

NATIONAL Assessment Centre Services (wef 1 Jan 2005)

Date In: 27/02/20	Job description	Date & Time Completed	Done by
Ref No: NA/INC20003269/13	SAS e-filing		
Veh No: 5L24828Z	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 27/08/2019 1100	i-Motor Claim Form	MT/1086094-001	
OD <input checked="" type="radio"/> 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: (6 SPEED Tel: Fax:)

TP Particulars:	Veh No: PL24J7J	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%; F: 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

NA2001857	Invoice Preparation Checklist	Amt (\$) 1st Bill	Amt (\$) Add Bill
Claimant's Particulars :-	1) AR : Accident Reporting (\$30);		
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) RT : Follow-Through Survey (Resurvey) \$30		
Auditors' Comments :-	For claiming against INC Only (wef 10 Jan 2005)		
Cat. 1:	6) TR : Re-inspection \$75		
Cat. 2 / 3:	7) N1 : Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	OP*		
	*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 27/02/2020 11:56
 Date Of Accident 27/08/2019 11:00
 Exact Location Of Accident BLK 633 VEERASAMY CARPARK
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLZ4828Z
Insured/Policyholder
 Name Of Registered Owner KC CAR RENTAL PTE LTD
 Co Reg No 2XXXXX588M
 Email Address NOEMAIL
 Mobile Phone No
 Alternative Phone No OFFICE-90672582

Vehicle Particulars

Manufacturer HONDA
 Model FREED
 Exact Purpose for which vehicle was being used at time of accident PARKED VEH
 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 COMPREHENSIVE
 Fleet Policy YES
 Policy Number 5109056461
 Cover Note Number

Driver

Name of Driver WILSON GOH CHIN KOK
 NRIC No SXXXX679Z
 Date Of Birth 23/08/1973
 Occupation OUTDOOR
 Date Of Driving Pass 12/09/2006
 Driving Experience 12 YEARS AND 11 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-85882272
 Fax Number
 Contact Number
 Email Address WILSON.GOHCK@GMAIL.COM

Address	BLK 408B FERNVALE RD #20-22
Postcode	792408
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	RAINING
Road Surface	WET

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?	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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SERANGOON NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 50 SERANGOON AVE 2 #01-02 , POSTCODE: 556129 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4880999 - FAX NO: 64883561
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REVER TO THE POLICE REPORT: T/20190828/2039

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	MAIL TO OD SUPPORT
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PC2427J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

NATIONAL Assessment Centre Services (wef 1 Jan 2005)

Date In:	Job description	Date & Time Completed	Done by
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Veh No	E-mail (within 8hrs, AIC 2hrs)		
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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: () 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%; F: 80-100%]

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2) QC Check / Post Repair Inspection ()

3) Upload Resurvey Photo [Repair Cost > \$3000] ()

Injury: _____

Date/Time Actions

Invoice Preparation Checklist

Amt (\$) Amt (\$) 1st Bill 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) RT: 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

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

SKETCH PLAN



IMPORTANT NOTICE

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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:

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

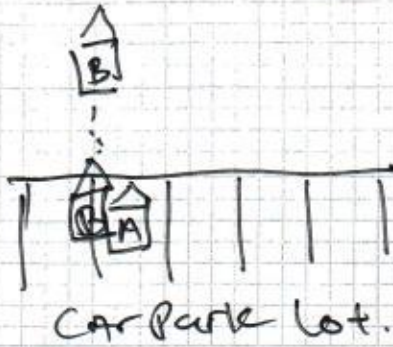


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

 27/02/20

SKETCH PLAN

633 veerasamy carpark.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A - SL248282

B - PC24275

NS Pet Report
Police 1/2019 0828/2039

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: 27/02/20



**SINGAPORE
POLICE FORCE**



T/20190828/2039

1 of 3

Report No. T/20190828/2039

Police Station Of Origin:
Serangoon N.P.C
50 Serangoon Avenue 2 #01-02 SINGAPORE
556129
Tel No: 1800-4880999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/08/2019 11:33	Vide Report No.:	Station Diary No.: 46
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Informant's Particulars

Name of Informant: WILSON GOH CHIN KOK			Address: APT BLK 408B FERNVALE ROAD #20-22 SINGAPORE 792408	
ID Type / ID No.: NRIC NO / S7329679Z			Contact No.: Home/Office:	Mobile: 85882272
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 46	Date of Birth: 23/08/1973	Type of Informant: Vehicle Owner	
Race: Chinese			Language:	Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 27/08/2019 11:30	Type of Location: Car Park
Location: Along Road 1 VEERASAMY ROAD				
Blk 633 Veerasamy Road car park				
Weather: Raining		Road Surface: Wet		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PC2427J	Bus/Coach/Mi nibus					0
SLZ4828Z	Car					0



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Serangoon N.P.C
50 Serangoon Avenue 2 #01-02 SINGAPORE
556129
Tel No: 1800-4880999



T/20190828/2039



2 of 2

Report No. T/20190828/203

CONTINUATION OF REPORT

Brief Details.

