NATIONAL Assessment Centre Services [wef 1 Jan'05] MHA19155838

Date In: 26/11/19-09:05	Job description	Date &Time Completed	Done by
Ref No: HA/INC 1920085 1/Cov.	SAS e-filing		
Veh No: SJM2345T	E-mail (within 8hrs, AIC 2hrs)		
D.O.A : 25/11/19-09:20	i-Motor Claim Form	M/1074828-00V	26/11/19 09:18
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: SLP4484X 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

HA1985945

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

Invoice Preparation Checklist		Amt ($) for Bill	Amt ($) Add Bill
1) AR : Accident Reporting ($30);			
2) DA : Damage Assessment ($100);	INC ($80)		
3) TF : Towing Fee	$40/$45		
4) FT : Follow-Through Survey	$120		
5) FT : Follow-Through Survey (Resurvey)	$30		
For claiming against INC Only (wef 10 Jan 2005)			
6) TR : Re-inspection	$75		
7) N1 : Idac DA + SMRT Survey	$160		
8) NTUC Additional Services.-			
OD*			
*N5: Courtesy Car / Tpt Allowance	$5		
*N6: Repair Co-ordination	$10		
*N7: Post Repair Inspection	$25		
*N8: DV / Collect Excess Coordination	$5		
TP (N11) : TP (Non INC) against INC	$20		
9) N12: Idac Mobile	30		
Invoice dated	*Fee Charged*		
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 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.**
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	26/11/2019 09:05
Date Of Accident	25/11/2019 09:20
Exact Location Of Accident	KPE (ECP) AFTER TAMPINES RD EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMQ3925T
Insured/Policyholder	
Name Of Registered Owner	SEE WAN LING, WENDY
NRIC No	S9105567H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90922687
Alternative Phone No	OFFICE-90922687
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	CLA180 (R18 BI)
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	5114086168
Cover Note Number	
Driver	
Name of Driver	SEE WAN LING, WENDY
NRIC No	S9105567H
Date Of Birth	02/02/1991
Occupation	INDOOR
Date Of Driving Pass	29/07/2010
Driving Experience	9 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90922687
Fax Number	
Contact Number	OFFICE-90922687
EMail Address	NOEMAIL

Address	BLK 217D SUMANG WALK #05-206
Postcode	824217
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	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)	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

REFER TO 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	SLP4489X
Vehicle Make/Model/Colour	MAZDA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	POON SHAO LUN, JOE
NRIC/Passport Number	S8307607J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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.

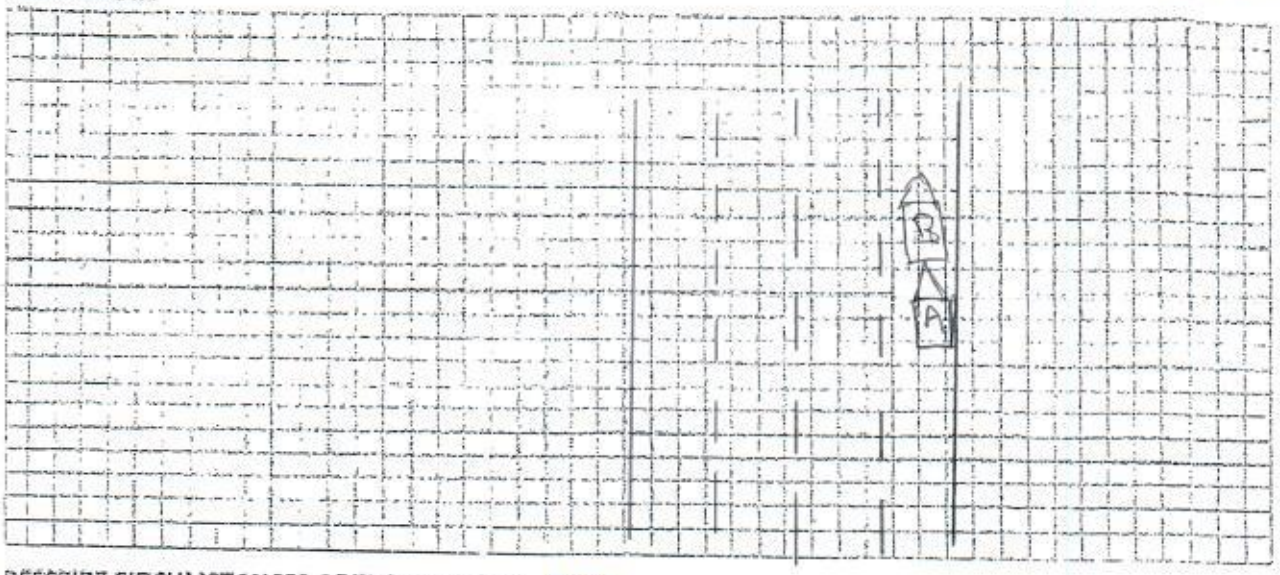
Policyholder's Signature
Date & Time:
25/11/19

