / Manual
a) Govm.Properly ( )	b) Road Work Object	(	)	Eng/No: Sp.Reading: 24405
(Eg: signboard, barrier, tree etc)	c) Private Property	(	)	C/NO: TMAH 3513 VJJ 071184
1) Vehicle drop into drain		(	)	Gen. Cond: Good Fair / Poor / Burnt or
5) Damage due to Act of God:				Steering: I Great / Jammed / Leaked / Burnt or
a) Fallen Object ( )	b) Flood	(	)	Brake: InGred / Jammed / Leaked / Burnt or
c) Other,				Modi: Nil AS/Rim / STD A/Rim or
6) Parked & Found Damaged:				Tyre Size: F: 205155 Rub
a) Vandalism ( )	b) Hit by Moving Object	(	)	R:
7) Theft Case				BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
a) Stolen ( )	b) Damage found	(	)	TOYOTYOKO OF Hanksox
	when recovered.			Front Rear
8) Fire				R/Bal. 6 mm
a) Whilst driving ( )	b) Parked	(	)	L/Bal. 6 mm
9) Accident date more than 24hrs		(	)	Parallel Import: Yes No  Repair Type: LS / I.B.I Towing Required: Yes No
Remarks for internal information				No of Repair Days: Vehicle in Idac: Yes / No
				D.O.L. 28/8/2019 Time: 5,40 pm
				, , , ,
				By Assessor- 2) Comments
				Damages not due to recent accident.
				2) Damages do not seem hit onto:
Remarks to appear in Works Ord	der & Assessment report	t		a.Vehicle ( ) b.Motorcycle ( ) c.Bicycle ( ) d.Pedestrian ( )
1) Potential Total Loss (	)			e.Animal ( ) f.Govrn Object ( ) g.Road Work Object ( )
2) SRS Light on (	)			h.Private Property ( ) i.Drain ( ) j.Road Kerb/Grass Verge ( )
3) ABS Light on (	)			3) Vehicle does not seem damaged as a result of:
The state of the s				a.Fallen Object ( ) b.Flood ( ) c.Vandalism ( ) d.Fire ( )
				e.Moving Object ( ) f.Stolen ( ) g.Stolen & Recovered ( )
	ÿ		-	Time Started: Time completed:
				1) CSO
				2) ASS
				3) Entire Operation Completed Time:

1073 1074	994011 995053 995052				
1075	990159	A STATE OF THE PARTY OF THE PAR	-	+	
1076	990160	Alternator Belt			
1077	992688	Power Steering Pump			
1078	992669	Power Steering Belt Power Steering Cooler Pipe			
1080	992692	Power Steering Hose	1		-
1081	990010	ABS Pump Control Unit			
1082	990427 990403	Brake Master Pump Assy Brake Booster Pump Assy			
1084	991005	Engine Top Cover			-
1085	991011	Engine Under Cover			
1086 1087	990946	Engine Mounting			
1088	990949	Engine Mounting Frt Engine Mounting LH	-		-
1089	990952	Engine Mounting RH		1	-
1090	990951 992234	Engine Mounting Rear			
1091	992234	Gear Box Mounting ' Fit LH Chassis Member			-
1093	991520	Frt RH Chassis Member			-
1094	990728	THE PERSON NAMED IN COLUMN TO STATE AND THE PE			
1096	991863 995070	Frt Lower Cross Member Frt LH Fender	Buc	-	-
1097	995072	Frt LH Fender Inner Panel	DUC		
1098	995147	The state of the s			
1100	995148 991740	Frt LH Fender Protector Frt LH Fender Inner Shield		0	-
1101	995179			-	-
1102	995170	Frt LH Wheel Rim			
1103	994025 995065	Frt LH Rim Cover Frt LH Tyre			-
1105	995071	Frt RH Fender	SOR	R	
106		Frt RH Fender Inner Panel			
1107		Frt RH Fender Lamp Frt RH Fender Protector	-		-
1109	991740	Frt RH Fender Inner Shield	10.		-
110	991884	Frt RH Mudflap			
111	992087 994025	Frt RH Wheel Rim . Frt RH Rim Cover		1	-
113	995065	Frt RH Tyre	-		
114	992093	Frt Windscreen Glass			
115	992117. 992108	Frt Windscreen Rubber Frt Windscreen Moulding	-	-	-
117	992098	Frt Windscreen Sealant			
118		ERP Bracket			
120	ACCORDING TO SELECT	ERP Unit Frt Wiper Arm		-	-
121	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN	Frt Wiper Blade			-
122	995045	Wiper Panel Garnish		?	
123	991126 990753	Pirewall Panel Dashboard Assy	-		-
125		Glove Box Cover			
126		Glove Box Compartment			
127 128		Steering Wheel Airbag Steering Wheel Airbag Sensor	-		_
129	990749	Dashboard Airbag	-	-	-
130	990750	Dashboard Airbag Sensor			-
131	990029	Airbag Control Unit	1		
132		Fr: Driver Seat			
134		Frt RH Seat Belt Assy Frt Passenger Seat			-
135	995182	Frt LH Seat Bolt Assy	•		-
136	990247	Sticker			
		FF-LH-Dorr	ECR	K	
			100000	-	

