

NATIONAL Assessment Centre Services

(wef 1 Jan'05)

MNA 170016319

Date In: 5/1/10 - 15:26	Job description	Date & Time Completed	Done by
Ref No: NA/INC 17002015/624	SAS e-filing		
Veh No: 6885327R	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 4/1/10 - 11:55	i-Motor Claim Form	17/10 82905-000	5/1/10 15:47
☒ 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: 6885327R	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

NA 17001192	Invoice Preparation Checklist	Amt (\$)	Amt (\$)
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);	Int Bill	Add Bill
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:-	For claiming against INC Only (wef 10 Jan 2005)		
Dat 1:	6) TR: Re-inspection \$75		
Dat 2 / 3:	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	Q1:		
	*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 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	05/02/2020 15:26
Date Of Accident	04/02/2020 11:55
Exact Location Of Accident	DUNEARN RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB5327R
Insured/Policyholder	
Name Of Registered Owner	SKYRAY SINGAPORE PTE LTD
Co Reg No	2XXXXX821R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE MANUAL
Exact Purpose for which vehicle was being used at time of accident	WORKING

Are you claiming under your own insurance policy for repair to your vehicle? YES

If No, Please state action to be taken

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	5090936954-02
Cover Note Number	

Driver

Name of Driver	JUAY KEOK TECK
NRIC No	SXXXX762A
Date Of Birth	05/08/1967
Occupation	OUTDOOR
Date Of Driving Pass	04/11/1987
Driving Experience	32 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93262268
Fax Number	
Contact Number	OFFICE-93262268
Email Address	NOEMAIL

Address	BLK 134 ANG MO KIO AVENUE 3 #12-1685
Postcode	560131
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	SLS410H	(LEXUS CT 200H)
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

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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

Dunstan Rd



A. 9BB5327 R
B. SL54104

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Failed to brake in time hit onto the rear of
veh B.

DECLARATION

I/We declare that the above 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.:

Personal Particulars

Date of Accident: 4/2/20

Time of Accident: 11:55

Exact Location of Accident: Duncarn Rd Slip Rd

Owner's Name: Skyray S'pore Pte Ltd NRIC No: _____ HP No: _____

Driver's Name: Juny Kerk Teck NRIC No: S1820762A HP No: 93262268

Date of Birth: 5/8/1967 Driving Licence Passing Date: 4/11/1987 Occupation: Indoor / Outdoor 6

Address: 134 AMK Ave 3 #12-1685 (560134)

Relationship of Driver with Insured: Employee Email Address: _____

Vehicle No: GBB 5327R Make & Model: Toyota

Insurance Co: NTUC Coverage: Comprehensive Policy No: _____

*Purpose of Reporting? ☒ Own Damage Claim / ☐ 3rd Party Claim / ☐ Not Claiming, Just Reporting Only

*Exact Purpose of The Vehicle Was Being Used At Time Of Accident: ☒ Private Use / ☐ Work

*Weather Condition? ☒ Clear / ☐ Raining / Others: _____ ☒ Wet / ☐ Dry / Others: _____

*Any passenger inside vehicle involved? (Yes / No) If yes, Vehicle No & How many pax:

A: 1+0 B: _____ C: _____ D: _____

*Was Anybody Injured? (Yes / No) If yes,

Name / NRIC / In Vehicle: _____

*Was The Accident Reported To The Police?

☒ No ☐ Yes, Which Police Station? _____

*Does the Driver Own Any Other Vehicle?

☒ No ☐ Yes, Vehicle Registration No: _____ Insurer: _____

*Was any foreign vehicle involved? (Yes / No) If yes, Vehicle No & Category: _____

*Was there any video captured by Car Camera? (Yes/No) ☒

Third Party Driver's Particulars

Vehicle B No: SLS 410H Make & Model: _____

Driver's Name: _____ NRIC No: _____ HP No: _____

Vehicle C No: _____ Make & Model: _____

Driver's Name: _____ NRIC No: _____ HP No: _____

Witness Particulars

Name: _____ NRIC No: _____ HP No: _____

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	04/02/2020 11:55							
Vehicle No. (For Motor)	GBB5327R	Certificate Number								
Search										
Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
☐	S090936954-02		SKYRAY SINGAPORE PTE LTD	200700821R	GCV	Comprehensive	GBB5327R	GBB5327R	28/05/2019	27/05/2020
Continue										

