NATIONAL Assessment Centr	e Services.	[set + Jan'05] .	MMA 119114178	
(tate in 29 18/19 15:25	Jeb descripti		Date & Time Completed	Done by
Earlin MALINGI9015289144	SAS c-Illin	g	i	
Veh Ho SKF 8237 U	E-mail (wid	hin Shes, AIC Thes)		- A
110 A 2818/19 12:00 ·	i-Motor Ci	atın Form	MT/106007600	2919119 16:1
	1-Motor W	O (Within: OD 2hts,	7P 4hrs)	
(21) O ' Reporting Only	I-Photo Up	loaded	1	
710.1	Assessment/	Survey Report	i	
Tithuares		by Fax / Hand to	Owner/Wksp	
Proformed Wesp / INC Assign Wksp / QW: (on December of the second contract	1	CONTRACTOR	AX:
I'l Particulars: Veh No:	GY 9573 1	INC()/Non-INC()	AND A COLUMN TO SERVICE OF THE SERVI
Owner / Driver; (CIT 1373.1	•	Tel:)
Policy No: () Pari	iod: ()	Cover Type: ()_
Confirmed by : (Date:	Time:)
Insured/Driver Liability: (%) [N	lote-Est. Status	(WO): N: 0-20	%; P: 21-79%. P: 80-1	00%]
Year of Registration: () W	arranty: YES ()/NO())	
Excess: (\$) Loading: \$1,00		0()		••
General Reinhyler as A. S. Bassay (1911)	Y CONTRACTOR	建筑设置	HERNELSKE FALL	
() Walk-In Customer : Customer's Inform	nation strictly C	polidantial & Stde	and the NO spice of consists Y 57.	0.00
() Total Loss Case : to e-mail Insurer	the street of th	Contract of the Contract of th	Say NO 19101 Of Teparier.	,
Drive-In ()/ Towed-In (); Invoice:			wing Co: (· · · · · ·
Remarks - and (INC Holling 2079) 1661618				a sulpono by
The state of the s	urtesy Car ()		
2) QC Check / Post Repair Inspection)-	20 10 14	
1) Upload Resurvey Photo [Repair Cost > \$300	00] () : ;		THE PERSON NAMED IN COLUMN TWO
Injury:			1, 10	
Sale Trime Medical Consequence	Digara baran ya wan k	nie organie de Desaria svenia	Daniel de la contraction de	HARRY THE RESERVE
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	THE PERSON NAMED IN COLUMN	Terrandor Actividado		(L) Ami((I)) (C) Ami((I)
	906382	1) AIC Analdent Ca		30.00
timults Particulars is the collection of		2) DA : Damage Ass	essment (\$100); INC (\$80)	
ver/Owner:		1) TF : Towing Fee 4) FT : Follow-Throu	. \$40/5 igh Survey \$1	
riact No:	,	5) PT : Follow-Thron	igh Burvey (Resurvey) 5	30
naged Portion:		6) TR: Re-inspection	SUNC Only (wof 10 Jan 2003)	75
ragar ration.		7) N1 : Idao DA + SN		60
(1) 1 11 (0) Y (1)		8) NTUC Additional	Sarvines:-	
Checked by (Engr-In-Churge):		* NS: Courlesy Car		30
litors Comments		*NG: Repair Co-or *N7: Post Repair I	repeation 5	25
1. Consection memory and the consection of the c	地和多於原則的		Excess Coordination n INC) equinat INC S	13
		9) N12: Idao Mobile		MARY FA
1/3		Involve dated	Fee Charged	MESTA

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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Mobile Number

Fax Number Contact Number

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.
- 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

	ACCIDENT STATEMENT
Date Of Report	29/08/2019 15:25
Date Of Accident	28/08/2019 12:00
Exact Location Of Accident	AMK AVE 5 TWDS AMK AVE 3 AT THE SLIP RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKF8237U
Insured/Policyholder	
Name Of Registered Owner	ESTHER SHARLEEN TAN YING JIE
NRIC No	S9411796H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96248763
Alternative Phone No	OFFICE-96248763
Vehicle Particulars	
Manufacturer	HONDA
Model	JAZZ
Exact Purpose for which vehicle was being used a ime of accident	PRIVATE USE
Are you claiming under your own insurance policy or repair to your vehicle?	NO.
f No, Please state action to be taken	THIRD PARTY
/ehicle Category	PRIVATE CAR
nsurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
ype Of Coverage	COMPREHENSIVE
leet Policy	NO
Policy Number	5102376228-01
Cover Note Number	3
Priver	
lame of Driver	ESTHER SHARLEEN TAN YING JIE
RIC No	S9411796H
ate Of Birth	05/04/1994
ccupation	OUTDOOR
ate Of Driving Pass	11/09/2014
riving Experience	4 YEARS AND 11 MONTHS
ender	FEMALE

