

NATIONAL Assessment Centre Services. [wef 1 Jan'05] MJA 119 134648

Date In: 12/19-12-25	Job description	Date & Time Completed	Done by
Ref No: NA/NC1901292624	SAS e-filing		
Veh No: JMW6482	E-mail (within 1hrs, AIC 2hrs)		
D.O.A: 8/10/19-16.30	i-Motor Claim Form	M7/1066552-001	12/17/19 18:07
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: JMW9380D	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% P: 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

Claimant's Particulars:-	Invoice Preparation Checklist	Am't (\$) Est Bill	Am't (\$) Add Bill
Driver/Owner:	1) AR: Accident Reporting (\$30);		
Contact No:	2) DA: Damage Assessment (\$100); INC (\$80)		
Damaged Portion:	3) TF: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):	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: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON*		
	*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: Idao Mobile 30		
Lat. 1:	Invoice dated	Fee Charged	
Lat. 2 / 3:	Invoice dated	Fee Charged	

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	10/10/2019 17:25
Date Of Accident	08/10/2019 16:30
Exact Location Of Accident	STADIUM BLVD OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM3648B
Insured/Policyholder	
Name Of Registered Owner	SPOTTS INTERNATIONAL PTE LTD
Co Reg No	201706877H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-82585558
Alternative Phone No	OFFICE-82585558

Vehicle Particulars

Manufacturer	BMW
Model	216D GRAN TOURER LED NAV 7 SEATER
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?	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	5089228003-02
Cover Note Number	

Driver

Name of Driver	WONG HUI LIN, LEONA
NRIC No	S8307391H
Date Of Birth	04/03/1983
Occupation	INDOOR
Date Of Driving Pass	12/01/2004
Driving Experience	15 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97900082
Fax Number	
Contact Number	OFFICE-97900082
EMail Address	NOEMAIL

Address	BLK 3A UPPER BOON KENG ROAD #03-604
Postcode	381003
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20191009/7012

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO FOOTAGE WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJW9380D
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)

1

SKETCH PLAN

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. 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

Stadium Blvd open space

opening the vehicle door

A: 5M3688
B: W9380D

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - 1/19/2019/2019.

DECLARATION

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

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.:



SINGAPORE POLICE FORCE



T/20191009/7012

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20191009/7012

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/10/2019 14:00		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: WONG HUI LIN, LEONA			Address: APT BLK 3A UPPER BOON KENG ROAD #03-604 SINGAPORE 381003		
ID Type / ID No.: NRIC NO / S8307391H			Contact No.: Home/Office: Mobile: 97900082		
Nationality: SINGAPORE CITIZEN			Email: wleona@gmail.com		
Sex: Female	Age: 36	Date of Birth: 04/03/1983	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Sales Manager			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 08/10/2019 16:30	Type of Location: Car Park
Location: Stadium Boulevard				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Slamming door against body of the car				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLM3648B	Car					0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20191009/7012

2 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20191009/7012

CONTINUATION OF REPORT

Driver			
Name	WONG HUI LIN, LEONA	ID No.	S8307391H
Related Vehicle	SLM3648B (Car)	Contact No.	97900082
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

To Whom it May Concern;

I parked my vehicle SLM3648B at Stadium Boulevard to buy something from Decathlon Singapore Lab, I parked at the carpark outside the building and my vehicle was stationary. I parked in line and in a proper carpark lot. When I returned to my car I noticed a big white scratch and a huge dent as well as dents on my other door. I took some photos and proceeded to go home to retrieve the video only to realise the white car, Toyota Altis, bearing number plate SJW9380D next to me slammed its door into my car, twice, as you can hear from the video. The driver of the other car is well aware she slammed her door against my car as you can see from the video she pulled back the door towards her, she then proceed to go to her rear passenger door and open it and slamming it against my car (can hear and see from side mirror) then she closed the door and went off. there are some damages to my car. She did not even bother to check on my car or take responsibility, just simply walk off. This is unfair as I parked my car properly only to encounter this with an inconsiderate driver, action must be taken towards such drivers as these kind of driver who are inconsiderate and oblivious cause Insurance premiums to go up year on year. Please kindly take action. I would want to claim for damages.