Claim Handling

Accident MT/1082905

Policy No.	5090936954-02	Vehicle No.	GBB5327R	GST Registration No.	200700821R
Certificate No.					
Policyholder Name	SKYRAY SINGAPORE PTE LTD	Cover Type	Comprehensive	Policyholder NRIC	200700821R
Product Code	COMMERCIAL VEHICLE INSURANCE	Contact No.(Office)		Loading	0
Contact No.(Mobile)	NA	Special Remark		Contact No.(Home)	
Email Address		TCA	☒ No ☐ Yes	eCode	
KPK	☒ No ☐ Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No			Private Hire	No

Accident Details

Report Date	04/02/2020 15:50	Accident Report Within 24 hrs	Yes	Accident Type	Unknown
Date of Accident	04/02/2020	Time of Accident hh:mm	00:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	DUNBURN ROAD				

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	500.00	TP Standard Excess	0.00	Driver is Covered?	Not Applicable
YIED OD Excess		YIED TP Excess			
Additional Excess					
Total OD Excess Applicable	500.00	Total TP Excess Applicable	0.00		

Benefits

GST Registered Information

GST Registered	Yes	GST Registration Date	15/02/2007
GST Registration No.	200700821R	GST Status Verified	Yes
Modification history	04/02/2020 15:51:43 System changed GST Registered from No to Yes 04/02/2020 15:51:43 System changed GST Registration No. from null to 200700821R 04/02/2020 15:51:43 System changed GST Registration Date from null to 15/02/2007		

Policyholder Mailing Address

Address 1	S ANQ MO KIO INDUSTRIAL PAI	Address 2	#07-07 AMK TECH IT	Address 3	SINGAPORE 567760
Address 4		Address Type	Singapore address	Post Code	567760
Unit No.		Related Policy Number	5090936954-02		

OT Driver Info

Driver Name		Driver Type		Driver DOB	
Unnamed Driver Name		Driver NRIC		Driving Experience	
Register Date of Driver License		Driver Age		Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	
Address 1		Address 2		Post Code	
Address 4		Address Type	Foreign address		
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-MB	Insured Name	SKYRAY SINGAPORE PTE LTD	Insured NRIC	200700821R
Contact No.(Mobile)	97850900	Contact No.(Home)		Contact No.(Office)	
Email Address		OT Vehicle Number	GBB5327R	TP Vehicle Number	SL5410H
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select		
Claimant Name *		Claimant NRIC *			
Claimant Address					
Claim Description	GBB5327R / SL5410H ON 4 Feb 2020				
Preferred Workshop Contact No.	96813469	Insured Liability *	Fully at Fault	Name of Preferred Workshop	J-MART AUTO SERVICES
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop (refer below)	GIA report	Received
Date Registered	05/02/2020 15:47	Claim Close Date		Date Received	05/02/2020 00:00
Report Taken By	Jackson			OD Excess Collected by Workshop	

☒ Print AK letter

Save Submit

Attachment

Accident No.	HT/1082905	Claim No.	002
Last Doc. Received	☒ Yes ☐ No	Upload Date	05/02/2020 15:48

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

☐ Send Message

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent?
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[illegible]

INFORMED DRIVER THAT HIS VEHICLE RADIATOR NO WATER WHICH CAUSES
HIS VEHICLE BURNED WHILE DRIVING.

A handwritten signature in blue ink, appearing to be 'R. Smith', with a large, stylized 'R' and a long, sweeping flourish extending to the right.