Driver's Signature
(If driver is not the policyholder)
Date & Time:
25/11/19.

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

A – SMQ 3925T
B – SLP 4489X

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT date.

On the stated and time, I was travelling along KPE toward ECP, after Tampines Road Entrance, Veh B suddenly make a e-brake, due to vehicles in front filtering into lane 1 suddenly. I could not stop in time even though there was a distance of about 2 car's space hence my vehicle collided onto the rear of vehicle B.

DECLARATION

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

Policyholder's Signature
Date & Time:
3/11/19

Driver's Signature
(If driver is not the policyholder)
Date & Time:
3/11/19.

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

Date of Accident : 25/11/19 Accident Time: 0920 (24-HR-Format)

Accident Place : KPE Toward ECP after Tampines Road Exit

Vehicle Reg. No. (Car Plate No.) : SMQ3925T

Vehicle Make/Model : Mevc CLA180

Insurance Company : NTUC Income Policy No. 5114086168

Owner or Company Name /IC No. : See Wan Ling, Wendy S9105567H

Owner or Company Contact No. : 9092 2687 Owner's Hp _____ Company Tel

DRIVER'S Name / IC No. : See Wan Ling, Wendy

DRIVER'S Date Of Birth : 02/02/1991 DRIVER'S License Pass Date 29 Jul 2010

Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee\ Others: _____

DRIVER'S Address : 2170 Sumang Walk #05-206

DRIVER'S Contact No./ Alt No. :1) _____ 2) _____

DRIVER'S Occupation : (INDOOR) \ OUTDOOR (e.g. working inside or outside office)

Email Address : WENDY.C@LIVE.COM.

Weather & Road Surface : (CLEAR & DRY) \ RAINING & WET \ AFTER RAIN & WET

Reporting Type : Reporting Only \ Claim Other Party \ (Claim Own Insurance)

Number of Passengers (Including Driver): 01

Was there any video Captured by car camera YES (NO)

Exact purpose for which vehicle was being used at the time of accident: (Private use) \ Work purpose

Other Party Driver's Particular (if any)

Vehicle Reg. No: SLP4489X

Vehicle Make\Model: Mazda

Name Driver: Poon Shao Kun, Joe

IC No. Driver: S8307607J

Driver's Contact & Add: _____

Vehicle Reg. No: _____

Vehicle Make\Model: _____

Name Driver: _____

IC No. Driver: _____

Driver's Contact & Add: _____

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 25/11/2019 09:20

Vehicle No.(For Motor) SMQ3925T

Certificate Number

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
○	5114086168		SEE WAN LING, WENDY	S9105567H	GPC	drivo CLASSIC	SMQ3925T	SMQ3925T	21/11/2019	20/11/2020

Continue

Claim Handling

Accident MT/1072828

Policy No.	5114086168	Vehicle No.	SMQ3925T	GST Registration No.	
Certificate No.					
Policyholder Name	SEE WAN LING, WENDY			Policyholder NRIC	S9105567H
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	◉ No ○ Yes	TCA	◉ No ○ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	10	Private Hire	Not available

Accident Details

Report Date	25/11/2019 16:10	Accident Report Within 24 hrs	Yes	Accident Type	Unknown
Date of Accident	25/11/2019	Time of Accident hh:mm	00:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	NA				

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	600.00	TP Standard Excess	0.00		
YIED OD Excess		YIED TP Excess		Driver is Covered?	Not Applicable
Additional Excess	0				
Total OD Excess Applicable	600.00	Total TP Excess Applicable	0.00		

Benefits

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	BLK 217D #05-206	Address 2	SUMANG WALK	Address 3	MATILDA PORTICO
Address 4	SINGAPORE 824217	Address Type	Singapore address	Post Code	824217
Unit No.	05-206	Related Policy Number	5114086168		

