

Date In: 13/7/20 09:12	Job description	Date & Time Completed	Done by
Ref No: MA/INC 20007192/24	SAS e-filing		
Veh No: SLA 3824M	E-mail (within 3hrs, A/C 2hrs)		
DPLA: 9/7/20 17:45	I-Motor Claim Form	MT/1096616 001	
(D) TP / Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whgn		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: SKB 9144S.	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 repolier.

( ) Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co: ( )

Remarks: (INC 20007192/24)	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	Action
13/7/20	Ebao Cannot Create

MA2003676	Invoice/Registration Checklist	Amount (S)	PAID (S)
1) AR: Accident Reporting (\$30);		70.00	
2) DA: Damage Assessment (\$100); INC (\$58)		80.00	
3) TP: Towing Fee	\$40/\$45		
4) PT: Follow-Through Survey	\$120		
5) PT: Follow-Through Survey (Resurvey)	\$30		
For claiming against INC Only (wef 10 Jan 2003)			
6) TR: Re-inspection	\$75		
7) NI: Idao DA + SMRT Survey	\$160		
8) NTUC Additional Services:			
Q1:			
*N5: Courtesy Car / Tpt Allowance	\$5		
*N6: Repair Coordination	\$10	10.00	
*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		

Comments:

QC Checked by (Engr-In-Charge):

Auditors' Comments:

Cal. 1:

3/3



## 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	13/07/2020 09:12
Date Of Accident	09/07/2020 17:45
Exact Location Of Accident	HOUGANG AVE 4 JUNC WITH HOUGANG ST 51
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ3824M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	WEE SUSAN MARGARET
NRIC No	SXXXX968J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92397411
Alternative Phone No	OFFICE-92397411

### Vehicle Particulars

Manufacturer	HONDA
Model	FIT
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	5110758145-01
Cover Note Number	

### Driver

Name of Driver	LOH JUI SENG
NRIC No	SXXXX033G
Date Of Birth	01/10/1956
Occupation	OUTDOOR
Date Of Driving Pass	30/05/1979
Driving Experience	41 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91014554
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 188C RIVERVALE DR #02-1048
Postcode	543188
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - CROSS JUNCTION
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?	
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	SKZ9144S
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:

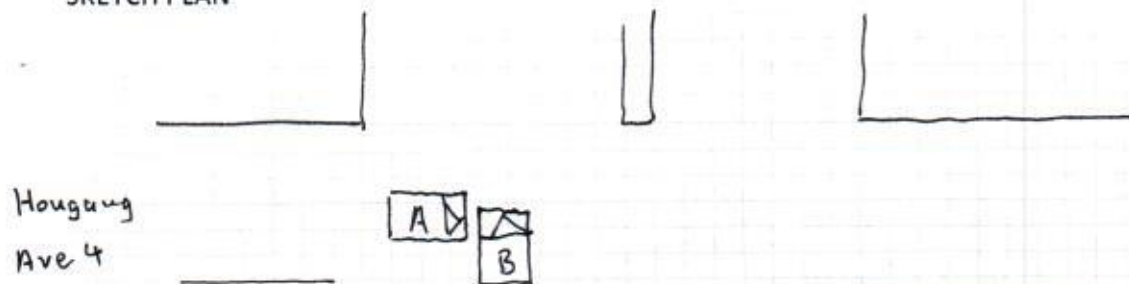
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**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:

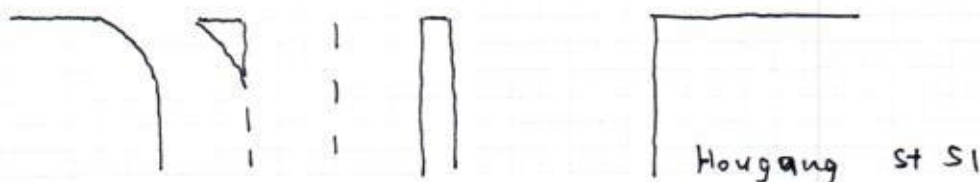
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

# SKETCH PLAN



A = SL2 3824M

B = SK2 9144S



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along Hougang Ave 4 while approaching Junc with Hougang St S1, the light from amber to red. I manage ~~st~~ to stop but due to raining day and the road surface was wet. My veh sliperry out to the Junc, veh B come from Hougang St S1, as the result, we both veh have a collision.