NAC	Portion	J4cm	CON	ILAC	O
1001	991880	- Annual Control of the Control of t	CRA	AL	Qi
1002	991887	Frt Number Plate Base	CRA	1	-
1003	991889	Frt Number Plate Garnish	Cur	-	
1004	991300	Frt Bumper	BR	1	-
1005	992341	Frt Bumper Clips	MEC		C
1006	991325	Frt Bumper Bracket	rec		0
1007	991462	Frt Bumper Side Retainer	DIS	-	2
1008	991433	Frt Bumper Reinforcement	100	5	-
1009	me manager to be a state of the		BT		_
1010			-		-
1011	991427	The state of the s	(RA)		
1012					
-	991420	Frt Bumper Pad			
1013	991363			2	
1014	991301	The state of the s			
1015	991407	A STATE OF THE PARTY OF THE PAR			
1016	991438				
1017	995100	Frt LH Bumper Fog Lamp Cover		7	
1018	991355	Frt RH Bumper Fog Lamp Cover		7	
1019	995079			7	
1020	995080	Frt RH Bumper Fog Lamp		?	-
1021	991793	Frt Grille	CRA	1	-
1022	991328	Frt Grille Emblem	MIS	1	
1023	991799	Frt Grille Chrome Moulding	1112		-
1024	991222	Frt Apron Panel	-	-	150
1025	992013	Fra Support Panel	BT	R	
1026	992025	Frt Support Panel Top Garnish Cover	1	R	-
1027	992416	Horn		*	
1028	991277	Frt Brace Panel		7	-
1029	995153	Frt LH Headlamp Assy	CRA	-	-
1030	991821	Frt RH Headlamp Assy	CNT	3	-
1031	995088	Fr: LH Side Lamp	-	-	_
1032	995089	Fri RH Side Lamp	-		_
1033	990248		BUC		
1034		Bonnet Emblem	DUI		_
1035		Bonnet Lock	-	7	
1036	990285	Bonnet Insulator	-	1	
1037	990273	Bonnet Hinge	-	-	
1038	990261	Bonnet Damper		-	4
1039	990305	Bonnet Rubber	-	-1	
1040	990252	Bonnet Cable			
1041	990311	Bonnet Stand	-	-	
1042	990119	Air Con Condenser		-	
1043	990122			?	
1044	990134			-	
1045	990118	The state of the s		?	
1046	990133	Air Con Suction Hose		-	-
1047	990114	Air Con Discharge Pipe (High Pressure)		?	
1048	990114	Air Con Discharge Hose	CEO ST		
1040	995066	Air Con Liquid Pipe			- 57
1050	995066	Air Con Receiver Drier		+	
051	TO SERVICE AND ADDRESS.	Air Con Compressor Assy			
052		Air*Con Belt	5	-	
053		Radiator		!	
054	992743	Radiator Cowling		3	
MATERIAL CONTRACTOR	992742	Radiator Fan Assy		?	
055	992745	Radiator Fan Clutch			
056	992758	Radiator Hose Top	1		
057	992757	Radiator Hose Bottom			
058	992741	Radiator Expansion Tank	15-miles		
059		Air Duct			
060	990070	Air Cleaner Assy			-
061	990056	Air Cleaner Hose			-
062		Air Cleaner Resonator		-	
063	Principle of the second	Frt Exhaust Manifold	-		
	M. Revenues description hadron tracking				
WITH THE PARTY NAMED IN	991713	Fit Exhaust Manifold Cover			
064	CONTRACTOR OF THE PARTY OF THE	Frt Exhaust Manifold Sensor (Oxygen)	Will be		
064		Process of the contract of the	ACCUPATION OF	-	
064 065 066	991714	Front Exhaust Pipe			
064 065 066 067	991714 990219	Front Exhaust Pipe  Buttery			
064 065 066	991714 990219 990224	Front Exhaust Pipe			