ASSIGNMENT (IP 14)

CUE Expired = 27/5/2024

By Assessor- 1) Nature of Accident:

- 1) Vehicle hit Vehicle:
 - a) Motorcar ()
 - b) Motorcycle ()
 - c) Bicycle ()
- 2) Vehicle hit ??
 - a) Pedestrian ()
 - b) Animal ()
- 3) Vehicle hit Road Side Object:
 - a) Govt Property ()
 - 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 ()

Remarks for internal information

Remarks to appear in Works Order & Assessment report

- 1) Potential Total Loss ()
- 2) SRS Light on ()
- 3) ABS Light on ()

By Assessor- 1) Vehicle Information

Vch No: **GBB5327R** Date: **28 May 2009**
 Type: M/Car / M/Cycle / Hrv / Van / Lorry / Bus / Prime Mover / ...
 / Truck / Trailer or
 Make & Model: **Toyota Hiace**
 Colour: **Silver** Insurance Type: **Auto**
 Engine No: **568452** Sp Reading: **568452**
 C/Ho: **JTFHT02PX00043241**
 Gen Cond: Good / Fair / Poor / Burnt or
 Steering: **Good** / Jammed / Leaked / Burnt or
 Brake: **Good** / Jammed / Leaked / Burnt or
 Mod: **Nil** / S/Rim / STD M/Rim or
 Tyre Size: **E: 195 R15**
 R: **---**
 BS / **DUN** / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or
 Front: **7** mm Rear: **7** mm
 R/Bal: **7** mm L/Bal: **7** mm
 Parallel Import: Yes / **No** Toward-Int: Yes / No
 Repair Type: **LS** / LBJ Towling Required: **Yes** / No
 No of Repair Days: **6** Vehicle in Use: **Yes** / No
 D.O.I: **5/2/2020** Time: **3.40 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. Govt 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 ()

Time Started Time Completed

By CDO

By CDO

By Data Entry Operator / completed Time

VAN / LORRY (Frt)

Front Portion

NAC	INC	Item	CON	AC	Qty
1001	991886	Frt Number Plate	BT	✓	
1002	991887	Frt Number Plate Base			
1004	991300	Frt Bumper	DD	✓	
2001	991477	Frt Bumper Upper Clip	NEC	✓	6
2002	991387	Frt Bumper Lower Grille	CRA	✓	
2003	991449	Frt Bumper Side Cover			
2004	991443	Frt Bumper Side			
1006	991325	Frt Bumper Bracket			
1008	991433	Frt Bumper Reinforcement	DD	✓	2
2005	991466	Frt Bumper Signal Lamp			
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			
2006	990247	Frt Grille Sticker			
1023	991799	Frt Grille Chrome Moulding			
2007	991891	Frt Panel			
2008	991874	Frt Lower Panel			
2009	991328	Frt Panel Emblem			
2010	990247	Frt Panel Sticker			
2011	991893	Frt Panel Garnish			
1024	991222	Frt Apron Panel			
2012	991527	Frt Corner Panel RH	DD	✓	
2013	991532	Frt Corner Panel Signal Lamp			
2014	995245	Frt Signal Lamp LH			
2015	995246	Frt Signal Lamp RH			
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			
2016	992149	Frt Wiper Panel			
2017	995043	Frt Wiper Nozzle			
1120	992140	Frt Wiper Arm			
1121	992142	Frt Wiper Blade			
2018	992145	Frt Wiper Link			
2019	992148	Frt Wiper Motor			
1122	995045	Wiper Panel Garnish			
1114	992093	Frt Windscreen			
1115	992097	Frt Windscreen Rubber			
1117	992098	Frt Windscreen Sealant			
2020	992114	Frt Windscreen Outer Pillar			
2021	992113	Frt Windscreen Inner Pillar			
1118	991019	ERP Bracket			
1119	991020	ERP Unit			
2022	991958	Frt Side Mirror (Big)			
2023	991959	Frt Side Mirror (Small)			
2024	991962	Frt Side Mirror (Round)			
2025	995015	Frt Wing Mirror Stay			
1025	992013	Frt Support Panel	BT	✓	
1033	990248	Bonnet	BNC	✓	
1035	990287	Bonnet Lock	BT	✓	
1037	990273	Bonnet Hinge			
1039	990305	Bonnet Emblem	NEC	✓	
1042	990119	Air Con Condenser	DD	✓	
1043	990122	Air Con Fan Assy			
1048	990149	Air Con Liquid Pipe			
1049	995066	Air Con Receiver Drier			
1052	995074	Radiator			
1053	992738	Radiator Cowling			
1054	992742	Radiator Fan Assy			
1056	992758	Radiator Hose Top			
1058	992741	Radiator Expansion Tank			
2026	992596	Oil Cooler			
1079	994431	Power Steering Cooler Pipe			
1059	990151	Air Duct			
1060	990070	Air Cleaner Assy			
1067	990219	Battery			
1069	990223	Battery Bracket			