## 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.:



# ACCIDENT STATEMENT

ACCIDENT DATE: ( 9 / 7 / 20 ) (DD/MM/YYYY), TIME: ( 17 : 45 ) (HH:MM)

LOCATION: Hougang Ave 4 Junc with Hougang st SI

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLA 3824 M  
 b) INSURANCE COMPANY: \_\_\_\_\_  
 c) POLICY NUMBER: \_\_\_\_\_  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: Honda Fit  
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
 h) PURPOSE OF USING AT ACCIDENT TIME: Private use  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) YES  
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- A) NAME: wee Susan Margaret (MALE / FEMALE) 744  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 9239471  
 c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: Loh Jui Seng (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 91014554  
 c) ADDRESS: \_\_\_\_\_

\*d) DATE OF BIRTH: (\_\_\_\_/\_\_\_\_/\_\_\_\_) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: \_\_\_\_\_

## 4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Spouse

## 5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

## 6. WAS ANYBODY INJURED (YES / NO)

## 7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SKZ 9144 S MODEL: \_\_\_\_\_  
 b) DRIVER'S NAME: \_\_\_\_\_  
 c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
 e) DRIVER'S NAME: \_\_\_\_\_  
 f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

ws  
 Prefer. Modern Automotive Pte Ltd  
 9670 6443

Monday put car

Email =

fax =

VIDEO = No. No.

Excess \$ 600

\* No of passenger  
 (including driver)  
 (1)

\* No of passenger  
 (including driver)  
 ( )

\* No of passenger  
 (including driver)  
 ( )

[My Desktop](#)[Notice of Loss](#)

## Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="11/07/2020 11:09"/>							
Vehicle No.(For Motor)	<input type="text" value="SLQ3824M"/>	Certificate Number	<input type="text"/>							
<input type="button" value="Search"/>										
Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5110758145-01		WEE SUSAN MARGARET	S1365968J	GPC	drivo CLASSIC	SLQ3824M	SLQ3824M	06/07/2020	05/07/2021
				<input type="button" value="Continue"/>						

## LKK Paya Ubi

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**From:** ODsupport <ODsupport@income.com.sg>  
**Sent:** Monday, 13 July 2020 8:30 PM  
**To:** LKK Paya Ubi  
**Subject:** RE: MT/1096616 VEH NO SLQ3824M

Hi,

*Amended MX to MD. Please submit damage assessment.*

Warmest Regards

**From:** LKK Paya Ubi [mailto:rspu@lkkauto.com]  
**Sent:** Monday, 13 July 2020 3:02 PM  
**To:** ODsupport <ODsupport@income.com.sg>  
**Subject:** MT/1096616 VEH NO SLQ3824M

[CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you can confirm the sender and know the content is safe.]

Hi All,

Above mentioned vehicle, Ebao cannot created. Driver claims under own damage claims please open the D/A file to me for submit the damage assessment. Attachment is the photo, GIA report and driver IC & DL. Please give me the claims number to billing the invoice.

Thank

Best Regards,  
**Shan Hui** | Admin

**National Assessment Centre Services (LKK Group)**

Phone: 6841-0055 | email: [rspu@lkkauto.com](mailto:rspu@lkkauto.com) | fax: 6841-6315

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)





This email has been checked for viruses by AVG antivirus software.  
[www.avg.com](http://www.avg.com)

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#### Disclaimer

This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

### ASSIGNMENT (IDAC)

**By CSO- Nature of Accident:**

- 1) Vehicle hit Vehicle:
- a) Motorcar ( )
- b) M/cycle ( )
- c) Bicycle ( )
- 2) Vehicle hit ??
- a) Pedestrian ( )
- b) Animal ( )
- 3) Vehicle hit Road Side Objects:
- a) Govrn.Property ( )  
(Eg: signboard, barrier, tree etc)
- b) Road Work Object ( )
- c) Private Property ( )
- 4) Vehicle drop into drain ( )
- 5) Damage due to Act of God:
- a) Fallen Object ( )
- b) Flood ( )
- c) Other, \_\_\_\_\_
- 6) Parked & Found Damaged:
- a) Vandalism ( )
- b) Hit by Moving Object ( )
- 7) Theft Case
- a) Stolen ( )
- b) Damage found ( )  
when recovered.
- 8) Fire
- a) Whilst driving ( )
- b) Parked ( )
- 9) Accident date more than 24hrs ( )