OI Driver Info

Driver Name		Driver Type			
Unnamed driver Name		Driver NRIC		Driver DOB	
Register Date of Driver License		Driver Age		Driving Experience	
Contact No.(Mobile)		Contact No.(Office)		Contact No.(Home)	
Address 1		Address 2		Address 3	
Address 4		Address Type	Foreign address	Post Code	
Unit No.					
Does he own a Singapore Registered car?	○ Yes ◉ No	Driver Vehicle No.		Driver Insurer Company	

Modification History

Claim 002 **New**

Claim Type *	OD-MD	Insured Name	SEE WAN LING, WENDY	Insured NRIC	S9105567H
Contact No.(Mobile)	90922687	Contact No.(Home)		Contact No.(Office)	
Email Address		OI Vehicle Number	SMQ3925T	TP Vehicle Number	SLP4489X
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select		
Claimant Name *	>>	Claimant NRIC *			
Claimant Address					
Claim Description	SMQ3925T / SLP4489X ON 25 Nov 2019			Name of Preferred Workshop	MY CAR CONSULTANT PTE LTD
Preferred Workshop Contact No.	98888885	Insured Liability *	Fully at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop (refer below)	GIA report	Received
Date Registered	26/11/2019 09:18	Claim Close Date		Date Received	26/11/2019 00:00
Report Taken By	Jackson				
☑ Print AK letter				OD Excess Collected by Workshop	

Save Submit

Attachment

Accident No.	MT/1072828	Claim No.	002
Last Doc. Received	◉ Yes ○ No	Upload Date	26/11/2019 09:18

Path *			Category *	Confidential	Urgency *	Description *
	Browse...	Clear	Please Select		Normal	
	Browse...	Clear	Please Select		Normal	
	Browse...	Clear	Please Select		Normal	
	Browse...	Clear	Please Select		Normal	
	Browse...	Clear	Please Select		Normal	
	Browse...	Clear	Please Select		Normal	

Upload Files ☐ Send Message

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent?

						(CO)
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Nov 2019 09:18	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2019-11-26	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Nov 2019 09:18	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2019-11-26	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Nov 2019 09:18	SAS		Normal	SAS 2019-11-26	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Nov 2019 09:18	Photos		Normal	Photos 2019-11-26	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Nov 2019 09:18	Photos		Normal	Photos 2019-11-26	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Nov 2019 09:18	Photos		Normal	Photos 2019-11-26	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Nov 2019 09:18	Photos		Normal	Photos 2019-11-26	
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Nov 2019 09:18	Photos		Normal	Photos 2019-11-26	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Nov 2019 09:18	Photos		Normal	Photos 2019-11-26	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Nov 2019 09:18	Photos		Normal	Photos 2019-11-26	

Video List

Uploaded By/Date	Folder Date	File Name	Source	Actio

Display in New Window | Scan and uploading

(15.03.06)

ASS. REC. BY: | REF: | Assessor: Mobile: YES / NO

ASSIGNMENT (IDAC)

By CSO- Nature of Accident:

1) Vehicle hit Vehicle:
- a) Motorcar ( )
- b) M/cycle ( )
- c) Bicycle ( )

2) Vehicle hit ??
- a) Pedestrian ( )
- b) Animal ( )

3) Vehicle hit Road Side Objects:
- a) Govm.Property ( ) (Eg: signboard, barrier, tree etc)
- b) Road Work Object ( )
- c) Private Property ( )

4) Vehicle drop into drain ( )

5) Damage due to Act of God:
- a) Fallen Object ( )
- b) Flood ( )
- c) Other,

6) Parked & Found Damaged:
- a) Vandalism ( )
- b) Hit by Moving Object ( )

7) Theft Case
- a) Stolen ( )
- b) Damage found when recovered. ( )

8) Fire
- a) Whilst driving ( )
- b) Parked ( )

9) Accident date more than 24hrs ( )

By Assessor- 1) Vehicle Information

Veh No: SMQ3925T Yr Regn 28 Oct / 2014

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover / MPV / Truck / Trailer or

Make & Model: MB CLA 180 c.c 1595

Colour Silver Grey Transmission Type: Auto / Manual

Eng/No: Sp.Reading: 65025

C/No: WDD1173422N122928

Gen. Cond: Good / Fair / Poor / Burnt or

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi : Nil / S/Rim / STD A/Rim or

Tyre Size: F: 225/50R17

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI / TOYO / YOKO or

Front			Rear		
R/Bal.	5	mm	R/Bal.	6	mm
L/Bal.	5	mm	L/Bal.	6	mm

Parallel Import: Yes / No

Repair Type: LS / I.B.I

No of Repair Days: 8

D.O.I. 25/11/2019

Towed-In: Yes / No

Towing Required: Yes / No

Vehicle in Idac: Yes / No

Time: 6.20 pm

By Assessor- 2) Comments

1) Damages not due to recent accident.

