

NATIONAL Assessment Centre Services

Print & Jan 2009

| | | | |
|--------------------------|--|-----------------------|---------|
| Date In: 17/02/21 | Job description | Date & Time Completed | Done by |
| Ref No NA/INC21002264013 | SAS e-filing | | |
| Veh No GBG4441Z | E-mail (within 3hrs, AIC 2hrs) | | |
| IPFA 10/02/21 1600 | I-Motor Claim Form 18/02 MT/1121535-301 | | |
| (11) 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/Wksp | | |

| | | |
|---|---|-----------------------|
| Preferred Wksp / INC Assign Wksp / QW: (| Tel: (| Fax: (|
| TP Particulars: | Veh No: LAMP POST | 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 repolter. | | |
| () Total Loss Case: to e-mail Insurer URGENTLY. | | |
| Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co: (# | | |

| | | |
|---|--|--|
| 1) Apply for Transport Allowance () / Courtesy Car () | | |
| 2) QC Check / Post Repair Inspection () | | |
| 3) Upload Resurvey Photo [Repair Cost > \$3000] () | | |

Injury: _____

| Date/Time | Actions |
|-----------|---------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

| | | | |
|---------------------------------|---|-------------|-------------|
| NA2101424 | Invoice/Itemization Charge Breakdown | Amount (\$) | Amount (\$) |
| Driver/Owner: | 1) AR: Accident Reporting (\$30); | 30 | |
| Contact No: | 2) DA: Damage Assessment (\$100); INC (\$80) | 80 | |
| 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 claimant against INC Only (wef 10 Jan 2009) | | |
| Ref: 2 | 6) TR: Re-inspection \$75 | | |
| Ref: 3 | 7) NI: Idao DA + SMRT Survey \$160 | | |
| | 8) NFUC Additional Services: | | |
| | ON: | | |
| | *NS: Courtesy Car / Tpt Allowance \$5 | | |
| | *NG: Repair Co-ordination \$10 | | |
| | *NT: Post Repair Inspection \$25 | | |
| | *NI: DV / Collect Excess Coordination \$5 | | |
| | TE (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 Submission | 17/02/2021 15:38 (SGT) |
| Date of Accident | 10/02/2021 16:00 (SGT) |
| Exact Location of Accident | Expo Dr, Singapore |
| Additional Location Information | - |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | GBG4441Z |
|-----------------------------|----------|

INSURED/POLICYHOLDER

| | |
|--------------------------|----------------------|
| Is company? | No |
| Name Of Registered Owner | NG JUN SHENG |
| NRIC No | SXXXX250H |
| Email Address | mstansg@yahoo.com.sg |
| Mobile Phone No | (Phone) +65-97824310 |
| Alternative Phone No | +65-97824310 |

VEHICLE PARTICULARS

| | |
|--|--------------------|
| Manufacturer | Nissan |
| Model | Nv200 |
| Variant | - |
| Exact purpose for which vehicle was being used at time of accident | Employment |
| Are you claiming under your own insurance policy for repair to your vehicle? | Yes |
| Vehicle Category | Commercial vehicle |

INSURANCE COMPANY

| | |
|---------------------------|---------------|
| Name of Insurance Company | NTUC |
| Type of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | 5111096831-01 |
| Cover Note Number | - |

DRIVER

| | |
|----------------|-----------------------|
| Name of Driver | TAN MENG SONG WILLIAM |
| NRIC No | SXXXX634Z |
| Date Of Birth | 11/08/1966 |
| Occupation | Outdoor |

| | |
|--|-----------------------|
| Date Of Driving Pass | 17/06/1988 |
| Driving experience | 32 YEARS AND 8 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-97824310 |
| Alt. Phone Number | - |
| Email Address | mstansg@yahoo.com.sg |
| Address | BLK 606 HOUGANG AVE 4 |
| Address complement | #13-177 |
| Postcode | 530606 |
| Is the driver the policyholder? | No |
| If No, Relationship of the Driver with the Insured | Other |
| Does Driver Own Other Vehicles? | No |
| Vehicle Registration Number of Other Vehicle Owned by Driver | - |
| Insurance Company of Other Vehicle Owned by Driver | - |

GENERAL INFORMATION OF THE ACCIDENT

| | |
|--------------------|------------------------|
| Type of Accident | Collided into Property |
| Weather Conditions | Clear |
| Road Surface | Dry |

OTHER INFORMATION

| | |
|---|-----|
| Was any foreign vehicle involved in the accident? | No |
| Number of vehicles involved in the accident | 1 |
| Was anybody injured in the Accident? | Yes |
| Was any injured conveyed to hospital by ambulance? | Yes |
| Was any other material or property damaged? | Yes |
| Number of Passengers (Including Driver) | 2 |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No |