Remarks for internal information

Remarks to appear in Works Order &amp; Assessment report

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

**By Assessor- 1) Vehicle Information**

Veh No: SLQ 3824 M Yr Regn: July 2017

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

Make & Model: Honda Fit C.C. 1317

Colour: Gray Transmission Type: Auto / Manual

Eng/No: L13B1336955 Sp.Reading: 87227

C/No: GK31232701

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

Steering: In order / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

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

Tyre Size: F: 185/60 R15

R:  $\longrightarrow 11 \longrightarrow$

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

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

Parallel Import: Yes ☒ No ☐ Towed-In: Yes ☒ No ☐

Repair Type: LS / I.B.I Towing Required: Yes / No

No of Repair Days: 4 Vehicle in Idac: Yes / No

D.O.I. 13/07/2020 Time: 1400hrs

## 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.Govrn 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:

- 1) CSO
- 2) ASS
- 3) Entire Operation Completed Time:



# SLQ 3824 M

Page 4 of 11

- 1.) Front bumper X 1 torn
- 2.) —||— tow hook cover X 1 Dented
- 3.) —||— RH lower grille X 1 mounting broken
- 4.) —||— clips X 1 set Hec
- 5.) Front bumper reinforcement X 1 ?
- 6.) Front RH headlamp X 1 broken
- 7.) Front RH fender X 1 Dented
- 8.) Front LH fender X 1 Dented
- 9.) Front bonnet X 1 Bt
- 10.) —||— hinge X 2 Bt

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	968J
<b>Vehicle Details</b>	
Vehicle No.:	SLQ3824M
Vehicle to be Exported:	Yes
Intended Deregistration Date:	13 Jul 2020
Vehicle Make:	HONDA
Vehicle Model:	FIT 1.3G F-PACKAGE A
Primary Colour:	Grey
Manufacturing Year:	2016
Engine No.:	L13B1336955
Chassis No.:	GK31232701
Maximum Power Output:	73.0 kW (97 bhp)
Open Market Value:	\$15,540.00
Original Registration Date:	06 Jul 2017
First Registration Date:	06 Jul 2017
Transfer Count:	0
Actual ARF Paid:	\$5,540.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	05 Jul 2027
PARF Rebate Amount:	\$4,155.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	05 Jul 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$50,789.00
COE Rebate Amount:	\$35,437.00
<b>Total Rebate Amount:</b>	<b>\$39,592.00</b>

The information contained herein is correct as at 13 Jul 2020

OK



## Claim Handling

Task Transfer Exit

## Accident MT/1096616

LOS SAL SUB

Policy No.	5110758145-01	Vehicle No.	SLQ3824M	GST Registration No.	
Certificate No.					
Policyholder Name	WEE SUSAN MARGARET			Policyholder NRIC	S1365968J
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

## Accident Details

Report Date	13/07/2020 08:48	Accident Report Within 24 hrs	No	Accident Type	Collision - Cross Junction
Date of Accident	09/07/2020	Time of Accident hh:mm	17:45	Country of Accident	Singapore
Reporting Centre	Tan Yong Kwang Anthony (Moto	Orange Force	No	ICM No.	
Accident Location	HOUGANG AVE 4 JUNC WITH HOUGANG ST 51				

## 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 188C #02-1048	Address 2	RIVERVALE DRIVE	Address 3	SINGAPORE 543188
Address 4		Address Type	Singapore address	Post Code	543188
Unit No.		Related Policy Number	5110758145-01		