2) Damages do not seem hit onto:

a.Vehicle ( ) b.Motorcycle ( ) c.Bicycle ( ) d.Pedestrian ( )

e.Animal ( ) f.Govm Object ( ) g.Road Work Object ( )

h.Private Property ( ) i.Drain ( ) j.Road Kerb/Grass Verge ( )

3) Vehicle does not seem damaged as a result of:

a.Fallen Object ( ) b.Flood ( ) c.Vandalism ( ) d.Fire ( )

e.Moving Object ( ) f.Stolen ( ) g.Stolen & Recovered ( )

Remarks for internal information

Remarks to appear in Works Order & Assessment report

1) Potential Total Loss ( )

2) SRS Light on ( )

3) ABS Light on ( )

	Time Started:	Time completed:
1) CSO		
2) ASS		
3) Entire Operation Completed Time:		

(1-5)Rust (3)Dented (3)Oxidized (4)Cracked (5)Cut (6)Scratched (07)Deformed
(96)Stalled (09)Buckled (10)Broken (11)Necessary (12)Missing (13)Torn
(14)Unconfirmed (15)Not Working

MOTOR CAR (Frt)

ACTION(AC) Aug 1005
(1)Replace (✓) (2)Repair (O) (3)Check (?)
(4)Not Consistent (NC)

Vehicle No: SMQ3925T

Front Portion

NAC	INC	Item	CON	AC	Qty
1001	991886	Frt Number Plate	CRA	✓	
1002	991887	Frt Number Plate Base	CRA	✓	
1003	991889	Frt Number Plate Garnish	CRA	✓	
1004	991300	Frt Bumper	BR	✓	
1005	992341	Frt Bumper Clips	NEC	✓	6
1006	991325	Frt Bumper Bracket		?	
1007	991462	Frt Bumper Side Retainer	DIS	✓	2
1008	991433	Frt Bumper Reinforcement	DD	✓	
1009	991318	Frt Bumper Beam		?	
1010	991468	Frt Bumper Sponge	CRA	✓	
1011	991427	Frt Bumper ~~Protector~~ Emblem	NEC	✓	
1012	991420	Frt Bumper ~~Run~~ Tow Eye Cover	CRA	✓	
1013	991363	Frt Bumper Grille	CRA	✓	
1014	991301	Frt Bumper Moulding			
1015	991407	Frt Bumper Lower Spoiler			
1016	991438	Frt Bumper Sensor		?	
1017	995100	Frt LH Bumper Fog Lamp Cover		?	
1018	991355	Frt RH Bumper Fog Lamp Cover		?	
1019	995079	Frt LH Bumper Fog Lamp			
1020	995080	Frt RH Bumper Fog Lamp			
1021	991793	Frt Grille	CRA	✓	
1022	991328	Frt Grille Emblem	CRA	✓	
1023	991799	Frt Grille Chrome Moulding	CRA	✓	2
1024	991222	Frt Apron Panel			
1025	992013	Frt Support Panel	BT	✓	
1026	992025	Frt Support Panel Top Garnish Cover	CRA	✓	
1027	992416	Horn		?	
1028	991277	Frt Brace Panel		?	
1029	995153	Frt LH Headlamp Assy		?	
1030	991821	Frt RH Headlamp Assy	CRA	✓	
1031	995088	Frt LH Side Lamp			
1032	995089	Frt RH Side Lamp			
1033	990248	Bonnet		?	
1034	991328	Bonnet Emblem			
1035	990287	Bonnet Lock		?	
1036	990285	Bonnet Insulator			
1037	990273	Bonnet Hinge	BT	✓	2
1038	990261	Bonnet Damper			
1039	990305	Bonnet Rubber			
1040	990252	Bonnet Cable			
1041	990311	Bonnet Stand			
1042	990119	Air Con Condenser		?	
1043	990122	Air Con Fan Assy			
1044	990134	Air Con Suction Pipe (Low Pressure)		?	
1045	990118	Air Con Suction Hose		?	
1046	990133	Air Con Discharge Pipe (High Pressure)		?	
1047	990114	Air Con Discharge Hose		?	
1048	990149	Air Con Liquid Pipe			
1049	995066	Air Con Receiver Drier			
1050	990111	Air Con Compressor Assy			
1051	995294	Air Con Belt			
1052	995074	Radiator		?	
1053	992738	Radiator Cowling		?	
1054	992742	Radiator Fan Assy		?	
1055	992745	Radiator Fan Clutch		?	
1056	992758	Radiator Hose Top			
1057	992757	Radiator Hose Bottom			
1058	992741	Radiator Expansion Tank		?	
1059	990151	Air Duct		?	
1060	990070	Air Cleaner Assy			
1061	990056	Air Cleaner Hose			
1062	990089	Air Cleaner Resonator			
1063	991712	Frt Exhaust Manifold			
1064	991713	Frt Exhaust Manifold Cover			
1065	991054	Frt Exhaust Manifold Sensor (Oxygen)			
1066	991714	Front Exhaust Pipe			
1067	990519	Battery			
1068	990224	Battery Cover			
1069	990223	Battery Bracket			
1070	990229	Battery Tray			