# > Back to OneMotoring

**Enquire PARF/COE Rebate for Registered Vehicle** 

wner ID Type:	Singapore NRIC
wner ID: ehicle Details	862C
ehicle No.:	SMF3727G
ehicle to be Exported:	No
tended Deregistration Date:	30 Aug 2019
ehicle Make:	HYUNDAI
ehicle Model:	130 PDE 1.4 T-GDI DCT
mary Colour:	Grey
lanufacturing Year:	2018
ngine No.:	G4LDJD050757
nassis No.:	TMAH3513VJJ071184
ximum Power Output:	103.0 kW (138 bhp)
oen Market Value:	\$18,523.00
riginal Registration Date:	07 Nov 2018
st Registration Date:	07 Nov 2018
ansfer Count:	0
tual ARF Paid: tended PARF Rebate Details	\$18,523.00
RF Eligibility:	Yes
ARF Eligibility Expiry Date:	06 Nov 2028
RF Rebate Amount: tended COE Rebate Details	\$13,892.00
OE Expiry Date:	06 Nov 2028
DE Category:	B - Car above 1600cc or 97kW (130bhp)
DE Period(Years):	10
P Paid:	\$31,302.00
OE Rebate Amount:	\$28,754.00
otal Rebate Amount:	\$42,646.00

The information contained herein is correct as at 28 Aug 2019

laim Handling							LOS	SAL SU
Accident MT/1059955		The second secon			OFT S	Nie		11-
olicy No.	5104974151	Vehicle No.	SMF3727G		GST Registration	NO.		
ertificate No.					D-10000-00000	3 (39)	922	
olicyholder Name	CHOU KEAT KEONG				Policyholder NRJC		62C	
aduct Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC		Loading	0		
ontact No.(Mobile)	86888524	Contact No.(Office)			Contact No (Hom	C.7.6		
mail Address		Special Remark			eCode	No ▼		
FK	* No Yes	TCA	» No Yes		eCode Reason			
CD Protection	No	NCD Entitlement(%)	0		Private Hire	No		
✓ Accident Details								
	GRAVA COSTANIA	Accident Report Within 24	Yes		Accident Type	Collisio	n - Head to Rear	
eport Date	29/08/2019 09:37	hrs						
rate of Accident	28/08/2019	Time of Accident hh:mm	13:00		Country of Accide	ent Singap	314	
leporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No		TOP NO.			
Accident Location	PIE TWDS CHANGI NEAR LORNIE EX	QT.						
♥ Excess					SWIFT OF THE SECOND			
own damage Excess	600.00	Additional Excess	1500		Windscreen Exce	ss 100.00		
Innamed Driver Excess	0.00	Outside Singapore OD Excess		600.00				
Third Party Excess	0.00	Outside Singapore TP		0.00				
		Excess						
→ Benefits								
GST Registered Infor			COT Resistant	5.0				
SST Registered	No		GST Registration V		Yes			
GST Registration No.			GST Status F	armed	144			
dodification History								
	*******							
Policyholder Mailing		Lidding 3	SUMANG LANE		Address 3	MATIL	DA EDGE	
Address 1	BLK 220A #16-89	Address 2	Singapore address		Post Code	82122		
Address 4	SINGAPORE 821220	Address Type						
Unit No.	16-89	Related Policy Number	5104974151					
OI Driver Info		0.2.00 (2000)	Maria Maria					
Driver Name	CHOU KEAT KEONG	Driver Type	Main Driver		Driver DOB	07/08	/1990	
Unnamed driver Name		Driver NRIC	59029862C				11990	
Register Date of Driver License	11/01/2002	Driver Age	29		Driving Experier	nce 17		
Contact No.(Mobile)	86888524	Contact No.(Office)			Contact No.(Hor	me)		
Address 1	BLK 220A #16-89	Address 2	SUMANG LANE		Address 3	MATIL	DA EDGE	
Address 4	SINGAPORE 821220	Address Type	Singapore address		Post Code	82122	0	
Unit No.	16-89							
Does he own a Singapore	Yes + No	Driver Vehicle No.			Driver Insurer C	Company		
Registered car?								
<b>▽</b> Declaration								
Breathalyser or Blood Test	0020070	and taking	Yes . No					
Reading?	D mg	Any injury?	163 9 140					
Modification History								
Description of the second second								
Claim 001 OD-MD							LOS	SAL
	Tan Siew Choo	TODOGRAM	1-268-1-2022-1-10-1			Incured MDIC	590399530	
Claim Type		OD-MD	Insured Name	CHOU KEAT KEONG		Insured NRIC Contact No.	S9029862C	
Contact No.(Mobile)		86889524	Contact No. (Home)			(Office)		
Email Address		Jieqiang@hotmail.sg	OI Vehicle Number	SMF3727G		TP Vehicle Number	SJH1971E	
Claim Description		SMF3727G / SJH1971E ON 28 Au	g 2019			Name of Preferred Workshop	0	
Preferred	ion Intranspor		10000000			- p. 1000 1040 50		
64 4 - 10 Co. L. Co. Co. Co. Co. Co. Co. Co. Co. Co. Co								
Date Registered		29/08/2019 09:41	Claim Close Date			Date Received	29/08/2019 00:00	
Report Taken By		LIEW SHAN HUI	Workshop Repairer			Total Loss but Repaired		
♥ Print AK letter			100 may 100 may 1			OD Excess Collected by Workshop		
Modification History								
Modification History								

