

Date In: 6/12/19 13:22	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NA1 INC19021564/64	E-mail (within 2hrs, APC 2hrs)		
Veh No: SKK 2700L	I-Motor Claim Form	MT/1074624-001	6/12/19 13:53.
IP No: 6/12/19 07:50.	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
IP: ☒ Reporting Only	I-Photo Uploaded		
IP Issues:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/WRSL		

Preferred Wisp / INC Assign Wisp / GW: (	Tel:	Fax:
IP Particulars:	Veh No: FOP 6016H.	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: ()

Reminders: (INC hotline: 6788 6616)

1) Apply for Transport Allowance () / Courtesy Car ()	Date & Time Completed:	Done by:
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury:

Date/Time	Actions
	Amend from TP to OD claims.
20/1/20	1st close 10/2/19, reopen ref only 18/2 to re-open

MA 2001375/ MA 1909160	Invoice / Refutation Checklist	Am (\$)	Am (\$)
Client's Particulars:	1) AR: Accident Reporting (\$30)	30.00	
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$30)	80.00	
Contact No:	3) TP: Towing Fee \$40/\$45		
Damaged Partion:	4) PT: Follow-Through Survey \$120		
QC Checked by (Engn-In-Charge):	5) PT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:	For claiming against INC Only (see 10 Jan 2020)		
	6) TR: Re-inspection \$75		
	7) NI: Ideal DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	9) NI: Ideal Mobile		
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	100) NI: Ideal Mobile		

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	06/12/2019 13:22
Date Of Accident	06/12/2019 07:50
Exact Location Of Accident	PIE TWDS TUAS AFTER JURONG TOWN HALL EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKK2700L
Insured/Policyholder	
Name Of Registered Owner	WONG YEW WAH
NRIC No	SXXXX535D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97538758
Alternative Phone No	OFFICE-97538758

Vehicle Particulars

Manufacturer	HONDA
Model	JAZZ
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	5106055275-01
Cover Note Number	

Driver

Name of Driver	WONG YEW WAH
NRIC No	SXXXX535D
Date Of Birth	01/08/1955
Occupation	OUTDOOR
Date Of Driving Pass	23/05/1975
Driving Experience	44 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97538758
Fax Number	
Contact Number	OFFICE-97538758
Email Address	NOEMAIL

Address	BLK 13 JALAN BUKIT MERAH #05-5036
Postcode	150013
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?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	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?	YES
Remarks/ Reasons:	TP TOOK THE MEMORY CARD
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBP6016H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	WONG YEW WAH
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SKK2700L
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan

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 willful 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/are 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.

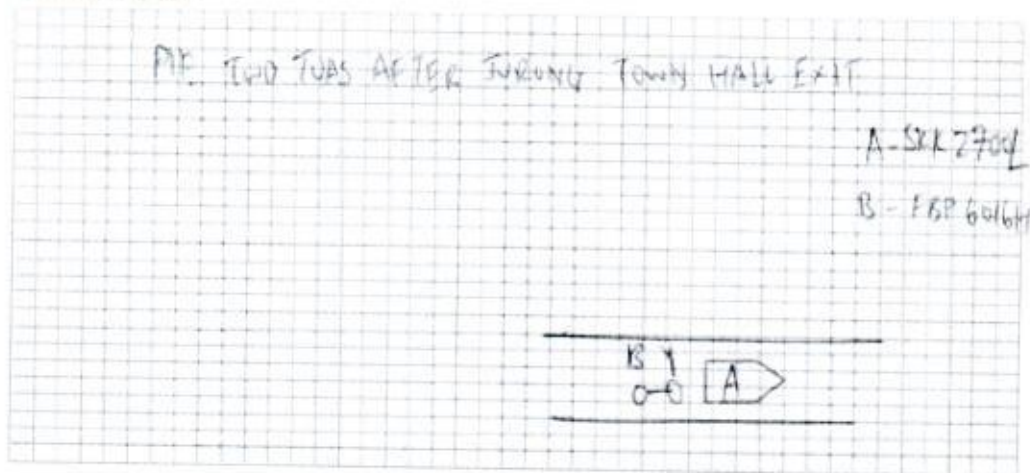

Policyholder's Signature
Date & Time


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


Reporting Centre Personnel's Signature
Name
NRIC/ID No.

Accident Sketch Plan

SKETCH PLAN:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELLING ALONG PIE TOWARDS TUAS AFTER JURONG TOWN HALL EXIT. MOMENT LATER I HEARD A LOUD BANG, VEH B REAR-ENDED MY VEHICLE.