I have the video of the incident which I can submit via email if necessary.

Thank you for your kind attention and your help ahead.

Appreciate it.
Regards
Leona



**SINGAPORE
POLICE FORCE**



T/20191009/7012

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20191009/7012

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
IRMAN BIN MOHAMAD SAID
Contact No.: 65476145

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
09/10/2019 14:00

Classification Of Case:

INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Company) of SPOTTS INTERNATIONAL PTE. LTD. (201706877H)

Date: 10/10/2019

The Following Are The Brief Particulars of :

Registration No.	:	201706877H
Company Name.	:	SPOTTS INTERNATIONAL PTE. LTD.
Former Name if any	:	
Incorporation Date.	:	11/03/2017
Company Type	:	EXEMPT PRIVATE COMPANY LIMITED BY SHARES
Status	:	Live Company
Status Date	:	11/03/2017

Principal Activities

Activities (I)	:	PASSENGER LAND TRANSPORT N.E.C. (EG PRIVATE CARS FOR HIRE WITH OPERATOR AND TRISHAWS) (49219)
Description	:	TRANSPORTATION AND TRAVEL SERVICES
Activities (II)	:	TRAVEL AGENCIES AND TOUR OPERATORS (MAINLY INBOUND) (79101)
Description	:	TRAVEL AND TOUR SERVICES

Capital

Issued Share Capital (AMOUNT)	Number of Shares *	Currency	Share Type
100000	100000	SINGAPORE, DOLLARS	ORDINARY

* Number of Shares includes number of Treasury Shares

Paid-Up Capital (AMOUNT)	Number of Shares	Currency	Share Type
100000		SINGAPORE, DOLLARS	ORDINARY

COMPANY HAS THE FOLLOWING ORDINARY SHARES HELD AS TREASURY SHARES

Number Of Shares	Currency
------------------	----------

INFORMATION RESOURCES

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Business Profile (Company) of SPOTTS INTERNATIONAL PTE. LTD. (201706877H)

Date: 10/10/2019

Registered Office Address	:	3D UPPER BOON KENG ROAD #03-644 KALLANG HEIGHTS SINGAPORE (384003)
Date of Address	:	25/05/2019
Date of Last AGM	:	31/08/2018
Date of Last AR	:	01/09/2018
FYE As At Date of Last AR	:	30/06/2018

Audit Firms

NAME

Charges

Charge No.	Date Registered	Currency	Amount Secured	Chargee(s)
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Officers/Authorised Representative(s)

Name	ID	Nationality	Source of Address	Date of Appointment
Address		Position Held		
WONG HUI LIN LEONA	S8307391H	SINGAPORE CITIZEN	OSCARS	11/03/2017
3A UPPER BOON KENG ROAD #03-604 KALLANG HEIGHTS SINGAPORE (381003)		Director		
CHONG HUI MIN	S8032555Z	SINGAPORE CITIZEN	OSCARS	11/03/2017
3D UPPER BOON KENG ROAD #03-644 KALLANG HEIGHTS SINGAPORE (384003)		Director		
CHONG HUI MIN	S8032555Z	SINGAPORE CITIZEN	OSCARS	11/03/2017
3D UPPER BOON KENG ROAD #03-644 KALLANG HEIGHTS SINGAPORE (384003)		Secretary		

Authentication No. : B19744555K

INFORMATION RESOURCES

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Business Profile (Company) of SPOTTS INTERNATIONAL PTE. LTD. (201706877H)