Vehicle No:

GBB 5327 R

NAC	INC	Item	CON	AC	Qty
1085	991011	Engine Under Cover			
1086	990946	Engine Mounting			
2027	991500	Frt Cabin Assy			
2028	991501	Frt Cabin Mounting			
2029	991502	Frt Cabin Rear Panel			
1092	991520	Frt LH Chassis Member			
1093	991520	Frt RH Chassis Member			
1094	990728	Frt Vertical Cross Member			
1095	991863	Frt Lower Cross Member			
2030	990143	Air Con Evaporator Assy			
2031	990106	Air Con Blower			
1082	990427	Brake Master Pump Assy			
1083	990403	Brake Booster Pump Assy			
2032	990431	Brake Pedal			
2033	990021	Accelerator Pedal			
2034	990627	Clutch Pedal			
1127	994483	Steering Wheel Airbag			
1128	994485	Steering Wheel Airbag Sensor			
1131	990029	Airbag Control Unit			
1133	991922	Frt RH Seat Belt Assy			
1135	995182	Frt LH Seat Belt Assy			
1124	990753	Dashboard Assy			
1125	992282	Glove Box Cover			
1126	992281	Glove Box Compartment			
1096	995070	Frt LH Fender			
1097	995072	Frt LH Fender Inner Panel			
1100	991740	Frt LH Fender Inner Shield			
1101	995179	Frt LH Mudflap			
2035	994966	Frt LH Wheel Guard			
1102	995170	Frt LH Wheel Rim			
1104	995065	Frt LH Tyre			
1105	995071	Frt RH Fender			
1106	991739	Frt RH Fender Inner Panel			
1109	991740	Frt RH Fender Inner Shield			
1110	991884	Frt RH Mudflap			
2036	994966	Frt RH Wheel Guard			
1111	992087	Frt RH Wheel Rim			
1113	995065	Frt RH Tyre			
1255	995326	Frt LH Door			
1256	995140	Frt LH Door Protector			
1257	995104	Frt LH Door Hinge			
1258	995142	Frt LH Door Wing Mirror			
1262	995103	Frt LH Door Glass			
1263	991595	Frt LH Door Glass Regulator			
1264	991596	Frt LH Door Glass Regulator Motor			
1265	991662	Frt LH Door Rubber			
1266	991636	Frt LH Door Outer Handle			
1272	991617	Frt LH Door Inner Trim Board			
1316	995327	Frt RH Door			
1317	991654	Frt RH Door Protector			
1318	991601	Frt RH Door Hinge			
1319	991685	Frt RH Door Wing Mirror			
1323	991584	Frt RH Door Glass			
1324	991595	Frt RH Door Glass Regulator			
1325	991596	Frt RH Door Glass Regulator Motor			
1326	991662	Frt RH Door Rubber			
1327	991636	Frt RH Door Outer Handle			
1333	991617	Frt RH Door Inner Trim Board			
2037	991644	Frt Door Frt Pillar			
2038	991657	Frt Door Rear Pillar			
2039	992072	Frt Wheel Arch Panel			
2040	992069	Frt Wheel Arch Panel Garnish			
2041	991996	Frt Step Panel			
2042	994498	Frt Step Panel Top Garnish			
2043	994495	Frt Step Panel Inner Garnish			
1073	995053	Wiper Washer Tank			
1136	990247	Sticker			
		Inter Cooler			

No of Items:

Assessor:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	821R
Vehicle Details	
Vehicle No.:	GBB5327R
Vehicle to be Exported:	No
Intended Deregistration Date:	07 Feb 2020
Vehicle Make:	TOYOTA
Vehicle Model:	HIACE MANUAL
Primary Colour:	Silver
Manufacturing Year:	2009
Engine No.:	1KD1928454
Chassis No.:	JTFHT02PX00043241
Maximum Power Output:	-
Open Market Value:	\$25,387.00
Original Registration Date:	28 May 2009
First Registration Date:	28 May 2009
Transfer Count:	1
Actual ARF Paid:	\$1,270.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	27 May 2024
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$13,910.00
COE Rebate Amount:	\$11,973.00
Total Rebate Amount:	\$11,973.00
Message	
Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.	