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.:

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MNA119160928 Vehicle Registration No: SKK2700L
Name (as shown in NRIC) : WONG YEW WAH NRIC/FIN/Passport No : S1149535D
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : BLK 13 JALAN BUKIT MERAH #05-5036 Singapore (150013
Contact (Tel) : 65-97538758 Mobile No. : _____
Email Address : _____
Date of Accident : 06/12/2019 Time of Accident : 07:50
Place of Accident : PIE TWDS TUAS AFTER JURONG TOWN HALL EXIT
Insurance Company: NTUC

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

CHANGE TO OD CLAIM - Preferred workshop Rydler Auto Pte Ltd

Tel : 90908277



Policyholder / Driver's Signature
Date: _____



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

MOTORCAR (Rear)

(1) Replace (✓) (2) Repair (✓) (3) Check (✓)
 (4) Not Consistent (NC)

Rear Portion

Vehicle No: **SK 2700 L**

NAC	INC	Item	CON	ACQ	Q
1137	993626	Rear Number Plate			
1138	993627	Rear Number Plate Base			
1139	993630	Rear Number Plate Garnish			
1140	993632	Rear Number Plate Lamp			
1141	992958	Rear Bumper	DD	✓	
1142	993085	Rear Bumper Upper			
1143	993017	Rear Bumper Lower			
1144	993054	Rear Bumper Side			
1145	993103	Rear Bumper Tow Cover	CU7	✓	
1146	992341	Rear Bumper Clips	NEC	6	✓
1147	992976	Rear Bumper Bracket	?	2	✓
1148	993068	Rear Bumper Side Retainer	DIS	2	✓
1149	993045	Rear Bumper Reinforcement			
1150	992970	Rear Bumper Beam			
1151	993077	Rear Bumper Sponge			
1152	992999	Rear Bumper Damper			
1153	993040	Rear Bumper Protector			
1154	993036	Rear Bumper Pad			
1155	993026	Rear Bumper Moulding			
1156	993044	Rear Bumper Reflector			
1157	993023	Rear Bumper Lower Spoiler			
1158	994023	Reverse Sensor	?		✓
1159	993327	Rear End Panel	BUC	✓	
1160	993339	Rear End Panel Top Garnish	ORA	✓	
1161	993333	Rear End Panel Inner Trim			
1162	990333	Boot Compartment Inner Trim			
1163	993851	Rear LH Taillamp	?		✓
1164	993853	Rear LH Taillamp Garnish			
1165	993859	Rear LH Taillamp Panel			
1166	995116	Rear RH Taillamp	?		✓
1167	993853	Rear RH Taillamp Garnish			
1168	993859	Rear RH Taillamp Panel			
1169	993554	Rear Apron Panel			
1170	992895	Bootlid			
1171	991328	Bootlid Emblem			
1172	990356	Bootlid Handle			
1173	995250	Bootlid Moulding			
1174	990376	Bootlid Reflector			
1175	995222	Bootlid Lamp LH			
1176	992899	Bootlid Lamp RH			
1177	995243	Bootlid Lock			
1178	990377	Bootlid Rubber			
1179	990382	Bootlid Hinge			
1180	993877	Bootlid Spoiler			
1181	994543	Tailgate	BUC	✓	
1182	991328	Tailgate Emblem	NEC	✓	
1183	994643	Tailgate Outer Handle			
1184	994640	Tailgate Moulding			
1185	994545	Tailgate Garnish			
1186	994648	Tailgate Reflector			
1187	994549	Tailgate Lamp			
1188	994646	Tailgate Protector			
1189	994676	Tailgate Wiper Arm			
1190	994677	Tailgate Wiper Blade			
1191	994679	Tailgate Wiper Nozzle			
1192	994555	Tailgate Wiper Motor			
1193	994602	Tailgate Glass			
1194	994606	Tailgate Glass Rubber			
1195	994604	Tailgate Glass Moulding	NEC	✓	
1196	994607	Tailgate Glass Sealant	NEC	✓	
1197	994629	Tailgate Lock	DM	✓	
1198	994651	Tailgate Rubber			
1199	994611	Tailgate Hinge			
1200	994594	Tailgate Damper			
1201	994613	Tailgate Inner Board			

