

# NATIONAL Assessment Centre Services

(part 1 Jan 2005)

MMA119161874

Date In: 9/12/19 14:39	Job description	Date & Time Completed	Done by
Ref No: MA/INC19021642164	SAS e-filing		
Veh No: SGJ 93402	E-mail (within 3hrs, AIC 2hrs)		
DDA: 7/12/19 14:35	1-Motor Claim Form	MT/1074904 <sup>001</sup>	9/12/19 15:18
QD: <input checked="" type="checkbox"/> Reporting Only	1-Motor W/O (within: DD 2hrs, TP 4hrs)		
TP Insurer:	1-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: ( ) Tel: ( ) Fax: ( )

TP Particulars:	Veh No: YK 3754J.	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: 67894616)	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

Client's Particulars:	MA1909176	Invoice Preparation Checklist	Am't (\$)	Am't (\$)
Driver/Owner:		1) AR: Accident Reporting (\$30);	30.00	
Contact No:		2) DA: Damage Assessment (\$100); INC (\$50)		
Damaged Portion:		3) TP: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):		4) PT: Follow-Through Survey \$120		
Auditors' Comments:		5) PT: Follow-Through Survey (Resurvey) \$30		
Ref. 1:		For claiming against INC Only (wef 10 Jan 2005)		
Ref. 2/3:		6) TR: Re-inspection \$75		
		7) NI: Idao DA + SMRT Survey \$160		
		8) NTUC Additional Services:		
		QD:		
		*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 \$0		
		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 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	09/12/2019 14:39
Date Of Accident	07/12/2019 14:35
Exact Location Of Accident	SLE TWDS CTE EXIT OUTRAM PARK RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGJ9340Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KC CAR RENTAL PTE LTD
Co Reg No	201810588M
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-84984484

### Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	PRIVATE HIRE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5108997801
Cover Note Number	

### Driver

Name of Driver	LIM KIAN CHYE (LIN JIANCAI)
NRIC No	S7500339J
Date Of Birth	04/01/1975
Occupation	OUTDOOR
Date Of Driving Pass	01/11/2011
Driving Experience	8 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-84984484
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 122B EDGEDALE PLAINS #15-167
Postcode	822122
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	CHAIN COLLISION
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	3
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)	2
Passenger 1	NAME: : UNKNOWN GENDER: : FEMALE

#### 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	YK3754J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	MR KANG
NRIC/Passport Number	
Contact Number	90074978
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJT1447P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	



## SKETCH PLAN

### IMPORTANT NOTICE

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.

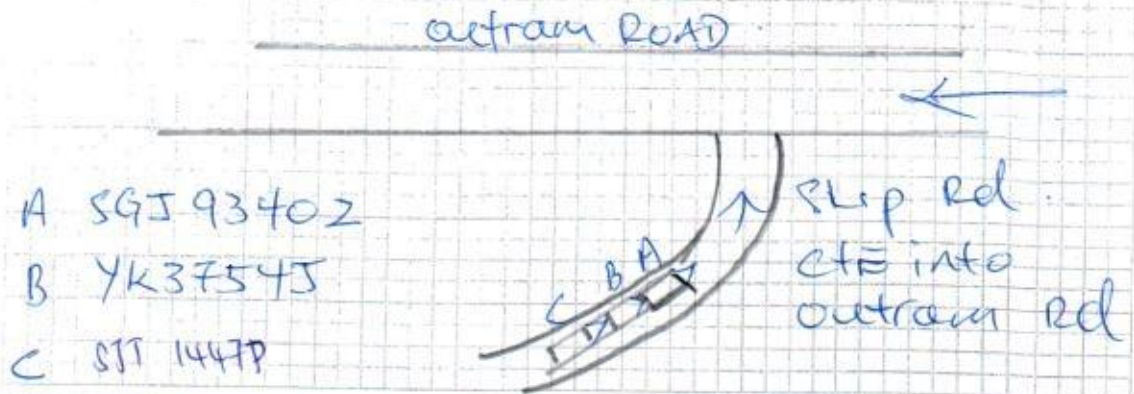


Policyholder's Signature  
Date & Time:

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 07/12/19 at around 2.35 am.  
I was driving SGJ 93402 turning into  
CTE Slip Rd into Outram Rd. Front  
vehicle stop to give way at the  
Slip Rd. I also stop. There was a  
Lorry YK3754J also stop behind me.  
Suddenly I felt an impact YK3754J  
had hit onto my rear of my  
vehicle. After the accident I  
only found that there was another  
car (C) also in this accident.