damage assessment Attachment

hicle Make	HYUNDAI	Vehicle Model	i 30 TURBO	Engine Capcity	
te of gistration	07/11/2018	Classis No.	TMAH3513VJJ071184		
wing guired *	● Yes ○ No	Vehicle in IDAC •	● Yes ○ No	Parallel Import *	O Yes ® No
pe of Tender	Own Damage *	Assessor Name *	SIMON	Survey Current Status	
AC/Workshop me	NATIONAL ASSESSMENT CENTR	IDAC/Workshop Location	51 UBI AVENUE 1 #01-25 PAYA		
ndscreen ts & Labour st		Total Loss •	☐ Yes ® No		Was a second
rket ue(S)		Scrape Value(\$)		Economical Repair Value(\$)	
40(3)	REMARKING OF REPAIR DAYS:6 DAY	S 1X FRT SUPPORT PANEL TOP GAI	RNISH COVER - UNCONFIRM, 1X AIRCON S	UCTION PIPE - UNCONFIRM.	

Remark for Supplementary

d a Part	No.	Part No.	Description	Qty .	Repair Code *	
roof	1	32200101	NUMBER PLATE (FRONT)	1	Replace	*
Not Applicable			NUMBER PLATE BASE (FRONT)	1	Replace	*
ABS	2	32200201				*
ABSORBER ACCELERATOR	3	32200501	NUMBER PLATE GARNISH (FRONT)	1	Replace	
ACTUATOR	4	16000101	BUMPER (FRONT)	1	Replace	•
ADVERTISEMENT STICKER	5	16002401	BUMPER CLIPS (FRONT)	6	Replace	
AIR BAG	6	16005101	BUMPER RETAINER (FRONT LEFT)	1	Replace	
AIR BLOWER	7	16005102	BUMPER RETAINER (FRONT RIGHT)	1	Replace	
AIR BOX AIR CHAMBER BOX	83		BUMPER REINFORCEMENT (FRONT)		Replace	
AIR CLEANER	В	16005001				
AIR COMPRESSOR	9	16005901	BUMPER SPONGE (FRONT)	1	Replace	
AIR CON	10	16003201	BUMPER GRILLE (FRONT)	1	Unconfirm	(T)
AIR CON (VAN)	11	16002902	BUMPER FOG LAMP COVER (FRONT RIGHT)	1	Unconfirm	
AIR COOLER AIR DISTRIBUTOR	12	16002901	BUMPER FOG LAMP COVER (FRONT LEFT)	-1	Unconfirm	
AR FLITER	1000	16002701	BUMPER FOG LAMP (FRONT LEFT)	1	Unconfirm	•
AIR FLOW	13				Unconfirm	*
AIR GRILLE	14	16002702	BUMPER FOG LAMP (FRONT RIGHT)			-
AIR HORN	15	27100101	GRILLE (FRONT)	1	Replace	-
AIR INTAKE	16	27100801	GRILLE EMBLEM (FRONT)	1	Replace	*
AIR RESONATOR BOX AIR THROTTLE BODY AND SENSOR	17	41300101	SUPPORT PANEL (FRONT)	1	Repair	*
ALARM	18	15600101	BRACE PANEL (FRONT)	1	Unconfirm	*
ALTERNATOR		27700101	HEAD LAMP (LEFT)	1	Replace	*
ALUMINIUM PANEL - SIDE	19				Unconfirm	*
AMPLIFIER	20	27700102	HEAD LAMP (RIGHT)	- 4	process and the same of the sa	•
ANTENNA ANTI ROLL	21	149001	BONNET	1	Replace	
APRON	22	14903401	BONNET LOCK (LOWER )	1	Unconfirm	*
ARCH	23	112023	AIR CON CONDENSER	1	Unconfirm	
ARM REST	24	112044	AIR CON DISCHARGE PIPE	1	Unconfirm	
ASH TRAY		344001	RADIATOR	1	Unconfirm	*
AUTO COULER PIPE	25		RADIATOR COWLING	1	Unconfirm	
AUTO CRUISE MOTOR	26	344005		- 4	Unconfirm	S-1
AUTO TRANSMISSION	27	344008	RADIATOR FAN	- 4		•
AXLE	28	25400102	FENDER (FRONT LEFT)	1	Replace	
BACK REST (M/C) BACK SEAT	29	25400901	FENDER INNER SHIELD (FRONT LEFT)	1	Unconfirm	*
BALANCER	30	25400103	FENDER (FRONT RIGHT)	1	Repair	•
RATTERY	31	454009	WIPER PANEL GARNISH	1	Unconfirm	*
	32	23300201	DOOR (FRONT LEFT)		Repair	*