NAC	INC	Item	CON	ACQ	Q
1202	993784	Spare Tyre Board			?
1203	994328	Spare Tyre Panel	BY	✓	
1204	995065	Spare Tyre			
1205	994326	Spare Tyre Lock Screw			
1206	993787	Spare Tyre Cover			
1207	995323	Triangle Breakdown Sign			
1208	990507	CD Changer Assy			
1209	990164	Antenna			
1210	990534	Centre Exhaust Pipe Assy			
1211	990532	Centre Exhaust Mounting			
1212	993364	Rear Exhaust Pipe			
1213	993357	Rear Exhaust Chrome Pipe			
1214	993361	Rear Exhaust Mounting			
1215	993358	Rear Exhaust Heat Shield			
1216	995223	Rear LH Chassis Member			
1217	993165	Rear RH Chassis Member			
1218	993436	Rear LH Fender			
1219	993449	Rear LH Fender Protector			
1220	993420	Rear LH Fender Inner Panel			
1221	993431	Rear LH Fender Inner Trim			
1222	993415	Rear LH Fender Inner Garnish			
1223	993425	Rear LH Fender Inner Shield			?
1224	993621	Rear LH Mudflap			
1225	993933	Rear LH Wheel Rim			
1226	994025	Rear LH Rim Cover			
1227	995065	Rear LH Tyre			
1228	993456	Rear RH Fender			
1229	993450	Rear RH Fender Protector			
1230	993420	Rear RH Fender Inner Panel			
1231	993431	Rear RH Fender Inner Trim			
1232	993415	Rear RH Fender Inner Garnish			
1233	993425	Rear RH Fender Inner Shield			?
1234	993622	Rear RH Mudflap			
1235	993934	Rear RH Wheel Rim			
1236	994025	Rear RH Rim Cover			
1237	995065	Rear RH Tyre			
1238	995162	Rear Fender Extension Panel LH			
1239	993401	Rear Fender Extension Panel RH			
1240	993430	Rear Fender Inner Top Garnish			
1241	993673	Rear Fender 1/4 Glass			
1242	993452	Rear Fender 1/4 Glass Rubber			
1243	993453	Rear Fender 1/4 Glass Sealant			
1244	993949	Rear Windscreen Glass			
1245	993976	Rear Windscreen Rubber			
1246	993961	Rear Windscreen Moulding			
1247	993955	Rear Windscreen Sealant			
1248	994729	Third Brake Light			
1249	993385	Rear Fender Air Grille			
1250	992167	Fuel Lid			
1251	992168	Fuel Neck			
1252	992179	Fuel Tank			
1253	992184	Fuel Tank Bracket			
1254	992191	Fuel Tank Float			
1196	990247	Sticker			

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	535D
Vehicle Details	
Vehicle No.:	SKK2700L
Vehicle to be Exported:	No
Intended Deregistration Date:	23 Dec 2019
Vehicle Make:	HONDA
Vehicle Model:	JAZZ 1.3L AT
Primary Colour:	Black
Manufacturing Year:	2008
Engine No.:	L13Z11009713
Chassis No.:	JHMGE68509S209712
Maximum Power Output:	73.0 kW (97 bhp)
Open Market Value:	\$19,038.00
Original Registration Date:	04 Dec 2008
First Registration Date:	04 Dec 2008
Transfer Count:	4
Actual ARF Paid:	\$19,038.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	03 Dec 2023
COE Category:	A - Car (1600cc & below)
COE Period(Years):	5
PQP Paid:	\$13,786.00
COE Rebate Amount:	\$10,874.00
Total Rebate Amount:	\$10,874.00
Message	
Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 20 Dec 2019

OK

Claim Handling

Accident MT/1074624

Task Transfer Exit

LOS SAL SUB

Policy No.	5106055275-01	Vehicle No.	SKK2700L	GST Registration No.	
Certificate No.					
Policyholder Name	WONG YEW WAH			Policyholder NRIC	S1149535D
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	97538758	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	No

Accident Details

Report Date	06/12/2019 13:49	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	06/12/2019	Time of Accident hh:mm	07:50	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	ICM No.	
Accident Location	pie twds tuas after jurong town hall exit				

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	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?	Covered
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 13 #05-5036	Address 2	JALAN BUKIT MERAH	Address 3	SINGAPORE 150013
Address 4		Address Type	Singapore address	Post Code	150013
Unit No.		Related Policy Number	5106055275-01		