## OI Driver Info

Driver Name	LOH JUI SENG	Driver Type	Named Driver		
Unnamed driver Name		Driver NRIC	S1173033G	Driver DOB	01/10/1956
Register Date of Driver License	30/05/1979	Driver Age	63	Driving Experience	41
Contact No.(Mobile)	91014554	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 188C #02-1048	Address 2	RIVERVALE DRIVE	Address 3	SINGAPORE 543188
Address 4		Address Type	Singapore address	Post Code	543188
Unit No.	02-1048				
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	14/07/2020 09:08 s018940 Modify Time of Accident(00:00-->17:45) 14/07/2020 09:08 s018940 Modify Accident Type(Unknown-->Collision - Cross Junction) 14/07/2020 09:08 s018940 Modify Accident Location(NA-->HOUGANG AVE 4 JUNC WITH HOUGANG ST 51)				

## Investigation

## Claim 001 OD-MD

## Claim Case Officer Ng Hak Joo

Claim Type	OD-MD	Insured Name	WEE SUSAN MARGARET	Insured NRIC	S1365968J
Contact No.(Mobile)	92397411	Contact No. (Home)	66380235	Contact No. (Office)	
Email Address	SUSANMARGARET80@GMAIL.C	O1 Vehicle Number	SLQ3824M	TP Vehicle Number	
Claim Description	SLQ3824M ON 9 JUL 2020			Name of Preferred Workshop	
Preferred Workshop	Insured Not at				
Reparation	Preferred Repair Option				
Finalisation	Yes				
Date Registered	13/07/2020 08:49	Claim Close Date		Date Received	14/07/2020
Report Taken By		Workshop Repairer		Total Loss but Repaired	
				OD Excess Collected by Workshop	
Print AK letter					
Modification History	13/07/2020 17:37 s069588 Modify Claim Type(OD-MX-->OD-MD)				

## Special Claim Creation Approval

Approval	Reason		
Remarks			
<b>damage assessment</b> <b>Activity Handling</b> <b>Attachment</b>			
Vehicle Info			
Vehicle Make	HONDA	Vehicle Model	FIT
Date of Registration	06/07/2017	Classis No.	GK31232701
Towing Required *	<input checked="" type="radio"/> Yes <input type="radio"/> No	Vehicle in IDAC *	<input checked="" type="radio"/> Yes <input type="radio"/> No
Type of Tender	Own Damage	Assessor Name *	BRYAN
IDAC/Workshop Name	IDAC/Workshop Location		Survey Current Status
Windscreen Parts & Labour Cost	Total Loss *	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Market Value(\$)	Scrape Value(\$)	Economical Repair Value(\$)	
remark:no of repair days:4 days.1X FRT BUMPER RH LOWER GRILLE - REPLACE.			
Remark			
Remark for Supplementary			

## Damage Listing

Find a Part	No.	Part No.	Description	Qty *	Repair Cor
root	1	16000101	BUMPER (FRONT)	1	Replace
Not Applicable	2	16006701	BUMPER TOWING COVER (FRONT)	1	Replace
ABS	3	16002401	BUMPER CLIPS (FRONT)	6	Replace
ABSORBER	4	16005001	BUMPER REINFORCEMENT (FRONT)	1	Unconfirm
ACCELERATOR	5	27700102	HEAD LAMP (RIGHT)	1	Replace
ACTUATOR	6	25400103	FENDER (FRONT RIGHT)	1	Replace
ADVERTISEMENT STICKER	7	25400102	FENDER (FRONT LEFT)	1	Replace
AIR BAG	8	149001	BONNET	1	Replace
AIR BLOWER	9	14902201	BONNET HINGE (LEFT)	1	Replace
AIR BOX	10	14902202	BONNET HINGE (RIGHT)	1	Replace
AIR CHAMBER BOX					
AIR CLEANER					
AIR COMPRESSOR					
AIR CON					
AIR CON (VAN)					
AIR COOLER					
AIR DISTRIBUTOR					
AIR FILTER					
AIR FLOW					
AIR GRILLE					
AIR HORN					

Save Submit



## Claim Handling

Task Transfer Exit

## Accident MT/1096616

LOS SAL SUB

Policy No.	5110758145-01	Vehicle No.	SLQ3824M	GST Registration No.	
Certificate No.					
Policyholder Name	WEE SUSAN MARGARET			Policyholder NRIC	S1365968J
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