On the 27/08/2019 at about 1030hrs, I parked my vehicle bearing registration at the open space car park at Blk 633 Veerasamy Road car park. Before I left my vehicle, everything was intact.

At around 1130hrs, I returned back to vehicle. When I was about to move off, I discovered that my left auto folding mirror is folded inwards. I tried to use the switch to opened but to no avail. As such, I asked my passenger to assist in push outwards my left mirror.

After alight the said passenger, I proceed down to made a check and discovered there is paint marks and scratches on the left side mirror.

I then manage to trace back and retrieve my in car camera footage which show at around 1049hrs, which I parked my vehicle at the open space carpark at Blk 633 Veerasamy Road. A min-bus were trying to reverse into the left lot beside my parked vehicle, while doing so, it had collided onto my left side view mirror. The said driver then drove off without leaving any note or contact details.

I wished to state that I could provide the footage to aid traffic police in their investigation.

Thus, I am lodging this report for my insurance claims and for the traffic police to investigate.



**SINGAPORE
POLICE FORCE**



T/20190828/2039

3 of 3

Report No. T/20190828/2039

Police Station Of Origin:
Serangoon N.P.C
50 Serangoon Avenue 2 #01-02 SINGAPORE
556129
Tel No: 1800-4880999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
F /

Sgt 2 TAN JIE HUIEN BOON

Singapore Police Force

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / HRT /
Sr Staff Sgt TAN JEOK LENG
Contact No.: 65476144

Authentication Stamp
NP158

Signature Of Informant:

Date/Time:
28/08/2019 11:33

Classification Of Case:



**SINGAPORE
POLICE FORCE**

Traffic Police
10 Ubi Avenue 3
Singapore 408866
Tel +65 6547 0000
Fax +65 6547 4863
www.police.gov.sg

Our Ref : TP/IP/55861/2019
Date : 21 November 2019

Wilson Goh Chin Kok
Blk 408B Fernvale Road
#20-22
Singapore 792408

Dear Sir / Madam,

**TRAFFIC ACCIDENT INVOLVING SLZ4828Z AND PC2427J ALONG VEERASAMY
ROAD ON 27/08/2019 AT ABOUT 1049 HRS**

I refer to the above accident.

2. Please be informed that we have completed our investigations which revealed that the driver of PC2427J had committed the offence of Careless Driving under Rule 29 of the Road Traffic Rules. Action has been initiated against the driver for the said offence.
3. If you have any clarification, you may contact the Investigation Officer, SSS Leslie Tan at office number: 6547 6144.
4. Thank you

Yours faithfully,

**HEAD INVESTIGATION
TRAFFIC POLICE
SINGAPORE POLICE FORCE**

This is a computer-generated letter. No signature is required.

A FORCE FOR THE NATION

SLZ 4828Z

VEHICLE NO: ~~27~~

MAKE & MODEL: Honda Freed.

DATE OF ACCIDENT	27 / 08 / 2019.	
TIME OF ACCIDENT	11.00 AM / PM	
LOCATION OF ACCIDENT	Blk 633 Veerasamy carpark.	
Exact Purpose use during accident	Parked VEH	
NAME OF OWNER	KC car Rental P/L.	
TELP NO	90672582.	
NRIC		
CLAIM TYPE	OD / <u>THIRD PARTY</u> / Reporting Only	
PRIVATE HIRE	<u>YES</u> / NO ?	
INSURANCE CO.	NTUC	
TYPE OF CAVERAGE	Comprehensive / Third Party / Third Party Fire & Theft	
POLICY NO.	5109056461 - 000008.	
NAME OF DRIVER	As above / <u>If No?</u> Wilson Goh chin kok.	
NRIC	S7329679Z Any passengers: No.	
DATE OF BIRTH	23 / 08 / 1973	
OCCUPATION	<u>Outdoor</u> / Indoor	
DATE OF DRIVING PASS	12 / 09 / 2005.	
GENDER	<u>Male</u> / Female	
CONTACT NO.	85882272 Office: Home:	
ADDRESS	408B Fernvale Rd #20-22 Coral Vale (792408).	
DRIVER HAVE ANY OWN Vehicle	NO / If yes: Reg No:	
RELATIONSHIP	Employee / If No: Hire.	
WEATHER CONDITION	Clear / <u>Raining</u> / Other:	
ROAD SURFACE	Dry / <u>Wet</u> / Other:	
ANY INJURIES	No / If yes: Who? No.	
CONTACT NO.		
POLICE REPORT	No / If yes: Where? Serangoon MPC.	
VEHICLE B NO.	PC 2427J Any Passenger:	
NAME		
CONTACT NO.		
VEHICLE C NO.	Any Passenger:	
VEHICLE D NO.	Any Passenger:	
VEHICLE E NO.	Any Passenger:	
VEHICLE F NO.	Any Passenger:	
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	
TELEPHONE	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: 5109056461-000008

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : SLZ4828Z
Chassis Number : GB71062672
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.