PASSENGER 1

| | |
|--------|-----------|
| Name | NG YU JIE |
| Gender | Male |

DETAILS OF POLICE ACTION

| | |
|---|--|
| Was the accident reported to the police? | Yes |
| Police Station Name | Tanah Merah Neighbourhood Police Post |
| Police Station Phone No | (Phone) +65-18004499999 |
| Alt. Police Station Phone No | (Fax) +65-62447251 |
| Police Station Address | Blk 51 New Upper Changi Road #01-1514 Singapore 461051 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT:T/20210214/2041

ATTACHMENT(S)

| | |
|---|-----|
| Are accident photos available for attachment? | Yes |
| Was there any video captured by Car Camera? | Yes |
| Was there any audio recorded? | No |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------|-----------|
| Vehicle Registration Number | LAMP POST |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |

| | |
|---|------------|
| Vehicle Colour | - |
| Vehicle Category | Government |
| Name of Driver | - |
| Contact Number | - |
| Address | - |
| Address complement | - |
| Postcode | - |
| Insurance Company Name | - |
| Nature Of Damage | - |
| Details of property damaged in accident | LAMP POST |
| No. Of Passenger (Including Driver) | - |

INJURED PERSONS DETAILS

INJURED 1

| | |
|---|-----------------------|
| Name of injured person | TAN MENG SONG WILLIAM |
| Address | - |
| Address Complement | - |
| Post Code | - |
| Approximate Age Years Old | - |
| Injuries Sustained | SLIGHT |
| Injured person in which vehicle? | GBG4441Z |
| Were seat belts worn? | Yes |
| Was this injured conveyed to hospital by ambulance? | Yes |

INJURED 2

| | |
|---|-----------|
| Name of injured person | NG YU JIE |
| Address | - |
| Address Complement | - |
| Post Code | - |
| Approximate Age Years Old | - |
| Injuries Sustained | SLIGHT |
| Injured person in which vehicle? | GBG4441Z |
| Were seat belts worn? | Yes |
| Was this injured conveyed to hospital by ambulance? | Yes |

SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any willful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the 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.

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.

(A Healthy Body, A Healthy Mind)
The Marketplace @ 58, #01-92/93
New Upper Changi Road, SG 461058
Mobile: (+65) 9669-6873 / 9773-0182
Web: www.ahboyfruitsconnect.com

17/2/21

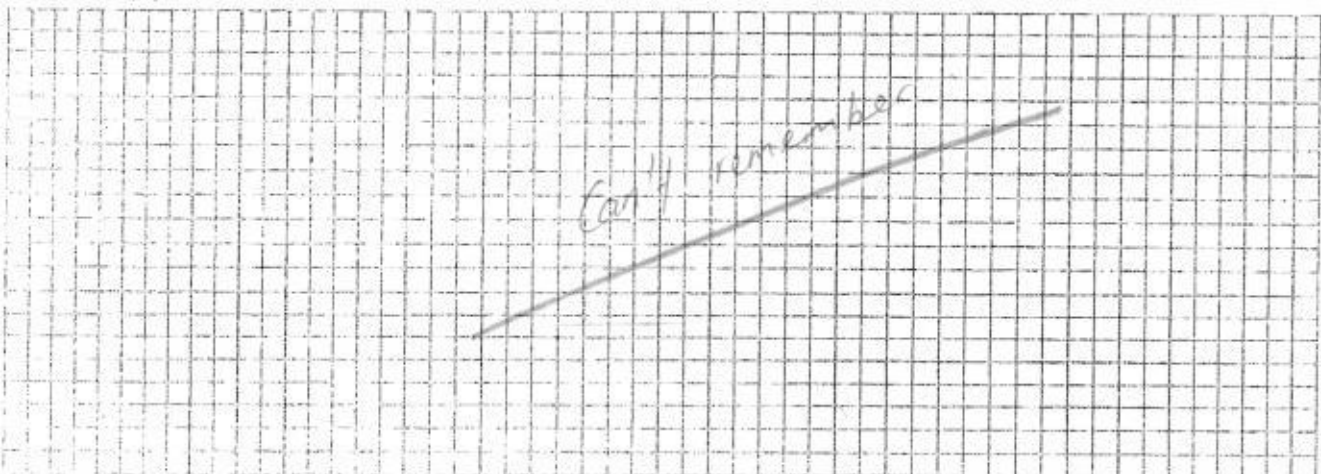
17/02/21

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

Pls refer to the police report: 7/20210214/2041

Declaration

~~ABBOY FRUITSCONNECT~~
We declare the foregoing particulars are true in every respect.
(A Healthy Body, A Healthy Mind)
The Marketplace @ 58, #01-92/93
New Upper Changi Road, SG 461058
Mobile: (+65) 9669-6873 / 9773-0182
Web: www.abboyfruitsconnect.com