NOEMAIL

(LOCAL) +65-96248763

OFFICE-96248763

Address BLK 474 SEMBAWANG DR #13-333

Postcode 750474

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

2

NO

YES

1

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

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by NO

ambulance?

Was any other material or property damaged? YES

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

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name MACPHERSON NEIGHBOURHOOD POLICE POST

NO

ROAD: BLK 54 PIPIT ROAD #01-82/84 , POSTCODE: 370054 , COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 1800-7449999 - FAX NO: 65476366

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT T/20190829/2107

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Remarks/ Reasons:

YES YES

FILE TOO LARGE FAIL TO UPLOAD

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

GY9573P

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver YONG HEE WEN

NRIC/Passport Number S0593487G Contact Number 81329794

Address

Postcode

Insurance Company Name

Page 2 of 16

DETAILS OF INJURED PERSON 1

Name ESTHER SHARLEEN TAN YING JIE

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

Address Postcode BODY

SKF8237U

YES

NO

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 truthful and accurate as possible. Any wilful misrepresentation or withholding of material
 facts may allow insurance companies to repudiate policy liability.
- The issue and acceptance of this Form by insurance companies is not an admission of policy flability 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:

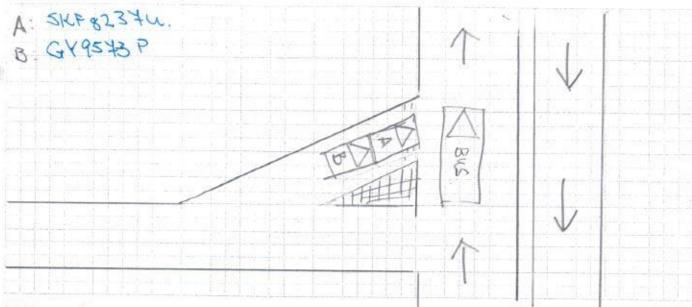
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s)
 - 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 Signato Date & Time:

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

Reporting Centre Personnel's Signature Name:

NRIC/FIN No .:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 28/8/19 at afternoon around 12pm, I was driving my car SKF 82374, at filter lane exiting from Ang Mo Lib Ave 5, going toward Ang mo Lib Ave 3. I came to a stop to giveway to incoming Vechile along the main road. I saw a bus coming so I waited for # to the bus clear so I can exit, however suddenly a vehicle no 649573P bang me from the back of my vechicle that causes huge impact. I was throw forward at that point of time on my driver sept. My seat belt was on but the great impact cause my right side of my cheek and forehead to hit on my Steering Wheel. I was traumatize by the aci accident at that point of time, while I was still in shock I regain conscious and quickly take photo of the # accident and exchange particular with the driver. My car do have an in car camera with footage recorded. I realise My cheek was painful brence I when to the nearest hospital (sengkang general hospital) to do check up, the x-ray report show I do have swelling hence I was warded. I also have back ache acter the incident. the I was given 5 days hospital Mc from 28 8 19-I was ask to go back for check up within a week for my cheek and my back injury.