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)

Reporting Centre Personnel's Signature  
Name:



VEHICLE NO: SGJ 93402

MAKE &amp; MODEL: Toyota wish

DATE OF ACCIDENT	07 / 10 / 19
TIME OF ACCIDENT	2:35 AM/PM
LOCATION OF ACCIDENT	SLE Toward CTE Exit Outram park road.
Exact Purpose use during accident	
NAME OF OWNER	KC Car Rental Pte Ltd
TELP NO	2018 10588 M
NRIC	
CLAIM TYPE	OD / THIRD PARTY / Reporting Only
PRIVATE HIRE	YES / NO ?
INSURANCE CO.	NKUC Income
TYPE OF CAVERAGE	Comprehensive / Third Party Third Party Fire & Theft
POLICY NO.	5108997801 - 000004
NAME OF DRIVER	As above / If No: Lim kian chye
NRIC	S 7500339J Any passengers: 1 (CF)
DATE OF BIRTH	04 / 01 / 1975
OCCUPATION	Outdoor / Indoor
DATE OF DRIVING PASS	01 / 11 / 2011
GENDER	Male / Female
CONTACT NO.	8498 4484 Office: Home:
ADDRESS	BLK 122B Edgeland plans #15-167(S)822122
DRIVER HAVE ANY OWN Vehicle	NO / If yes: Reg No:
RELATIONSHIP	Employee / If No: Car rental
WEATHER CONDITION	Clear / Raining / Other:
ROAD SURFACE	Dry / Wet / Other:
ANY INJURIES	No / If yes: Who?
CONTACT NO.	
POLICE REPORT	No / If yes: Where?
VEHICLE B NO.	YK 3754J Any Passenger: 1
NAME	Mr kang
CONTACT NO.	9007 4478
VEHICLE C NO.	SJT 1447P Any Passenger:
VEHICLE D NO.	
VEHICLE E NO.	
VEHICLE F NO.	
ANY WITNESS	
WITNESS CONTACT NO.	
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / NO
PARTICULAR WORKSHOP	Sme Motor Pte Ltd
TELP NO	1 Kaki bukit ave 6 #02-15
CONTACT PERSON	Autobay @ kaki bukit
TELP NO	Singapore 417883

**6 Speed Autowerkz Pte Ltd**  
 68 Kaki Bukit Avenue 6  
 #02-05 ARK @ KB, Singapore 417896  
 Tel: 6384 7037 Fax: 6384 7039  
 Email: 6speedautowerkz@gmail.com

## 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: 5108997801-000004

Cover : Third Party, Fire & Theft

1. Index mark and Registration Number of Vehicle : SGJ9340Z  
Chassis Number : ZNE100313105
2. Name of Policyholder : KC CAR RENTAL PTE LTD
3. Effective Date of Insurance : 19 Apr 2019
4. Expiry Date of Insurance : 18 Apr 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 or Hirer's business.  
This Policy does not cover  
(a) Use for racing, pace-making, reliability trial or speed-testing.  
(b) Use for the carriage of goods (other than samples) in connection with any trade or business.  
(c) 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)	: N/A
EXCESS (SECTION 2)	: S\$1,500
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCO PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
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 : BENEFIT AUTO INSURANCE AGENCY (00000573333)  
Date of Issue : 18 Apr 2019 16:59 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive



Transaction ref 20181205152510302347

Please check that the owner and vehicle details are correct:

1. Name	: KC CAR RENTAL PTE. LTD.
2. Identification No. Type	: Company
3. Identification No.	: 201810588M
4. Country/Region	: -
5. Vehicle Registration No.	: SGJ9340Z
6. Previous Vehicle Registration No.	: -
7. Effective Date of Ownership	: 05 Dec 2018
8. Original Registration Date	: 25 Jul 2006
9. First Registration Date	: 25 Jul 2006
10. Vehicle Type	: Z11 - Private Hire (Chauffeur) Station Wagon/Jeep/Land Rover
11. Vehicle Scheme	: Normal
12. Attachment 1	: No Attachment
13. Attachment 2	: -
14. Attachment 3	: -
15. Vehicle Make	: TOYOTA
16. Vehicle Model	: WISH 1.8 A
17. Year of Manufacture	: 2006
18. Primary Colour	: Silver
19. Secondary Colour	: -
20. Passenger Capacity	: 6
21. Chassis/Trailer Chassis No.	: ZNB100313105 / -
22. Propellant	: Petrol
23. Engine No./Motor No.	: 1ZZ2610258 / -
24. Engine Capacity(cc)/Power Rating(kW)	: 1794 / -
25. Maximum Power Output(kW/bhp)	: 97.0 / 130
26. Unladen Weight(kg)	: 1300
27. Maximum Laden Weight(kg)	: 1685
28. Open Market Value	: \$21,313.00
29. PARF Eligibility	: Forfeited
30. PARF Eligibility Expiry Date	: -
31. Minimum PARF Benefit	: \$0.00
32. No. of Transfers	: 3