Policyholder's Signature / Date &
Time

5/Jan *17/2/21*
Driver's Signature (If driver is not the policyholder) / Date
& Time

2/Jan 17/01/21
Witnessed by Reporting Centre
Personnel



SINGAPORE POLICE FORCE



T/20210214/2041

1 of 3

Police Station Of Origin:
Tanah Merah NPP
51 New Upper Changi Road #01-1514
SINGAPORE 461051
Tel No: 1800-4499999

Report No. T/20210214/2041

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|------------------|-------------------------|
| Date/Time Report Made: 14/02/2021 14:31 | Vide Report No.: | Station Diary No.: 7 |
|--|------------------|-------------------------|

Informant's Particulars

| | | | | |
|---|------------|------------------------------|--|----------------------------|
| Name of Informant: TAN MENG SONG WILLIAM | | | Address: APT BLK 606 HOUGANG AVENUE 4 #13-177 SINGAPORE 530606 | |
| ID Type / ID No.: NRIC NO / S1761634Z | | | Contact No.: Home/Office: Mobile: 97824310 | |
| Nationality: SINGAPORE CITIZEN | | | Email: | |
| Sex: Male | Age: 54 | Date of Birth: 11/08/1966 | Type of Informant: Driver | |
| Race: Chinese | | | Language: English | Institution / School Name: |
| Occupation: GRAB DRIVER | | | Driving Licence Information: Class: Date of Expiry: | |

General Information of the Accident

| | | | | |
|--|-------------------------------|------------------------------------|--|------------------------------------|
| Type of Accident: | Injury Government Property | Drink Drive: No | Date/Time of Accident: 10/02/2021 16:00 | Type of Location: Straight Road |
| Location: EXPO DRIVE | | | | |
| Weather: Clear | | Road Surface: Dry | Road Speed Limit: | |
| Traffic Flow: One Way | | Traffic Control: Not Controlled | Traffic Volume: Light | |
| Type of Collision: Moving Vehicle Against - Lamp Post | | | Anyone conveyed by ambulance: Yes | |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------|--------|------------------------------|--------|---------------------|-----------------|
| GBG4441Z | Van | NISSAN | NV200 VANETTE 1.6 AUTO | Silver | Slightly Damaged | 1 |

Details of Person Involved

| | |
|---------------------------------|--------------------------------|
| Any Pedestrian Involved: No | |
| No. of Pedestrians Injured: NIL | Use of Pedestrian Crossing: NA |



**SINGAPORE
POLICE FORCE**



T/20210214/2041

2 of 3

Report No. T/20210214/2041

Police Station Of Origin:
Tanah Merah NPP
51 New Upper Changi Road #01-1514
SINGAPORE 461051
Tel No: 1800-4499999

CONTINUATION OF REPORT

| | | | |
|-----------------------------------|------------------------------------|--|-----------------------------------|
| Driver | | | |
| Name | TAN MENG SONG WILLIAM | ID No. | S1761634Z |
| Related Vehicle | GBG4441Z (Van) | Contact No. | 97824310 |
| Hospital/Clinic | CHANGI GENERAL HOSPITAL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | 10/02/2021 | Date Discharge | 11/02/2021 |
| No. of Days granted Medical Leave | 16 | Degree of Injury | Slight |
| Passenger | | | |
| Name | NG YU JIE | ID No. | T0620836Z |
| Related Vehicle | GBG4441Z (Van) | Contact No. | NIL |
| Hospital/Clinic | KK WOMEN'S AND CHILDREN'S HOSPITAL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | Slight |

Brief Details.

On 10/02/2021 at about 1600hrs, I was driving a van(GBG4441Z) and was delivering fruits to Yan Kit Village Chinese Temple, together with my nephew(Ng Yu Jie, NRIC: T0620836Z) seated at the passenger seat of the van. After unloading the fruits at the temple, I was on the way back to Blk 58 New Upper Changi Road.

However when I was passing by Singapore Expo and driving on the left lane, I felt some giddiness and eventually blacked out. Subsequently I heard a loud bang and I regained consciousness. My van has knocked onto a lamp post outside Singapore Expo main entrance. My van's airbag has been deployed and I felt pain in my chest upon the impact of the steering wheel. After which, several passers-by came over to assist me to call for ambulance.