NAC	INC	Item	CON	AC	Qty
1071	992205	Fuse Box			
1072	994011	Relay Box			
1073	995053	Wiper Washer Tank			
1074	995052	Wiper Washer Tank Motor			
1075	990159	Alternator Assy			
1076	990160	Alternator Belt			
1077	992688	Power Steering Pump			
1078	992669	Power Steering Belt			
1079	994431	Power Steering Cooler Pipe			
1080	992692	Power Steering Hose			
1081	990010	ABS Pump Control Unit			
1082	990427	Brake Master Pump Assy			
1083	990403	Brake Booster Pump Assy			
1084	991005	Engine Top Cover			
1085	991011	Engine Under Cover		?	
1086	990946	Engine Mounting			
1087	990949	Engine Mounting Frt			
1088	990950	Engine Mounting LH			
1089	990952	Engine Mounting RH			
1090	990951	Engine Mounting Rear			
1091	992234	Gear Box Mounting			
1092	991520	Frt LH Chassis Member			
1093	991520	Frt RH Chassis Member			
1094	990728	Frt Vertical Cross Member			
1095	991863	Frt Lower Cross Member			
1096	995070	Frt LH Fender			
1097	995072	Frt LH Fender Inner Panel			
1098	995147	Frt LH Fender Lamp			
1099	995148	Frt LH Fender Protector			
1100	991740	Frt LH Fender Inner Shield		?	
1101	995179	Frt LH Mudflap			
1102	995170	Frt LH Wheel Rim			
1103	994025	Frt LH Rim Cover			
1104	995065	Frt LH Tyre			
1105	995071	Frt RH Fender	BT	R	
1106	991739	Frt RH Fender Inner Panel			
1107	991744	Frt RH Fender Lamp			
1108	991752	Frt RH Fender Protector			
1109	991740	Frt RH Fender Inner Shield	CRA	✓	
1110	991884	Frt RH Mudflap			
1111	992087	Frt RH Wheel Rim			
1112	994025	Frt RH Rim Cover			
1113	995065	Frt RH Tyre			
1114	992093	Frt Windscreen Glass			
1115	992117	Frt Windscreen Rubber			
1116	992108	Frt Windscreen Moulding			
1117	992098	Frt Windscreen Sealant			
1118	991019	ERP Bracket			
1119	991020	ERP Unit			
1120	992140	Frt Wiper Arm			
1121	992142	Frt Wiper Blade			
1122	995045	Wiper Panel Garnish			
1123	991126	Firewall Panel			
1124	990753	Dashboard Assy			
1125	992282	Glove Box Cover			
1126	992281	Glove Box Compartment			
1127	994483	Steering Wheel Airbag			
1128	994485	Steering Wheel Airbag Sensor			
1129	990749	Dashboard Airbag			
1130	990750	Dashboard Airbag Sensor			
1131	990029	Airbag Control Unit			
1132	990864	Frt Driver Seat			
1133	991922	Frt RH Seat Belt Assy			
1134	991899	Frt Passenger Seat			
1135	995182	Frt LH Seat Belt Assy			
1136	990247	Sticker			
		Headlamp Nozzle Cover		?	2
		Active Bonnet Sensor	BUS	✓	2