Vehicle Check-In

# 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	The state of the s			
Vehicle No: SMF77746	Date In:	etativo:	Time In:	with Keys: Yes / No
	For Office use			
	Attended by:			
Workshop Collection of Vehicle	*	67		
Workshop: MOW-		-3		
Collection Date: 30/8/11	Time: _	14.82K	vith Keys: Yes/1	No
Collection Date: 30/8/11	Tow Man: _	Thoug chay	NR	IC: (68337911)
Signature:				
For office use				
Attended by: Thekson			Approved	by:
Workshop Return of Vehicle	0			
Workshop:		reg.	2	
Returned Date:	Time:		ith Key: Yes/N	0
* Tow In / Drive In Tow Man / Workshop Representative: _		114	NRIC	Ψ <sub></sub>
Signature:			For office	use
	S S 8		Attended b	у:
Owner Collection of Vehicle				
Collection Date:	Time:	wi	th Key: Yes/No	
Owner:	-77	NRIC:		
Signature:				V.
For office use				
Attended by:		<b>V</b>	Annrove	d by:

## LKK Paya Ubi

From:

Nabilah <nabilah@mova.com.sg>

Sent:

Friday, 30 August 2019 11:02 AM

To:

'Tan Siew Choo'; rspu@lkkauto.com
'Mova - Alan (Fan Yoong)'; suann@mova.com.sg; 'Nitha'

Subject:

RE: SMF3727G, OD claim no: MT/1059955

Dear Siew Choo,

Noted on your email. Will arrange accordingly.

Thank you.

Best Regards, Nabilah Senin MOVA Automotive Pte Ltd 15 Fan Yoong Road Singapore 629792 Tel: +65 6262 3377

Tel: +65 6262 3377 Fax: +65 6264 3151





From: Tan Siew Choo [mailto:siewchoo.tan@income.com.sg]

Sent: Friday, 30 August 2019 10:50 AM

To: NAC; Enny; 'Nabilah'; Mova-Nitha (nitha@mova.com.sg); suann@mova.com.sg; AVRIL HO

Subject: SMF3727G, OD claim no: MT/1059955

Importance: High

Dear IDAC and Mova,

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

## Dear Mova,

OD excess of \$2,100/- (std: \$600/-, additional excess: \$1,500/-) is applicable, pls assist to liaise with owner Mr Chou at tel: 86888524.

Survey required and you have to arrange personally at <a href="mailto:mtsurvey@income.com.sg">mtsurvey@income.com.sg</a>

**FOR PAYMENT**: Please forward the Invoice & Discharge Voucher together 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











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Our Ref: MT/CA/OD/051/1059955-001/TSC

30 Aug 2019

MOVA AUTOMOTIVE PTE LTD

BLK 1008 #01-04/06/08

BUKIT MERAH LANE 3

SINGAPORE 159722

Dear Sir

CLAIM NUMBER: MT/1059955-001

REPAIR OF VEHICLE NUMBER: SMF3727G

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 Aug 2019

Make: HYUNDAI Model: i 30 TURBO

Estimated Repair Days: 10

Location: NATIONAL ASSESSMENT CENTRE SERVICES

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

Benefits Applicable: N/A Excess Applicable: 2100.00

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.

Yours sincerely

Jenny Pe

Deputy Vice President

Motor Insurance

## Disclaimer

This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.