# KC CAR RENTAL PTE LTD

ROC : 201810588M

OCBC CURRENT - 588 140210-001

PAY NOW UEN: 201810588M

61 Ubi Ave 2, Automobile Megamart, #05-04 Singapore 408898  
CHEW 9060 3343 / MARK 9832 5030 / TEO 9107 6963

## VEHICLE RENTAL & LEASING AGREEMENT

Hirer's Name : <b>LIM KIAN CHYE</b>		<b>DFENTERPRISE PTE LTD @ Gmail.com</b>	
NRIC No: <b>75003391J</b>		Hirer's Contact No: <b>84984484</b>	
License Pass Date: <b>01-11-2011</b>		Next of Kin Name & Contact No (In Case of Emergency): <b>92702545</b>	
Address: <b>BLK 122B EDGEDALE PLACE #15-167</b> (Singapore <b>822/22</b> )			
Occupation / Office Address: <b>Full time Driver</b> (Singapore )			
Vehicle Reg No: <b>SGJ 9340 Z</b>		Make & Model: <b>TOYOTA WISH</b>	
Start Date: <b>14-11-2019</b>		End Date: <b>3 month</b>	
Handover Time: <b>12:00pm</b>		Handover Time:	
Rental Per Day/Week/Month: <b># monthly - 4150</b>		Deposit: <b>-</b>	
Add Driver:		NRIC No:	
License Pass Date:		Contact No:	
Address: (Singapore )			
Remarks :			

1. In the event Hirer decides to terminate the contract before the contract end date, deposit will NOT BE REFUNDED; ADDITIONAL PENALTY will be enforced upon 50% of the remaining outstanding rental.
2. In the event Hirer decided to cancel a reservation whereby a booking deposit is already been placed, there shall be NO REFUND on the deposit collected. Strictly no refund after deposit.
3. Failing to inform us of any existing scratches, dents & faults (if any) within 30 minutes after the collection of the vehicle, repair charges will incur when the vehicle is returned.
4. In the event that rental payment is not paid on expected date and result in towing of the rental or leased vehicle, charges of towing fee, lost of key charges, vehicle repair charges, admin fee etc will be borne by the Hirer. Therefore all belonging left in the vehicle will be discarded.
5. Late payment of \$10 will be imposed per day due to any reasons if rental not received on rental due date.
6. Upon signing the contract, Hirer will be obliged to maintain the vehicle with due diligence at our respective workshop, failing to maintain the vehicle thereafter resulting in major faults, repair cost will be borne by the Hirer.

Hirer Bank Account Details :		
1st Party Excess: \$3000	3rd Party Excess: \$3000	CDW: Y / N (additional \$3.21/day)
		CDW If yes, excess @ \$1,500

Signature of Hirer

Signature of Authorized Person



LOCAL TOW SERVICE (24HRS) : 91828211

MALAYSIA TOW SERVICE (24HRS) : YONG - 016-704 7552 / 012-220 8076

TYRE &amp; BATTERY SERVICE (24HRS) : AH KEE 98751699

BENEFIT AUTOCARE: ERIC 9489 4845 | 11 Kaki Bukit Raod 1 #01-02 Eunost Technolink (S415939)  
 LUSH AUTOMOTIVE : PATRICK 94357824 | 8 Kaki Bukit Ave 4, #03-47 Premier @ Kaki Bukit (S415875)  
 AIRCON : PATRICK 94357824 | Blk 3021A, Ubi Road 1, #01-39 (S408715)