OI Driver Info

Driver Name	WONG YEW WAH	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S1149535D	Driver DOB	01/08/1955
Register Date of Driver License	23/05/1975	Driver Age	64	Driving Experience	44
Contact No.(Mobile)	97538758	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 13 #05-5036	Address 2	JALAN BUKIT MERAH	Address 3	SINGAPORE 150013
Address 4		Address Type	Singapore address	Post Code	150013
Unit No.					
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	No Yes
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Modification History

Investigation

Claim 001 OD-MD

Claim Case Officer Tan Siew Choo

LOS SAL SUB

Claim Type	OD-MD	Insured Name	WONG YEW WAH	Insured NRIC	S1149535D
Contact No.(Mobile)	97538758	Contact No. (Home)	67695175	Contact No. (Office)	
Email Address	wykw1003@singnet.com.sg	OI Vehicle Number	SKK2700L	TP Vehicle Number	FBP6016H
Claim Description	SKK2700L / FBP6016H ON 6 Dec 2019			Name of Preferred Workshop	Ryder Auto
Preferred Workshop	0	Preferred Repair Option	Yes	Preferred Workshop Name	unknown
Insured Liability report	Not at fault				
Date Registered	06/12/2019 13:55	Claim Close Date		Date Received	20/12/2019 13:55
Report Taken By	LIEW SHAN HUI	Workshop Repairer		Total Loss but Repaired	
Print AK letter				OD Excess Collected by Workshop	

Modification History

20/12/2019 13:53 s069588 Modify Claim Type(OD-MX-->OD-MD)
 20/12/2019 13:55 s058324 Modify Name of Preferred Workshop(0-->Ryder Auto)

Special Claim Creation Approval

Approval	Reason
Remarks	

damage assessment

Attachment

Vehicle Info

Vehicle Make	HONDA	Vehicle Model	JAZZ	Engine Capacity	
Date of Registration	04/12/2008	Classis No.	JHMGE685095209712		

12/21/2019

Claim Handling (damage assessment Claim Task MT/1074624 / Claim 001 OD-MD)

Towing Required * ☒ Yes ☐ NoType of Tender *

IDAC/Workshop Name NATIONAL ASSESSMENT CENTR

Windscreen
Parts & Labour
CostMarket Value(\$) Vehicle in IDAC * ☒ Yes ☐ NoAssessor Name * Parallel Import * ☐ Yes ☒ No

Survey Current Status

IDAC/Workshop Location 51 UBI AVENUE 1 #01-25 PAYA

Total Loss * ☐ Yes ☒ NoScrape Value(\$) Economical Repair Value(\$)

REMARK:NO OF REPAIR DAYS:6 DAYS.1X REAR END PANEL - REPLACE.1X REAR END PANEL TOP GARNISH - REPLACE.1X TAILGATE EMBLEM - REPLACE.1X SPARE TYRE PANEL - REPLACE.

Remark

Remark for
Supplementary

Damage Listing

Find a Part	No.	Part No.	Description	Qty *	Repair Code *	
ARCH						
ARM REST	1	16000102	BUMPER (REAR)	1	Replace	☐
ASH TRAY	2	16006702	BUMPER TOWING COVER (REAR)	1	Replace	☐
AUTO CLUTCH	3	16002402	BUMPER CLIPS (REAR)	6	Replace	☐
AUTO COOLER PIPE						
AUTO CRUISE MOTOR	4	16001303	BUMPER BRACKET (REAR LEFT)	1	Unconfirm	☐
AUTO TRANSMISSION						
AXLE	5	16001304	BUMPER BRACKET (REAR RIGHT)	1	Unconfirm	☐
BACK REST (M/C)	6	16005103	BUMPER RETAINER (REAR LEFT)	1	Replace	☐
BACK SEAT						
BALANCER	7	16005104	BUMPER RETAINER (REAR RIGHT)	1	Replace	☐
BATTERY	8	35300101	REVERSE SENSOR (LEFT)	1	Unconfirm	☐
BEADING (M/C)	9	35300102	REVERSE SENSOR (RIGHT)	1	Unconfirm	☐
BELT COVER (M/C)	10	42000101	TAIL LAMP (LEFT)	1	Unconfirm	☐
BELT TENSIONER						
BODY	11	42000102	TAIL LAMP (RIGHT)	1	Unconfirm	☐
BODY (M/C)	12	419001	TAIL GATE	1	Replace	☐
BOLT CAP (M/C)						
BOLT HEAD COVER (M/C)	13	419013	TAIL GATE GLASS MOULDING	1	Replace	☐
BONNET	14	419015	TAIL GATE GLASS SEALANT	1	Replace	☐
BOOT	15	419023	TAIL GATE LOCK	1	Replace	☐
BOX (M/C)						
BOX BRACKET (M/C)	16	390002	SPARE TYRE BOARD	1	Unconfirm	☐
BOX CARRIER (M/C)						
BOX DOOR	17	25400903	FENDER INNER SHIELD (REAR LEFT)	1	Unconfirm	☐
BOX STICKER (M/C)	18	25400904	FENDER INNER SHIELD (REAR RIGHT)	1	Unconfirm	☐