DECLARATION

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

Policyholder's Signature Date & Time:

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

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





Date of Expiry:

Report No. T/20190829/2107

Police Station Of Origin: MacPherson NPP 54 Pipit Road #01-82/84 SINGAPORE 370054

Tel No: 1800-7449999

REPORT OF A TRAFFIC ACCIDENT

29/08/20	ne Report 119 14:51	Made:	Vide Report No.:	Station Diary No.:
Informa	nt's Partic	ulars		21
Name of	Informant	: EN TAN YING JIE	CLIVIDAVVAIVO	DRIVE #13-333 SINGAPORE
Nationalit	/ S94117	120	750474 Contact No.: Home/Office: Email:	Mobile: 96248763
Sex: Female	Age:	Date of Birth: 05/04/1994	Type of Informant:	
Race: Chinese			Language:	Institution / School Name:
Occupation SALES M.	n: ANAGER		Driving Licence Information:	was a first and a second

Type of Accident:	Injury Others	Drink Drive:	Date/Time of Accident:	Type of Location		
Location:		No	28/08/2019 12:00	THE ENGL		
Along Road 1 ANG MO KIO AMG MO KIO Weather: Clear		RDS ANG MO KIO AVEN Road Surface: Dry	NUE 3 AT THE FILTER	LANE oad Speed Limit:		
		Diy				
Traffic Flow: One Way Type of Collisio		Traffic Control: Pedestrian Crossii		raffic Volume:		

Class: 3A

Type	Make	Madel			
A COLUMN TO A COLUMN TO THE OWNER, THE OWNER	Wake	Iviodel	Color	Condition	No of Passenge
Vali	2 6			Slightly	2
Car	HONDA	1477 4 51	-	Damaged	
Cui	HONDA	JAZZ 1.5L AT SR HID	Blue	Slightly	0
	Type Van Car	Van	Van Car HONDA JAZZ 1.5L	Van Car HONDA JAZZ 1.5L Blue	Van Slightly Car HONDA JAZZ 1.5L Blue Slightly

Vehicle No.	Insurance Company			
SKF8237U	NTLIC Income I	Insurance No	Effective	Expiry Date
	NTUC Income Insurance Co-Operative Limited	5102376228-01	20/07/2019	19/07/2020





2 of 3 Report No. T/20190829/2107

Police Station Of Origin: MacPherson NPP 54 Pipit Road #01-82/84 SINGAPORE 370054 Tel No: 1800-7449999

CONTINUATION OF REPORT

Any Pedestrian	Involved: No					
No. of Pedestria	ns Injured: NIL	lloo of	Dadada			
Driver		Use of	Pedestri	an Cros	sing: NA	
Name	YONG HEE WEN		IDN	lo.	S0593487G	
Related Vehicle	GY9573P (Van)		Con	tact No.	81329794	
Hospital/Clinic	NIL			ng nce &	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL	scharge	y Date			
No. of Days gran	ted Medical Leave NIL	Date Di	of Injury	NIL		
Driver		Dogree	Or Injury	INIL		
Name	ESTHER SHARLEEN TAN	YING JIE	ID No	D.	S9411796H	
Related Vehicle	SKF8237U (Car)	¥1	Conta	act No.	96248763	
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.		Class Drivin Licen Expin	g	Class: 3A Date of Expiry: NIL	
Date Treatment	28/08/2019	Date Dis		29/08/	2019	
No. of Days grant	ed Medical Leave 05	Degree o		Slight	2010	

On 28/9/2019 at about 1200hrs, I was driving my car bearing the registration plate number, SKF8237U along ang mo kio avenue 5. I then exited at the filter lane towards ang mo kio avenue 3. While at the filter lane, I came to a stop at the giveway line to giveaway to the oncoming vehicle along the main road from the right. I saw a bus coming from the main road as such I waited for it to pass before I continued forward. Suddenly, one van bearing the registration plate number, GY9573P bang onto my car from the back. The impact of the hit pushed my car forward and I was also thrown forward and I hit my right cheek and forehead on the steering wheel. I was still in shock when the accident took place however I managed to came out of my car and make a check on my car and also exchanged particulars with the driver of the van. My car was towed at scene as the rear was fully dented and I went to see the doctor later on as I felt pain at my cheek area. I was warded for one night and was given 5 days MC after I was discharged. The doctor also told me that I have to go back for follow-up session regarding my lower back and cheek within one week. I would like to note that I have both the front and rear in car camera footage.





3100025(210)

3 of 3 Report No. T/20190829/2107

Police Station Of Origin: MacPherson NPP 54 Pipit Road #01-82/84 SINGAPORE 370054 Tel No: 1800-7449999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the <u>report number</u> as reference.