No of Items: _____ Assessor: _____

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	567H
Vehicle Details	
Vehicle No.:	SMQ3925T
Vehicle to be Exported:	No
Intended Deregistration Date:	27 Nov 2019
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	CLA180 (R18 BI)
Primary Colour:	Grey
Manufacturing Year:	2014
Engine No.:	27091030468834
Chassis No.:	WDD1173422N122928
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	$27,318.00
Original Registration Date:	28 Oct 2014
First Registration Date:	28 Oct 2014
Transfer Count:	2
Actual ARF Paid:	$20,246.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	27 Oct 2024
PARF Rebate Amount:	$14,172.00
Intended COE Rebate Details	
COE Expiry Date:	27 Oct 2024
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	$62,890.00
COE Rebate Amount:	$30,920.00
Total Rebate Amount:	**$45,092.00**

The information contained herein is correct as at 25 Nov 2019

OK

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: 25/11/2019 16:15
Vehicle No.(For Motor): SMQ3925T | Certificate Number

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
○	5114086168		SEE WAN LING, WENDY	S9105567H	GPC	drivo CLASSIC	SMQ3925T	SMQ3925T	21/11/2019	20/11/2020

Continue

Claim Handling

Task Transfer · Exit

LOG SAL SUB

Accident MT/1072828

Policy No.	5114086168	Vehicle No.	SMQ3925T	GST Registration No.	
Certificate No.					
Policyholder Name	SEE WAN LING, WENDY			Policyholder NRIC	S9105567H
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	(•) No ( ) Yes	TCA	(•) No ( ) Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	10	Private Hire	Not available

Accident Details

Report Date	25/11/2019 16:10	Accident Report Within 24 hrs	Yes	Accident Type	Unknown
Date of Accident	25/11/2019	Time of Accident hh:mm	00:00	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	ICM No.	
Accident Location	NA				

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	600.00	TP Standard Excess	0.00		
YIED OD Excess		YIED TP Excess		Driver is Covered?	Not Applicable
Additional Excess	0.00				
Total OD Excess Applicable	600.00	Total TP Excess Applicable	0.00		

Benefits

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes

Modification History

Policyholder Mailing Address

Address 1	BLK 217D #05-206	Address 2	SUMANG WALK	Address 3	MATILDA PORTICO
Address 4	SINGAPORE 824217	Address Type	Singapore address	Post Code	824217
Unit No.	05-206	Related Policy Number	5114086168		

OI Driver Info

Driver Name		Driver Type			
Unnamed driver Name		Driver NRIC		Driver DOB	
Register Date of Driver License		Driver Age		Driving Experience	
Contact No.(Mobile)		Contact No.(Office)		Contact No.(Home)	
Address 1		Address 2		Address 3	
Address 4		Address Type	Foreign address	Post Code	
Unit No.					
Does he own a Singapore Registered car?	( ) Yes (•) No	Driver Vehicle No.		Driver Insurer Company	

Modification History

Investigation

Claim 002 OD-MD

LOS SAL SUB

Claim Case Officer Tan Siew Choo

Claim Type	OD-MD	Insured Name	SEE WAN LING, WENDY	Insured NRIC	S9105567H
Contact No.(Mobile)	90922687	Contact No.(Home)		Contact No.(Office)	
Email Address		OI Vehicle Number	SMQ3925T	TP Vehicle Number *	SLP4489X
Claimant Type		Type of Benefit			
Claimant Name		Claimant NRIC			
Claimant Address					
Claim Description	SMQ3925T / SLP4489X ON 25 Nov 2019			Name of Preferred Workshop	MY CAR CONSULTANT PTE LTD
Preferred Workshop Contact No.	96888885	Insured Liability	Fully at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop (refer below)	GIA report	Received
Date Registered	26/11/2019 09:19	Claim Close Date		Date Received	26/11/2019 13:59
Report Taken By	Jackson	Workshop Repairer		Total Loss but Repaired	
[✓] Print AK letter				OD Excess Collected by Workshop	