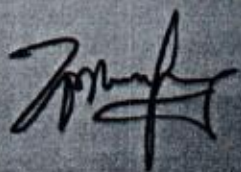
EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: BENEFIT AUTO ENTERPRISE PTE LTD
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)

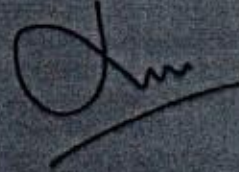
Agency : BENEFIT AUTO INSURANCE AGENCY (00000573333)
Date of Issue : 22 Apr 2019 17:37 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:



Authorised Officer



Chief Executive

Claim Handling

Accident MT/1086094

Policy No.	5109056461	Vehicle No.	SLZ4828Z	GST Registration No.	
Certificate No.	5109056461-000008				
Policyholder Name	KC CAR RENTAL PTE LTD			Policyholder NRIC	
Product Code	FLEET MASTER INSURANCE	Cover Type	drivo CLASSIC	Loading	
Contact No.(Mobile)	90672582	Contact No.(Office)	0	Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	
▼ Accident Details					
Report Date	27/02/2020 17:58	Accident Report Within 24 hrs	Yes	Accident Type	
Date of Accident	27/08/2019	Time of Accident hh:mm	11:00	Country of Accident	
Reporting Centre		Orange Force		ICM No.	
Accident Location	BLK 633 VEERASAMY CARPARK				
▼ Total Excess Applicable					
Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	2,000.00	TP Standard Excess	1,500.00		
YIED OD Excess	0.00	YIED TP Excess		Driver is Covered?	
Additional Excess	0.00				
Total OD Excess Applicable	2,000.00	Total TP Excess Applicable			
▼ Benefits					
▼ GST Registered Information					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified	Yes		
Modification History					
▼ Policyholder Mailing Address					
Address 1	61 UBI AVENUE 2	Address 2	#05-04 AUTOMOBILE MEGAMAF	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.	05-04	Related Policy Number	5109056461		
▼ OI Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	
Unnamed driver Name	WILSON GOH CHIN KOK	Driver NRIC	SXXXX679Z	Driving Experience	
Register Date of Driver License	12/09/2006	Driver Age	46	Contact No.(Home)	
Contact No.(Mobile)	85882272	Contact No.(Office)	0	Address 3	
Address 1	BLK 408B	Address 2	FERNVALE ROAD	Post Code	
Address 4	SINGAPORE 792408	Address Type	Singapore address		
Unit No.	#20-22				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No		

Modification History

Claim 001 OD-MX **New**

Claim Type *	OD-MX	Insured Name	KC CAR RENTAL PTE LTD	Insured NRIC	
Contact No.(Mobile)	90603343	Contact No.(Home)		Contact No.(Office)	
Email Address		OI Vehicle Number	SLZ4828Z	TP Vehicle Number	
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select		
Claimant Name *		Claimant NRIC *			
Claimant Address					
Claim Description	SLZ4828Z / PC2427J ON 27 Aug 2019				Name of Preferred Workshop
Preferred Workshop Contact No.		Insured Liability *	Not at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	
Date Registered	27/02/2020 18:03	Claim Close Date		Date Received	
Report Taken By	ROSJINDA	Workshop Repairer		Total Loss but Repaired	
<input checked="" type="checkbox"/> Print AK letter					

SaveSubmit

Attachment

Accident No. MT/1086094Claim No. 001

Last Doc. Received ☒ Yes ☐ NoUpload Date 27/02/2020 00:00

Path *

Category *













Confidential

Urgency

	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal

Message Read

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 27 Feb 2020 18:03	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2020-2-
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 27 Feb 2020 18:03	SAS		Normal	SAS 2020-2-27
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 27 Feb 2020 18:03	Photos		Normal	Photos 2020-2-27
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 27 Feb 2020 18:03	Photos		Normal	Photos 2020-2-27
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 27 Feb 2020 18:03	Photos		Normal	Photos 2020-2-27
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 27 Feb 2020 18:03	Photos		Normal	Photos 2020-2-27
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 27 Feb 2020 18:02	Photos		Normal	Photos 2020-2-27
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 27 Feb 2020 18:02	Photos		Normal	Photos 2020-2-27
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 27 Feb 2020 18:02	Photos		Normal	Photos 2020-2-27
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 27 Feb 2020 18:02	Photos		Normal	Photos 2020-2-27
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 27 Feb 2020 18:02	Photos		Normal	Photos 2020-2-27
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 27 Feb 2020 18:02	Photos		Normal	Photos 2020-2-27

Video List

Uploaded By/Date	Folder Date	File Name		Source
		Display in New Window	Scan and uploading	