Date: 10/10/2019

Shareholder(s)					
Name		ID	Nationality/Place of incorporation/Origin	Source of Address	Address Changed
Address					
1	CHONG HUI MIN	S8032555Z	SINGAPORE CITIZEN	OSCARS	13/12/2018
3D UPPER BOON KENG ROAD #03-644 KALLANG HEIGHTS SINGAPORE (384003)					
Ordinary(Number)		Currency			
60000		SINGAPORE, DOLLARS			
2	WONG HUI LIN LEONA	S8307391H	SINGAPORE CITIZEN	OSCARS	13/12/2018
3A UPPER BOON KENG ROAD #03-604 KALLANG HEIGHTS SINGAPORE (381003)					
Ordinary(Number)		Currency			
40000		SINGAPORE, DOLLARS			

Abbreviation

UL - Local Entity not registered with ACRA

UF - Foreign Entity not registered with ACRA

AR - Annual Return

AGM - Annual General Meeting

FS - Financial Statements

FYE - Financial Year End

OSCARS - One Stop Change of Address Reporting Service by Immigration & Checkpoint Authority.

Note :

- The information contained in this Business Profile is extracted from lodgements filed by this entity with ACRA.

INFORMATION RESOURCES

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Business Profile (Company) of SPOTTS INTERNATIONAL PTE. LTD. (201706877H)

Date: 10/10/2019

- The list of officers for this entity is available for online authentication within 30 days from the date of purchase of this Business Profile. Please scan the QR code available on the last page of this profile to access the authentication page. For more information, please visit www.acra.gov.sg.

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES
SINGAPORE

RECEIPT NO. : ACRA191010175122

DATE : 10/10/2019

This is computer generated. Hence no signature required.



Authentication No. : B19744555K

eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI_800601

* Change Language

* Change Password

* Log Out

My Desktop

Notice of Loss

Policy Query

Policy No. Date of Accident

Vehicle No.(For Motor) Certificate Number

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5089228003-02		SPOTTS INTERNATIONAL PTE. LTD.	201706877H	GPC	drive PREMIUM	SLM3648B	SLM3648B	28/03/2019	27/03/2020

Continue

▼ Policy Information

Policy No.	5089228003-02	Policyholder Name	SPOTTS INTERNATIONAL PTE. L	Policyholder NRIC	201706877H
Certificate No.					
Address	21 CUSCADEN ROAD #06-07 MING ARCADE SINGAPORE 249720				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	26/03/2019	Effective Date	28/03/2019 00:00	Expiry Date	27/03/2020 23:59
Excess Type		All Claims Excess			
Third Party Excess	0	Own damage Excess	600	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	600	Outside Singapore TP Excess	0		Young/Inexperience Driver Excess
Agent	INCOME-BRANCH SERVICES	Agent Tel.	67886616	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	21 CUSCADEN ROAD	Address 2	#06-07 MING ARCADE	Address 3	SINGAPORE 249720
Address 4		Address Type	Singapore address	Post Code	249720
Unit No.	06-07	Related Policy Number	5089228003-02		

► Insured Object: SLM3648B

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
1	10/05/2019 00:00	Basic Information Endorsement	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that from 10 May 2019, the following amendment(s) is/are made to this policy: 1. This Policy does not cover usage of vehicle for hire or reward. 2. The Excess (Section 1) is revised to \$600.00 3. The Excess (Section 2) of \$1,500.00 is not applicable. In view of this amendment, a cheque refund of \$769.69 (inclusive of GST) will be mailed to you separately.

Continue

Cancel

Claim Handling

Accident MT/1066332

Policy No.	5089228003-02	Vehicle No.	SLM3648B	GST Registration No.	
Certificate No.					
Policyholder Name	SPOTTS INTERNATIONAL PTE. LTD.	Cover Type	drive PREMIUM	Policyholder NRIC	201706873H
Product Code	PRIVATE CAR INSURANCE	Contact No. (Office)	0	Loading	0
Contact No. (Mobile)	82585558	Special Remark		Contact No. (Home)	0
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	<input type="text" value="7"/>
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	20	eCode Reason	
NCD Protection	No	Private Hire	No		
Accident Details					
Report Date	10/10/2019 18:05	Accident Report Within 24 hrs	Yes	Accident Type	Damaged whilst parked
Date of Accident	08/10/2019	Time of Accident hh:mm	16:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	STADIUM BLVD OPEN SPACE CARPARK				
Excess					
Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OO Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		
Benefits					
GST Registered Information					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification history	10/10/2019 18:06:51 System changed GST Status Verified from No to Yes				