The information contained herein is correct as at 05 Feb 2020

OK

4 - 3.8mths

Claim Handling

Task Transfer Exit

Accident MT/1082905

LOE SAL SUB

Policy No.	5090936954-02	Vehicle No.	GBB5327R	GST Registration No.	200700821R
Certificate No.					
Policyholder Name	SKYRAY SINGAPORE PTE LTD	Cover Type	Comprehensive	Policyholder NRIC	200700821R
Product Code	COMMERCIAL VEHICLE INSURAN	Contact No.(Office)		Loading	0
Contact No.(Mobile)	NA	Special Remark		Contact No.(Home)	
Email Address		TCA	☒ No ☐ Yes	eCode	
KFK	☒ No ☐ Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No			Private Hire	No

Accident Details

Report Date	04/02/2020 15:50	Accident Report Within 24 hrs	Yes	Accident Type	Unknown
Date of Accident	04/02/2020	Time of Accident Return	00:00	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTR	Orange Force	No	ICM No.	
Accident Location	DUNEARN ROAD				

Total Excess Applicable

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

Benefits

GST Registered Information

GST Registered	Yes	GST Registration Date	15/02/2007
GST Registration No.	200700821R	GST Status Verified	Yes
Modification History	04/02/2020 15:51:43 System changed GST Registered from No to Yes 04/02/2020 15:51:43 System changed GST Registration No. from null to 200700821R 04/02/2020 15:51:43 System changed GST Registration Date from null to 15/02/2007		

Policyholder Mailing Address

Address 1	5 ANG MO KIO INDUSTRIAL PAF	Address 2	#07-07 ANK TECH II	Address 3	SINGAPORE 567760
Address 4		Address Type	Singapore address	Post Code	567760
Unit No.		Related Policy Number	5090936954-02		

O1 Driver Info

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

Modification History

Investigation

Claim 002 OD-MD

Claim Case Officer Yap Chee Ling

LOE SAL SUB

Claim Type	OD-MD	Insured Name	SKYRAY SINGAPORE PTE LTD	Insured NRIC	200700821R
Contact No.(Mobile)	97850900	Contact No.(Home)		Contact No.(Office)	
Email Address		O1 Vehicle Number	GBB5327R	TP Vehicle Number	SLS410H
Claimant Type		Type of Benefit			
Claimant Name		Claimant NRIC			
Claimant Address					
Claim Description	GBB5327R / SLS410H ON 4 Feb 2020	Insured Liability	Fully at Fault	Name of Preferred Workshop	3-MART AUTO SERVICES
Preferred Workshop Contact No.	96813469	Preferred Repair Option	Preferred Workshop (refer below)	GIA report	Received
Require Finalisation	Yes	Claim Close Date		Date Received	05/02/2020 00:00
Date Registered	05/02/2020 15:49	Workshop Repaired		Total Lost but Repaired	
Report Taken By	Jackson			OD Excess Collected by Workshop	
☒ Print AK letter					

Modification History

Special Claim Creation Approval

Approval	Reason
Remarks	

Damage assessment Attachment

Vehicle Info

Vehicle Make	TOYOTA	Vehicle Model	HIACE	Engine Capacity	1.0
Date of Registration	28/05/2009	Class No.	J7PHY02PX00043241	Parallel Import *	☐ Yes ☒ No
Towing Required *	☒ Yes ☐ No	Vehicle in IDAC *	☐ Yes ☒ No	Survey Current Status	
Type of Tender *	Own Damage	Assessor Name *	SIMON		
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(\$)		Scrap Value(\$)		Economical Repair Value(\$)	

REMARK: NO OF REPAIR DAY: 6 DAYS. 1 X AIR CON LIQUID PIPE - UNCONFIRM. 1 X STICKER - REPLACE. 1 X INTER COOLER - REPLACE.