Signature Of Officer Recording The Report: G / Sgt 2 ONG WEI XING	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 29/08/2019 14:51
Officer In Charge Of Case: TP / AEIT / SI ANG YI TING, STEPHANIE Contact No.: 65476414	Classification Of Case:
Authentication Stamp	

IDENTITY CARD NO. S9411796H REPUBLIC OF SINGAPORE



所 。 。

部

For LKK/NAC Use Only

ESTHER

SHARLEEN TAN YING



SINGAPORE Country of birth

05-04-1994

Date of birth

CHINESE

Name

4384823

NRIC No. S9411796H

For LKK NAC Use Only

APT BLK 474 SEMBAWANG DRIVE #13-333 SINGAPORE 750474

03-04-2009

Date of issue

NRIC No: S9411796H

Date: 29/07/2018

ELICOFSINGMENT

マウ 国際 選出



ESTHER SHARLEEN TAN YING JIE

Birth Date: 05 Apr 1994
Issue Date: 11 Sep 2014
For UKUNAC Use Only

002344308G



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

EFFECTIVE DATE

11 Sep 2014

Class 3A Motor cars without clutch pedals (Auto) =< 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals =< 2500kg

or LKK NAC Use Only

Licence No: S9411796H

NP 428A



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: 5102376228-01

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle

: SKF8237U

Chassis Number

: JHMGE8850CS200101

2. Name of Policyholder

: ESTHER SHARLEEN TAN YING JIE

3. Effective Date of Insurance

: 20 Jul 2019

4. Expiry Date of Insurance

: 19 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.

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)

: \$\$600

EXCESS (SECTION 2)

: N/A

WINDSCREEN EXCESS

: \$\$100

ADDITIONAL EXCESS

: \$\$1,000 : PLEASE REFER OVERLEAF

UNNAMED DRIVER EXCESS REPAIR AT OWNER'S PREFERRED WORKSHOP

: NO

INSURE WITH COE

: YES

NCD PROTECTION

: NO

TRANSPORT ALLOWANCE

: NO

EXCESS WAIVER

: NO

PRIMARY DRIVER

: ESTHER SHARLEEN TAN YING JIE

NAMED DRIVER (1)

: N/A

NAMED DRIVER (2)

: N/A

HIRE PURCHASE COMPANY

: MAYBANK SINGAPORE 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

: CHUAN LEE ENTERPRISES PTE. LTD. (00000572826)