Policyholder Mailing Address

Address 1	21 CUSCADEN ROAD	Address 2	#06-07 MING ARCADE	Address 3	SINGAPORE 249720
Address 4		Address Type	Singapore address	Post Code	249720
Unit No.	06-07	Related Policy Number	5089228003-02		
OI Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	04/03/1983
Unnamed driver Name	WONG HUI LIN, LEONA	Driver NRIC	58307391H	Driving Experience	15
Register Date of Driver License	12/01/2004	Driver Age	36	Contact No. (Home)	0
Contact No. (Mobile)	97900082	Contact No. (Office)	0	Address 3	KALLANG HEIGHTS
Address 1	BLK 3A	Address 2	UPPER BOON KENG ROAD	Post Code	381003
Address 4	SINGAPORE 381003	Address Type	Singapore address		
Unit No.	03-604				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Declaration

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

Claim 001 **New**

Claim Type *	DO-MX	Insured Name	SPOTTS INTERNATIONAL PTE. L	Insured NRIC	201706873H
Contact No. (Mobile)	NIL	Contact No. (Home)	NIL	Contact No. (Office)	NIL
Email Address		OI Vehicle Number	SLM3648B	TP Vehicle Number	5JW9380D
Claimant Type Claimant *	Please Select	Type of Benefit *	Please Select		
Claimant Name *		Claimant NRIC *			
Claimant Address					
Claim Description	SLM3648B / 5JW9380D ON 8 Oct 2019				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	10/10/2019 18:07	Claim Close Date		Date Received	10/10/2019 00:00
Report Taken By	Jackson				
<input checked="" type="checkbox"/> Print AX letter					

Save Submit

Attachment

Accident No.	MT/1066332	Claim No.	001		
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	10/10/2019 18:08		
Path *		Category *	Confidential	Urgency *	Description *
	Browse... Clear	Please Select	NO	Normal	
	Browse... Clear	Please Select	NO	Normal	
	Browse... Clear	Please Select	NO	Normal	
	Browse... Clear	Please Select	NO	Normal	
	Browse... Clear	Please Select	NO	Normal	
	Browse... Clear	Please Select	NO	Normal	
<input type="checkbox"/> Send Message					

Attachment List

Msg Sent?

Attachment	Uploaded By/Date	Category		Urgency	Description	(CO)	#
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV1 CES) on 10 Oct 2019 18:08	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2019-10-10		
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV1 CES) on 10 Oct 2019 18:08	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2019-10-10		
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV1 CES) on 10 Oct 2019 18:08	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2019-10-10		
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV1 CES) on 10 Oct 2019 18:08	SAS		Normal	SAS 2019-10-10		
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV1 CES) on 10 Oct 2019 18:07	Photos		Normal	Photos 2019-10-10		
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV1 CES) on 10 Oct 2019 18:07	Photos		Normal	Photos 2019-10-10		
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV1 CES) on 10 Oct 2019 18:07	Photos		Normal	Photos 2019-10-10		
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV1 CES) on 10 Oct 2019 18:07	Photos		Normal	Photos 2019-10-10		
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV1 CES) on 10 Oct 2019 18:07	Photos		Normal	Photos 2019-10-10		
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV1 CES) on 10 Oct 2019 18:07	Photos		Normal	Photos 2019-10-10		
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV1 CES) on 10 Oct 2019 18:07	Photos		Normal	Photos 2019-10-10		
 Video List							
Uploaded By/Date	Folder Date	File Name		Source	Actor		
<div>Display in New Window</div> <div>Scan and uploading</div>							