Modification History

Special Claim Creation Approval

Approval	Reason

Remarks

damage assessment | Attachment

Vehicle Info

Vehicle Make	MERCEDES BENZ	Vehicle Model	CLA 180	Engine Capcity	
Date of Registration	28/10/2014	Classis No.	WDD1173422N122928		
Towing Required *	(•) Yes ( ) No	Vehicle in IDAC *	(•) Yes ( ) No	Parallel Import *	( ) Yes (•) No
Type of Tender *	Own Damage	Assessor Name *	SIMON	Survey Current Status	
IDAC/Workshop Name	NATIONAL ASSESSMENT CENTR	IDAC/Workshop Location	51 UBI AVENUE 1 #01-25 PAYA		
Windscreen Parts & Labour Cost		Total Loss *	( ) Yes (•) No		
Market Value($)		Scrape Value($)		Economical Repair Value($)	

Remark

REMARK:NO OF REPAIR DAY:8 DAYS. 1 X FRT BUMPER BRACKET - UNCONFIRM. 1 X FRT BUMPER TOW EYE COVER - REPLACE. 2 X FRT GRILLE CHROME MOULDING - REPLACE. 1 X FRT SUPPORT PANEL TOP GARNISH COVER - REPLACE. 1 X AIR CON SUCTION PIPE (LOW PRESSURE) - UNCONFIRM. 1 X AIR CON SUCTION HOSE - UNCONFIRM. 1 X AIR CON DISHARGE PIPE (HIGH PRESSURE) - UNCONFIRM. 1 X AIR DUCT - UNCONFIRM. 2 X HEADLAMP NOZZLE COVER - UNCONFIRM. 2 X ACTIVE BONNET SENSOR - REPLACE.

Remark for Supplementary

Damage Listing

Find a Part

- root
  - Not Applicable
  - ABS
  - ABSORBER
  - ACCELERATOR
  - ACTUATOR
  - ADVERTISEMENT STICKER
  - AIR BAG
  - AIR BLOWER
  - AIR BOX
  - AIR CHAMBER BOX
  - AIR CLEANER
  - AIR COMPRESSOR
  - AIR CON
  - AIR CON (VAN)
  - AIR COOLER
  - AIR DISTRIBUTOR
  - AIR FILTER
  - AIR FLOW
  - AIR GRILLE
  - AIR HORN
  - AIR INTAKE
  - AIR RESONATOR BOX
  - AIR THROTTLE BODY AND SENSOR
  - ALARM
  - ALTERNATOR
  - ALUMINUM PANEL - SIDE
  - AMPLIFIER
  - ANTENNA
  - ANTI ROLL
  - APRON
  - ARCH
  - ARM REST
  - ASH TRAY
  - AUTO CLUTCH
  - AUTO COOLER PIPE
  - AUTO CRUISE MOTOR
  - AUTO TRANSMISSION
  - AXLE
  - BACK REST (M/C)
  - BACK SEAT
  - BALANCER
  - BATTERY
  - BEADING (M/C)
  - BELT COVER (M/C)
  - BELT TENSIONER
  - BODY
  - BODY (M/C)
  - BOLT CAP (M/C)
  - BOLT HEAD COVER (M/C)
  - BONNET
  - BOOT
  - BOX (M/C)
  - BOX BRACKET (M/C)
  - BOX CARRIER (M/C)
  - BOX DOOR