Save Submit



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: SKK 2700L Date In: _____ Time In: _____ with Keys: Yes / No

For Office use

Attended by: _____

Workshop Collection of Vehicle

Workshop: Ryder Auto Pte Ltd

Collection Date: 24/12/18 Time: 1550hrs with Keys: Yes / No

Tow Truck No: _____ Tow Man: Sam Chuan NRIC: S1K864582

Signature: J

↓ DRIVE

For office use

Attended by: ROSLINDA

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: _____

LKK Paya Ubi

From: Ryder Auto workshop <ryderautoworkshop@gmail.com>
Sent: Tuesday, 24 December 2019 3:48 PM
To: RSPU@lkkauto.com
Subject: Fwd: SKK2700L (OD claim), MT/1074624
Attachments: image015.png

----- Forwarded message -----

From: **Tan Siew Choo** <siewchoo.tan@income.com.sg>
Date: Mon, 23 Dec 2019, 17:20
Subject: SKK2700L (OD claim), MT/1074624
To: Ryder Auto workshop <ryderautoworkshop@gmail.com>

Dear Ryder Auto,

Pls proceed with the repair works at our agreed COR of \$900/- with no further supplementary.

OD excess of \$600/- is applicable.

No survey required only for this repair works.

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 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



From: Ryder Auto workshop [mailto:ryderautoworkshop@gmail.com]

Sent: Monday, 23 December 2019 5:01 PM

To: Tan Siew Choo <siewchoo.tan@income.com.sg>

Subject: Re: SKK2700L (OD claim), MT/1074624

Dear Siew Choo,

We gladly accept your offer, will proceed accordingly.

Thank you

Rgds

Orson



2 Kaki Bukit Ave 2, #02-19 / 22 AutoHub @ Kaki Bukit, Singapore 417921

Tel : 67418277 Fax: 67468277



5 Tuas Ave 3 BS Logistics Hub Singapore 639405

Fax: 64815390



On Mon, Dec 23, 2019 at 3:01 PM Tan Siew Choo <siewchoo.tan@income.com.sg> wrote:

Dear Ms June of Ryder Auto,

We would like to offer our COR of \$900/- (**max**) with no further supplementary.

OD excess of \$600/- is applicable.

No survey required only for this repair works.

Do consider and reverts soonest.

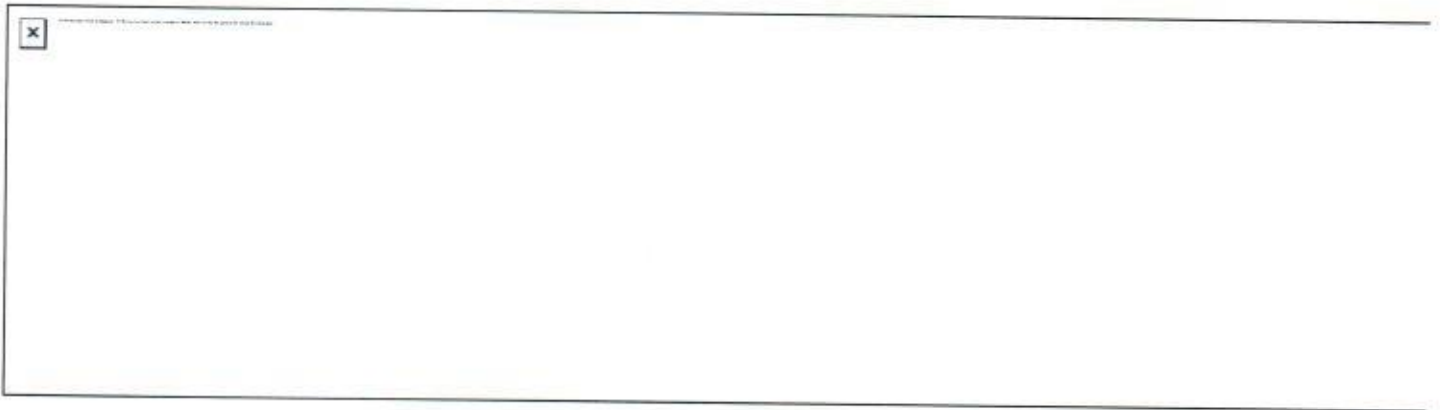
Regards.