Remark

Remark for Supplementary

Damage Listing

Find a Part	No.	Part No.	Description	Qty *	Repair Code *	
1001						
Not Applicable	1.	32200101	NUMBER PLATE (FRONT)	1	Replace	X
ABS	2.	16000101	BUMPER (FRONT)	1	Replace	X
ABSORBER	3.	112053	AIR CON EVAPORATOR	1	Unconfirm	X
ACCELERATOR	4.	112003	AIR CON BLOWER	1	Unconfirm	X
ACTUATOR	5.	23300202	DOOR (FRONT RIGHT)	1	Repair	X
ADVERTISMENT STICKER	6.	454012	WIPER WASHER TANK	1	Replace	X
AIR BAG	7.	16002401	BUMPER CLIPS (FRONT)	8	Replace	X
AIR BLOWER	8.	16003201	BUMPER GRILLE (FRONT)	1	Replace	X
AIR BOX	9.	16001301	BUMPER BRACKET (FRONT LEFT)	1	Unconfirm	X
AIR CHAMBER BOX	10.	16001302	BUMPER BRACKET (FRONT RIGHT)	1	Unconfirm	X
AIR CLEANER	11.	16005001	BUMPER REINFORCEMENT (FRONT)	1	Replace	X
AIR COMPRESSOR	12.	27100101	GRILLE (FRONT)	1	Replace	X
AIR CON	13.	21300102	CORNER PANEL (FRONT RIGHT)	1	Replace	X
AIR CON (VAN)	14.	27700101	HEAD LAMP (LEFT)	1	Unconfirm	X
AIR COOLER	15.	27700102	HEAD LAMP (RIGHT)	1	Replace	X
AIR DISTRIBUTOR	16.	41300101	SUPPORT PANEL (FRONT)	1	Replace	X
AIR FILTER	17.	149001	BONNET	1	Replace	X
AIR FLOW	18.	14903401	BONNET LOCK (LOWER)	1	Replace	X
AIR GRILLE	19.	149016	BONNET EMBLEM	1	Replace	X
AIR HORN	20.	112023	AIR CON CONDENSER	1	Replace	X
AIR INTAKE	21.	344001	RADIATOR	1	Unconfirm	X
AIR RESONATOR BOX	22.	344005	RADIATOR COWLING	1	Unconfirm	X
AIR THROTTLE BODY AND SENSOR	23.	344008	RADIATOR FAN	1	Unconfirm	X
ALARM	24.	34402802	RADIATOR HOSE (TOP)	1	Unconfirm	X
ALTERNATOR						
ALUMINIUM PANEL - SIDE						
AMPLIFIER						
ANTENNA						
ANTI ROLL						
APRON						
ARCH						
ARM REST						
ASH TRAY						
AUTO CLUTCH						
AUTO COOLER PIPE						
AUTO RELEASE MECHANISM						

Save Submit

LKK Paya Ubi

From: Yap Chee Ling <CheeLing.Yap@income.com.sg>
Sent: Thursday, 6 February 2020 3:31 PM
To: LKK Paya Ubi
Subject: GBB5327R | MT/1082905 (Awarding Letter to J-Mart Motor)
Importance: High

Hi IDAC

Please release the vehicle to J-Mart.

Thank you.

Yap Chee Ling (Ms)
Executive
Operations, Motor and Personal Lines (PL)
T +65 6430 7893
www.income.com.sg



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Our Ref: MT/CA/OD/051/1082905-002/YCL

06 Feb 2020

J-MART MOTOR (DEFU)
BLK 5 #01-578
DEFU LANE 10
DEFU INDUSTRIAL ESTATE
SINGAPORE 539186

Dear Sir

CLAIM NUMBER: MT/1082905-002
REPAIR OF VEHICLE NUMBER: GBB5327R

We are pleased to inform you that you are successful in your tender to repair the vehicle. The details are as follows:

Award Date: 06 Feb 2020
Make: TOYOTA
Model: HIACE
Estimated Repair Days: 5
Location: NATIONAL ASSESSMENT CENTRE SERVICES

Address: 51 UBI AVENUE 1 #01-25 PAYA UBI INDUSTRIAL PARK SINGAPORE 408933

Benefits: Not applicable

Excess Applicable: 600

Please note that supplementary items will not be allowed.

If you have any queries, please contact Yap Chee Ling at 6430-7893 or email us at motor@income.com.sg.

Yours sincerely

Jenny Pe
Deputy Vice President
Motor Insurance

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