## Claim Handling

Accident MT/1074904

Policy No.	5108997801	Vehicle No.	SG93402	GST Registration No.	
Certificate No.	5108997801-000004				
Policyholder Name	KC CAR RENTAL PTE LTD			Policyholder NRIC	201810588M
Product Code	FLEET MASTER INSURANCE	Cover Type	Third Party, Fire & Theft	Loading	0
Contact No.(Mobile)	84954484	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	+ No Yes	TCA	+ No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes
<b>▼ Accident Details</b>					
Report Date	09/12/2019 15:12	Accident Report Within 24 hrs	Yes	Accident Type	Chain Collision
Date of Accident	07/12/2019	Time of Accident hh:mm	14:35	Country of Accident	Singapore
Reporting Centre		Grange Force		ICM No.	
Accident Location	SLE TWDS CTE EXIT OUTRAM PARK RD				
<b>▼ Total Excess Applicable</b>					
Excess Type	Per Accident	Windscreen Excess	0.00		
OD Standard Excess	0.00	TP Standard Excess	1,500.00		
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?	Covered
Additional Excess	0				
Total OD Excess Applicable	0.00	Total TP Excess Applicable	1,500.00		
<b>▼ Benefits</b>					
<b>▼ GST Registered Information</b>					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified	Yes		
Modification History					
<b>▼ Policyholder Mailing Address</b>					
Address 1	61 UBI AVENUE 2	Address 2	#05-04 AUTOMOBILE MEGAMAR	Address 3	SINGAPORE 408898
Address 4		Address Type	Singapore address	Post Code	408898
Unit No.	05-04	Related Policy Number	5109056461		
<b>▼ OI Driver Info</b>					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	LIM KIAN CHYE (LIN JIANCAI)	Driver NRIC	S7500339J	Driver DOB	04/01/1975
Register Date of Driver License	01/11/2011	Driver Age	44	Driving Experience	8
Contact No.(Mobile)	84984484	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 122B #15-167	Address 2	EDGE DALE PLAINS	Address 3	PUNGGOL EDGE
Address 4	SINGAPORE 822122	Address Type	Singapore address	Post Code	822122
Unit No.	15-167				
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?	Yes + No		

Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	KC CAR RENTAL PTE LTD	Insured NRIC	201811
Contact No.(Mobile)	80603343	Contact No. (Home)		Contact No. (Office)	+
Email Address		Q1 Vehicle Number	SG93402	TP Vehicle Number	YK375
Claim Description	SG93402 / YK3754 ON 7 Dec 2019			Name of Preferred Workshop	0
Preferred Workshop	0	Insured Liability	Not at Fault		
Finalise No. Finalisation	Yes	Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered				Claim Close Date	09/12/2019 15:17
Report Taken By				Date Received	09/12/2019
					LIEW SHAN HUI
<input checked="" type="checkbox"/> Print AK letter					

Save Submit

## Attachment

Accident No.	MT/1074904	Claim No.	001		
Last Doc. Received	Yes No	Upload Date	09/12/2019 15:18		
Path *		Category *	Confidential	Urgency *	Desc
Choose File	No file chosen	Clear	Please Select	NO	Normal
Choose File	No file chosen	Clear	Please Select	NO	Normal
Choose File	No file chosen	Clear	Please Select	NO	Normal
Choose File	No file chosen	Clear	Please Select	NO	Normal
Choose File	No file chosen	Clear	Please Select	NO	Normal
Choose File	No file chosen	Clear	Please Select	NO	Normal
Choose File	No file chosen	Clear	Please Select	NO	Normal
Message Read		Clear	Please Select	NO	Normal
<b>▼ Attachment List</b>					

Attachment	Uploaded By/Date	Category		Urgency	Description
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Dec 2019 15:18	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2019-12-9
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Dec 2019 15:18	SAS		Normal	SAS 2019-12-9
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Dec 2019 15:17	Photos		Normal	Photos 2019-12-9
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Dec 2019 15:17	Photos		Normal	Photos 2019-12-9
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Dec 2019 15:17	Photos		Normal	Photos 2019-12-9
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Dec 2019 15:17	Photos		Normal	Photos 2019-12-9
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Dec 2019 15:17	Photos		Normal	Photos 2019-12-9
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Dec 2019 15:17	Photos		Normal	Photos 2019-12-9
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Dec 2019 15:17	Photos		Normal	Photos 2019-12-9
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Dec 2019 15:17	Photos		Normal	Photos 2019-12-9
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Dec 2019 15:17	Photos		Normal	Photos 2019-12-9
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Dec 2019 15:17	Photos		Normal	Photos 2019-12-9
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 Video List					
Uploaded By/Date	Folder Date	File Name		Source	
		Display in New Window	Scan and uploading		