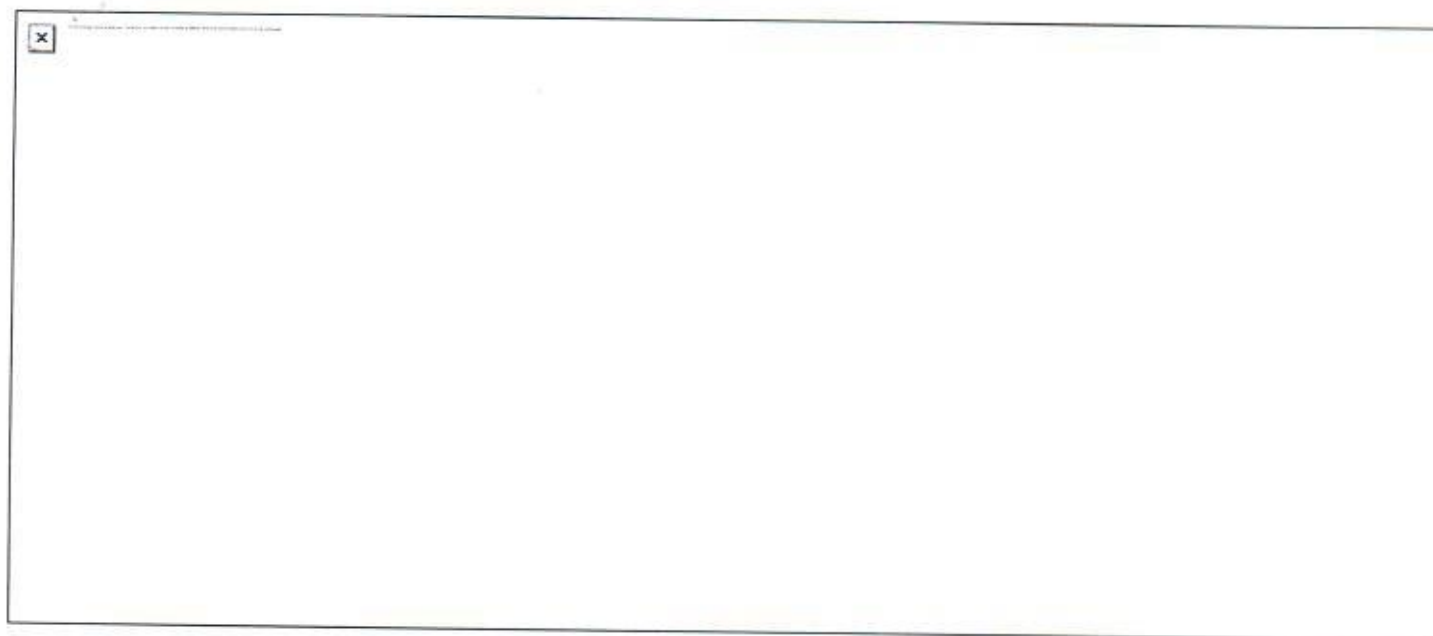
Tan Siew Choo
Senior Executive

Operations, Motor and Personal Lines (PL)

T +65 6430 7882

www.income.com.sg





From: Clarence Richard Anthony
Sent: Friday, 20 December 2019 1:54 PM
To: 'Ryder Auto workshop' <ryderautoworkshop@gmail.com>; MTSurvey <MTSurvey@income.com.sg>; ODsupport <ODsupport@income.com.sg>
Subject: FW: Urgent: PRE-REPAIR INSPECTION: Property Damage Claim (Own Damage) Our Vehicle SKK2700L MT/1074624-001

Hi June – Has the insured done the addendum to amend from TP to OD claim? If no, please ask the OI to do so at NAC Paya Ubi with the car present. Car is insured under Classic Plan and we will offer based on benchmark cost. You may carry out the repair job if you accept our offer, otherwise it will be assigned to our paneled workshop.

Hi ODsupport – pls monitor this case.

Regards

Clarence Anthony
Manager

Operations, Motor & Personal Lines (PL)

T +65 6430 7877

www.income.com.sg



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