## Accident Details

Report Date	13/07/2020 08:48	Accident Report Within 24 hrs	No	Accident Type	Collision - Cross Junction
Date of Accident	09/07/2020	Time of Accident hh:mm	17:45	Country of Accident	Singapore
Reporting Centre	Tan Yong Kwang Anthony (Moto	Orange Force	No	ICM No.	
Accident Location	HOUGANG AVE 4 JUNC WITH HOUGANG ST 51				

## 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 188C #02-1048	Address 2	RIVERVALE DRIVE	Address 3	SINGAPORE 543188
Address 4		Address Type	Singapore address	Post Code	543188
Unit No.		Related Policy Number	5110758145-01		

## OI Driver Info

Driver Name	LOH JUI SENG	Driver Type	Named Driver		
Unnamed driver Name		Driver NRIC	S1173033G	Driver DOB	01/10/1956
Register Date of Driver License	30/05/1979	Driver Age	63	Driving Experience	41
Contact No.(Mobile)	91014554	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 188C #02-1048	Address 2	RIVERVALE DRIVE	Address 3	SINGAPORE 543188
Address 4		Address Type	Singapore address	Post Code	543188
Unit No.	02-1048				
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	14/07/2020 09:08 s018940 Modify Time of Accident(00:00-->17:45) 14/07/2020 09:08 s018940 Modify Accident Type(Unknown-->Collision - Cross Junction) 14/07/2020 09:08 s018940 Modify Accident Location(NA-->HOUGANG AVE 4 JUNC WITH HOUGANG ST 51)				

## Investigation

## Claim 001 OD-MD

## Claim Case Officer Ng Hak Joo

Claim Type	OD-MD	Insured Name	WEE SUSAN MARGARET	Insured NRIC	
Contact No.(Mobile)	92397411	Contact No.(Home)	66380235	Contact No.(Office)	
Email Address	SUSANMARGARET80@GMAIL.C	OI Vehicle Number	SLQ3824M	TP Vehicle Number	
Claim Description	SLQ3824M ON 9 Jul 2020				Name of Preferred Workshop
Preferred Workshop	Yes	Preferred Repair Option	Insured Liability report	Not at Reading	
Date Registered	13/07/2020 08:49	Claim Close Date		Date Received	
Report Taken By		Workshop Repairer		Total Loss but Repaired	
Print AK letter				OD Excess Collected by Workshop	
Modification History	13/07/2020 17:37 s069588 Modify Claim Type(OD-MX-->OD-MD)				

## Special Claim Creation Approval

Approval

Reason

Remarks

damage assessment

Activity Handling

Attachment

Accident No.

MT/1096616

Claim No.

001

Last Doc. Received

☒ Yes ☐ No

Upload Date

14/07/2020 09:17

Path \*

Choose File No file chosen

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Category \*

Confidential

Urgency \*

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## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:17	Photos	Normal	Photos 2020-7-14
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:17	Photos	Normal	Photos 2020-7-14
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:17	Photos	Normal	Photos 2020-7-14
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:17	Photos	Normal	Photos 2020-7-14
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	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:17	Photos	Normal	Photos 2020-7-14
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:16	Photos	Normal	Photos 2020-7-14
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:16	Photos	Normal	Photos 2020-7-14
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:16	Photos	Normal	Photos 2020-7-14
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:16	Photos	Normal	Photos 2020-7-14
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:16	Photos	Normal	Photos 2020-7-14
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	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:16	Photos	Normal	Photos 2020-7-14



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NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:16	Photos	Normal	Photos 2020-7-14
NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:15	Photos	Normal	Photos 2020-7-14
NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:15	Photos	Normal	Photos 2020-7-14
NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:15	Photos	Normal	Photos 2020-7-14
NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:15	Photos	Normal	Photos 2020-7-14
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NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:12	Photos	Normal	Photos 2020-7-14
NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:12	Photos	Normal	Photos 2020-7-14
NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:12	Photos	Normal	Photos 2020-7-14
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NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:12	Photos	Normal	Photos 2020-7-14
NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SER VICES) on 14 Jul 2020 09:12	Photos	Normal	Photos 2020-7-14
s018940( Tan Yong Kwang Anthony (Motor)) on 14 Jul 2020 0 9:09	SAS	Normal	SAS 2020-7-14