No.	Part No.	Description	Qty *	Repair Code *	
1	32200101	NUMBER PLATE (FRONT)	1	Replace	X
2	32200201	NUMBER PLATE BASE (FRONT)	1	Replace	X
3	32200501	NUMBER PLATE GARNISH (FRONT)	1	Replace	X
4	16000101	BUMPER (FRONT)	1	Replace	X
5	16002401	BUMPER CLIPS (FRONT)	6	Replace	X
6	16005101	BUMPER RETAINER (FRONT LEFT)	1	Replace	X
7	16005102	BUMPER RETAINER (FRONT RIGHT)	1	Replace	X
8	16005001	BUMPER REINFORCEMENT (FRONT)	1	Replace	X
9	16001001	BUMPER BEAM (FRONT)	1	Unconfirm	X
10	16005901	BUMPER SPONGE (FRONT)	1	Replace	X
11	16002801	BUMPER EMBLEM (FRONT)	1	Replace	X
12	16003201	BUMPER GRILLE (FRONT)	1	Replace	X
13	16005501	BUMPER SENSOR (FRONT)	1	Unconfirm	X
14	16002901	BUMPER FOG LAMP COVER (FRONT LEFT)	1	Unconfirm	X
15	16002902	BUMPER FOG LAMP COVER (FRONT RIGHT)	1	Unconfirm	X
16	27100101	GRILLE (FRONT)	1	Replace	X
17	27100801	GRILLE EMBLEM (FRONT)	1	Replace	X
18	41300101	SUPPORT PANEL (FRONT)	1	Replace	X
19	28500101	HORN (LEFT)	1	Unconfirm	X
20	15600101	BRACE PANEL (FRONT)	1	Unconfirm	X
21	27700101	HEAD LAMP (LEFT)	1	Unconfirm	X
22	27700102	HEAD LAMP (RIGHT)	1	Replace	X
23	149001	BONNET	1	Unconfirm	X
24	14902401	BONNET LOCK (LOWER)	1	Unconfirm	X
25	14902201	BONNET HINGE (LEFT)	1	Replace	X
26	14902202	BONNET HINGE (RIGHT)	1	Replace	X
27	112023	AIR CON CONDENSER	1	Unconfirm	X
28	112043	AIR CON DISCHARGE HOSE	1	Unconfirm	X
29	344001	RADIATOR	1	Unconfirm	X
30	344005	RADIATOR COWLING	1	Unconfirm	X
31	344008	RADIATOR FAN	1	Unconfirm	X
32	344011	RADIATOR FAN CLUTCH	1	Unconfirm	X
33	344007	RADIATOR EXPANSION TANK	1	Unconfirm	X
34	243014	ENGINE LOWER COVER	1	Unconfirm	X
35	25400901	FENDER INNER SHIELD (FRONT LEFT)	1	Unconfirm	X
36	25400103	FENDER (FRONT RIGHT)	1	Repair	X
37	25400902	FENDER INNER SHIELD (FRONT RIGHT)	1	Replace	X

Save Submit

LKK Paya Ubi

From: Tan Siew Choo <siewchoo.tan@income.com.sg>
Sent: Thursday, 28 November 2019 1:38 PM
To: admin@mycar.sg; NAC
Subject: SMQ3925T, OD claim no : MT/1072828

Importance: High

Dear IDAC and My Car Consultant,

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

Dear My Car Consultant,

Awarded to your workshop at the agreed COR of $3,600/-, with no further supplementary.

OD excess of $600/- is applicable.

We are waiving survey for this case only and it should not be taken as a precedence for future cases.

Kindly update owner on the repair status and the nos of repair days required before repairing veh.

FOR PAYMENT: Please forward the Invoice & Discharge Voucher together with some photos on after repairs within 14 days after the repairs has been done/ finalized with Surveyor to my email.

Regards.

Tan Siew Choo
Senior Executive
Operations, Motor and Personal Lines (PL)
T +65 6430 7882
www.income.com.sg

Our Ref: MT/CA/OD/051/1072828-002/TSC
28 Nov 2019
MY CAR CONSULTANT (53 UBI)
53 UBI AVENUE 1
#01-33 PAYA UBI INDUSTRIAL PARK
SINGAPORE 408934
Dear Sir
CLAIM NUMBER: MT/1072828-002
REPAIR OF VEHICLE NUMBER: SMQ3925T
We are pleased to inform you that you are successful in your tender to repair the vehicle. The details are as follows:

Award Date: 28 Nov 2019
Make: MERCEDES BENZ
Model: CLA 180
Estimated Repair Days: 7
Location: NATIONAL ASSESSMENT CENTRE SERVICES
Address: 51 UBI AVENUE 1 # 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 Tan Siew Choo at 64307882 or email us at motor@income.com.sg.
Yours sincerely
Jenny Pe
Deputy Vice President
Motor Insurance

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

Vehicle No: SMQ39N51 Date In: _____ Time In: _____ with Keys: Yes / No

For Office use

Attended by: _____

Workshop Collection of Vehicle

Workshop: MCC

Collection Date: 28/11/19 Time: 2:35pm with Keys: Yes / No

Tow Truck No: _____ Tow Man: Koman Koh NRIC: S7307966G

Signature: _____

For office use

Attended by: Jackson ***Approved by:*** _____

Workshop Return of Vehicle

Workshop: _____

Returned Date: _____ Time: _____ with Key: Yes / No

* Tow In / Drive In
Tow Man / Workshop Representative: _____ NRIC: _____

Signature: _____

For office use

Attended by: _____

Owner Collection of Vehicle

Collection Date: _____ Time: _____ with Key: Yes / No

Owner: _____ NRIC: _____

Signature: _____

For office use

Attended by: _____ ***Approved by:*** _____