Date of Issue

: 01 Jul 2019 21:20 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

Claim Handling										
Accident MT/1060076										
Policy No.	5102376228-01	Vehicle Np.	SKF8237U		GST Re	gistration N	la.			
Certificate No.										
Policyholder Name	ESTHER SHARLEEN TAN YING JIE				Policyho	older NRIC		59411	796H	
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC		Loading	63		0		
Contact No.(Mobile)	96248763	Contact No.(Office)			Contact	No.(Hame)			
Email Address.		Special Remark			eCode			No *	ĭ	
KFK	+ No Ves	TCA	+ No Yes		eCode 8	Reason		110	4	
NCD Protection	No.	NCD Entitlement(%)	b		Private			No		
								5000		
Report Date	29/08/2019 16:13	Accident Report Within 24 hrs	Ves		Acciden	t Type		Collisio	n - Head t	n Bear
Date of Accident	28/06/2019	Time of Accident No:mm	12:00			of Acciden	e	Singap		
Reporting Centre		Orange Force			ICM No.			Segap	NA C	
Accident Location	AMK AVE 5 TWDS AMK AVE 3 AT THE SLIP RD				1000					
Total Excess Applicable										
Excess Type	Per Accident	Windscreen Excess		100.00						
				100.00						
OD Standard Excess	600.00	TP Standard Excess		0.00						
YIED OD EXCESS	0.00	YIED TP Excess		0.00	Driver is	Covered?		Covere	d	
Additional Excess	1000			8335		- 10 - 200		College		
Total CO Excess Applicable	1600,00	Total TP Excess Applicable		0.00						
♥ Benefits				3000						
GST Registered Informa	tion									
GST Registered	No		GST Rec	istration Date						
GST Registration No.				tus Verified		Yes				
Modification History										
Policyholder Mailing Add	Iress									
Address 1	BLX 311 #05-191	Address 2	HOUGANG AVEN	UE S	Address	3		SINGAR	PORE 5303	111
Address 4		Address Type	Singapore address	15	Post Cod	ie		530311		
Unit No.	05-191	Related Policy Number	5102376228-01					5.500000		
OI Driver Info										
Driver Name	ESTHER SHARLEEN TAN YING JIE	Driver Type	Main Driver							
Unnamed driver Name		Driver NRIC	S9411796H		Driver D	OB		05/04/1	1004	
Register Date of Driver License	11/09/2014	Driver Age	25			xperience		4		
Contact No.(Mobile)	96248763	Contact No.(Office)				No.(Home)				
Address 1	BLK 311 #05-191	Address 2	HOUGANG AVENU	F 5	Address			CONCAR	055 5300	200
Address #		Address Type	Singapore addres		Post Cod				ORE 5303	11
Unit No.	05-191	223.6967.656259		50	1000	5:		530311		
Does he own a Singapore Registered car?	Yes a No	Driver Vehicle No.			Parties de la constant de la constan		1025			
The grant of the last of					Duyer In	surer Comp	sany			
Peclaration										
Breathalyser or Blood Test	0 mg	Any injury?	1000							
leading?		24,0024	e Yes No							
Modification History										
Claim and										
Claim 001 New										
Saim Type *				Tan and	Insured Name	_			Incored	
				OD-MX		ESTHER :	SHARLEEN TAN	4 11/40 Ja	Insured NRIC	59411796H
Contact No.(Mobile)				96248763	No.				Contact No.	
					(Home)				(Office)	
mail Address					Of Vehicle	5×F8237	Ú.		TP Vehicle	GY9573P
laim Description				and the same of th	Number	41			Number Name of	
nam Description				SKF8237U / GY9573P ON	28 Aug 2019				Preferred	0
Areferred Vorkshop (i)	Insured Liability Not at Fault								Workshop	
inalisation Yes	Proferend Not at Fault Repair Preferred Workshop, Name	unknown V GIA Received	-	7						
late Registered	Option	report Received		and the same of th	Claim				Date	
William Commence				29/08/2019 16:17	Close				Received	29/08/2019 0
eport Taken By				LIEW SHAN HUI						
Print AK letter										
			Save Submit							
			John John							
Attachment										
cident No.	22000000	2023/2000								
	MT/1060076	Claim No.		001						
st Doc, Received	* Yes No	Upload Date		29/08/2019 16:18						
	Path *			Category *	Con	fidential	Urgency			Description
Choose File No file chosen			Clear	Please Select	▼ No	•	Normal	•		
Choose File No file chosen			Clear	Please Select	* NO	•	Normal	•		
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Clear Please Select Clear Please Select

* NO * Normal T NO * Normal • * NO * Normal

Message Read

Choose File No file chosen

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Choose File No file chosen

Altechment	Uploaded By/Date	Category	?	Urgency	Description	Msg Sent (CD)
1.4	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) 0 29 Aug 2019 16:18	NRIC/ Driving License	٧	Normal	NRIC/ Driving License 2019-8-29	1,000
114	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Aug 2019 16:18	NRJC/ Driving License	Y	Normal	NA3C/ Driving License 2019-8-29	
21	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Aug 2019 16:18	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2019-8-29	
) ES	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Aug 2019 16:18	NRIC/ Orlving License	34	Normal	NRTC/ Driving License 2019-8-29	
13	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Aug 2019 16:18	SAS		Normal	SAS 2019-8-29	
	NAC_PAYA_UBJ_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Aug 2019 16:18	Photos		Normal	Photos 2019-8-29	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Aug 2019 16:18	Photos		Normal	Photos 2019-8-29	
4	NAC_PAYA_UBJ_BD0601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Aug 2019 16:17	Photos		Normal	Photos 2019-8-29	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Aug 2019 16:17	Photos		Normal	Photos 2019-8-29	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Aug 2019 16:17	Photos		Normal	Photos 2019-8-29	
3	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Aug 2019 16:17	Photos		Normal	Photos 2019-8-29	
D	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Aug 2019 16:17	Photos		Normai	Photos 2019-8-29	
3	NAC_PAYA_UBI_BI00601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Aug 2019 16:17	Photos		Normal	Photos 2019-8-29	
Video List						
	Uploaded By/Date Folder Date	Fi	le Name		Source	

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