The ambulance came and attended to me and my nephew. I was conveyed to Changi General Hospital and my nephew was conveyed to KK Hospital. There is an in-car camera in my van.



**SINGAPORE
POLICE FORCE**



T/20210214/2041

3 of 3

Police Station Of Origin:
Tanah Merah NPP
51 New Upper Changi Road #01-1514
SINGAPORE 461051
Tel No: 1800-4499999

Report No. T/20210214/2041

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:

G /

Sgt 2 LEE SZE HIANG

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Signature Of Informant:

Date/Time:

14/02/2021 14:31

Classification Of Case:

Authentication Stamp
NP168

SINGAPORE
POLICE FORCE

SIGNATURE

ACCIDENT STATEMENT

ACCIDENT DATE: (10 / 02 / 2021) (DD/MM/YYYY), TIME: (16 : 00) (HH:MM)

LOCATION: EXPO DRIVE

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: QBG 4441Z
b) INSURANCE COMPANY: NPHC
c) POLICY NUMBER: _____
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: NISSAN NV200 (A) 1.6
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: _____
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: NG JUN SHENG (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: 97824310
c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: TAN MENG FONG WILLIAM (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S1761634Z CONTACT: 97824310
c) ADDRESS: BK 606 HOUGANG AVE 4
#13-177 (S30606)

* d) DATE OF BIRTH: (11 / 08 / 1966) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 17/06/1988

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

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: BROTHER-IN-LAW

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: LAMP POST 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: _____

17/03/21

waiting for
company stamp

Email = mstansg@yahoo.com.sg

fax =

VIDEO = yes

Hello, NAC_PAYA_UBI_800601

Change Language

Change Password

Log Out

My Desktop

Notice of Loss

Policy Query

| | | | |
|---------------------------------------|---------------------------------------|--------------------|---|
| Policy No. | <input type="text"/> | Date of Accident | <input type="text" value="17/02/2021 11:02"/> |
| Vehicle No.(For Motor) | <input type="text" value="GBG4441Z"/> | 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"/> | 5111096831-01 | | NG JUN SHENG | S1824250H | GCV | Comprehensive | GBG4441Z | GBG4441Z | 03/08/2020 | 02/08/2021 |

Claim Handling

Accident MT/1121539

| | | | | | |
|---------------------|---------------------------|---------------------|---------------|----------------------|-----------|
| Policy No. | 5111096831-01 | Vehicle No. | GBG4441Z | GST Registration No. | |
| Certificate No. | | | | | |
| Policyholder Name | NG JUN SHENG | | | Policyholder NRIC | S1824250H |
| Product Code | COMMERCIAL VEHICLE INSURA | Cover Type | Comprehensive | Loading | 0 |
| Contact No.(Mobile) | 97824310 | Contact No.(Office) | 0 | Contact No.(Home) | 0 |
| Email Address | | Special Remark | | eCode | No |
| KFK | No Yes | TCA | No Yes | eCode Reason | |
| NCD Protection | No | NCD Entitlement(%) | 20 | Private Hire | No |

Accident Details

| | | | | | |
|-------------------|------------------|-------------------------------|-------|---------------------|-----------|
| Report Date | 18/02/2021 18:07 | Accident Report Within 24 hrs | Yes | Accident Type | Others |
| Date of Accident | 10/02/2021 | Time of Accident hh:mm | 16:00 | Country of Accident | Singapore |
| Reporting Centre | | Orange Force | | ICM No. | |
| Accident Location | EXPO DRIVE | | | | |

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? | Not Applicable |
| Additional Excess | | | | | |
| 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 53 #05-1472 | Address 2 | NEW UPPER CHANGI RD | Address 3 | SINGAPORE 46101 |
| Address 4 | | Address Type | Singapore address | Post Code | 461053 |
| Unit No. | | Related Policy Number | 5111096831-01 | | |

OI Driver Info

| | | | | | |
|---|-----------------------|---------------------|------------------|------------------------|-----------------|
| Driver Name | Unnamed Driver | Driver Type | Unnamed Driver | | |
| Unnamed driver Name | TAN MENG SONG WILLIAM | Driver NRIC | S1751634Z | Driver DOB | 11/08/2099 |
| Register Date of Driver License | 17/06/1988 | Driver Age | -78 | Driving Experience | 32 |
| Contact No.(Mobile) | 97824310 | Contact No.(Office) | 0 | Contact No.(Home) | 0 |
| Address 1 | BLK 606 | Address 2 | HOUGANG AVENUE 4 | Address 3 | SINGAPORE 53061 |
| Address 4 | | Address Type | Foreign address | Post Code | 530606 |
| Unit No. | #13-177 | | | | |
| 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 OD-MD New