Video List

Uploaded By/Date	Folder Date	File Name	Source
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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: SLQ3824m Date In: 14/7/2022 Time In: 4:50pm with Keys: Yes / No

*For Office use*

Attended by: \_\_\_\_\_

Workshop Collection of Vehicle

Workshop: MODERL

Collection Date: \_\_\_\_\_ Time: \_\_\_\_\_ with Keys: Yes / No

Tow Truck No: \_\_\_\_\_ Tow Man: TOL KOW TIONG NRIC: S12305667

Signature: \_\_\_\_\_

*For office use*

Attended by: [Signature]

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

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**From:** Ng Hak Joo <hakjoo.ng@income.com.sg>  
**Sent:** Tuesday, 14 July 2020 4:27 PM  
**To:** Chin  
**Cc:** LKK Paya Ubi  
**Subject:** RE: SLQ3824M MT/1096616

Dear Ms Chin

Thank you for accepting.

You have informed us that you will update owner on the repair accordingly.

Our Ref: MT/CA/OD/051/1096616-001/NHJ

14 Jul 2020

MODERN AUTOMOTIVE (UBI)

3023A # UBI ROAD 1

SINGAPORE 408717

Dear Sir

**CLAIM NUMBER: MT/1096616-001**

**REPAIR OF VEHICLE NUMBER: SLQ3824M**

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

Award Date: 14 Jul 2020

Make: HONDA

Model: FIT

Estimated Repair Days: 4

Location: NAC

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

Benefits Applicable: N/A

Excess Applicable: 600.00

Please note that supplementary items will not be allowed.

If you have any queries, please contact Ng Hak Joo at 7890 or email us at [motor@income.com.sg](mailto:motor@income.com.sg).

Yours sincerely

Jenny Pe

Deputy Vice President

Motor Insurance

Thank You

**Ng Hak Joo**

Executive

Operations, Motor and Personal Lines

T +65 64307890

[www.income.com.sg](http://www.income.com.sg)





**From:** Chin [mailto:chin@modernautomotive.com.sg]  
**Sent:** Tuesday, 14 July 2020 4:22 PM  
**To:** Ng Hak Joo <hakjoo.ng@income.com.sg>  
**Subject:** RE: SLQ3824M MT/1096616

[CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you can confirm the sender and know the content is safe.]

Hi Hak Joo

We accept your offer of \$1150/- please send award letter.

Thank you

Regards,  
Grace Chin  
Modern Automotive Pte Ltd  
Blk 3023-A, Ubi Road 1 #01-61  
Singapore 408717

Tel: 6748 4422  
Fax: 6747 6720

**From:** Ng Hak Joo [mailto:hakjoo.ng@income.com.sg]  
**Sent:** Tuesday, July 14, 2020 3:46 PM  
**To:** Chin <chin@modernautomotive.com.sg>  
**Subject:** RE: SLQ3824M MT/1096616

Dear Modern

Please revert on the full and final global sum offer of \$1150/-.

Excess \$600/-.

Please be reminded that as per our management below instructions:

**"We will make a single offer to you after the tender closed and you must reply to the offer within 2 hours.**

**If you are not able to accept the offer, the job will be re-assigned in accordance to the terms & conditions of the policy."**



Thank You

**Ng Hak Joo**

Executive

Operations, Motor and Personal Lines

T +65 64307890

[www.income.com.sg](http://www.income.com.sg)



**From:** Chin [<mailto:chin@modernautomotive.com.sg>]

**Sent:** Tuesday, 14 July 2020 1:51 PM

**To:** Ng Hak Joo <[hakjoo.ng@income.com.sg](mailto:hakjoo.ng@income.com.sg)>

**Subject:** Re: SLQ3824M MT/1096616

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Hi Hak Joo

The above is our customer and she wants the repair to be done at our workshop.

Please let us have your offer.

Thank you

Regards,

Grace Chin

Modern Automotive Pte Ltd

Blk 3023-A, Ubi Road 1 #01-61

Singapore 408717

Tel: 6748 4422

Fax: 6747 6720

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