| | | | | | |
|---------------------|-------------------------------------|-------------------------|---------------------------|---------------------------------|------------------|
| Claim Type * | OD-MD | Insured Name | NG JUN SHENG | Insured NRIC | |
| Contact No.(Mobile) | | Contact No.(Office) | 64441550 | Contact No.(Home) | |
| Email Address | | OI Vehicle Number | GBG4441Z | TP Vehicle Number | |
| Claim Description | GBG4441Z / LAMP POST ON 10 Feb 2021 | | | | |
| Preferred Workshop | | Insured Liability | Fully at Fault | | |
| Workshop No. | | Preferred Repair Option | Income to assign workshop | GIA report | Received |
| Date Registered | | | | Claim Close Date | 18/02/2021 18:13 |
| Report Taken By | | | | Workshop Repairer | ROSLINDA |
| Print AK letter | | | | Total Lost but Repaired | |
| | | | | OD Excess Collected by Workshop | |

Save Submit

Attachment

| | | | |
|--------------|------------|-----------|-----|
| Accident No. | MT/1121539 | Claim No. | 001 |
|--------------|------------|-----------|-----|

Last Doc. Received

☒ Yes ☐ No

Upload Date

18/02/2021 00:00

Path *

Category *

Confidential

Urgency *

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

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No file chosen

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No file chosen

Choose File

No file chosen

Choose File

No file chosen

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Choose File

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No file chosen

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Choose File

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Attachment List

| Attachment | Uploaded By/Date | Category | | Urgency | Description |
|---|--|-----------------------|---|---------|---------------------------------|
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 18 Feb 2021 18:13 | NRIC/ Driving License | Y | Normal | NRIC/ Driving License 2021-2-18 |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 18 Feb 2021 18:13 | SAS | | Normal | SAS 2021-2-18 |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 18 Feb 2021 18:13 | Photos | | Normal | Photos 2021-2-18 |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 18 Feb 2021 18:13 | Photos | | Normal | Photos 2021-2-18 |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 18 Feb 2021 18:13 | Photos | | Normal | Photos 2021-2-18 |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 18 Feb 2021 18:12 | Photos | | Normal | Photos 2021-2-18 |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 18 Feb 2021 18:12 | Photos | | Normal | Photos 2021-2-18 |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 18 Feb 2021 18:12 | Photos | | Normal | Photos 2021-2-18 |
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|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 18 Feb 2021 18:12 | Photos | | Normal | Photos 2021-2-18 |
|  | NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 18 Feb 2021 18:12 | Photos | | Normal | Photos 2021-2-18 |

Video List

| Uploaded By/Date | Folder Date | File Name | | Source |
|------------------|-------------|-----------|--|--------|
| | | | | |

Display in New Window

Scan and uploading

ASSIGNMENT (IDAC)By CSO- Nature of Accident:

- 1) Vehicle hit Vehicle: 2) Vehicle hit ??
- a) Motorcar () a) Pedestrian ()
- b) M/cycle () b) Animal ()
- c) Bicycle ()
- 3) Vehicle hit Road Side Objects:
- a) Govm. Property () b) Road Work Object ()
(Eg: signboard, barrier, tree etc)
- 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

- Total lost due to both front chassis bent and engine likely to be affected.

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

Veh No: GBG 4441Z Yr Regn: 3 Aug 2017

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

Make & Model: Nissan NV200 1.6A c.c. 1597

Colour: Silver Transmission Type: Auto / Manual

Eng/No: _____ Sp. Reading: 72651 km

C/No: VM201 00426

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

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 185/70 R14 - YOKO
R: Westlake

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

| Front | Rear |
|--------------------|--------------------|
| R/Bal. <u>5</u> mm | R/Bal. <u>6</u> mm |
| L/Bal. <u>5</u> mm | L/Bal. <u>6</u> mm |

Parallel Import: Yes / No Towed-In: Yes / No

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

No of Repair Days: 1 Vehicle in Idac: Yes / No

D.O.I. 18/2/2021 Time: 1-30 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. Govm 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:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

| | |
|-------------------------------------|-------------------------|
| Vehicle Owner Particulars | |
| Owner ID Type: | Singapore NRIC |
| Owner ID: | 250H |
| Vehicle Details | |
| Vehicle No.: | GBG4441Z |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 19 Feb 2021 |
| Vehicle Make: | NISSAN |
| Vehicle Model: | NV200 VANETTE 1.6 AUTO |
| Primary Colour: | Silver |
| Manufacturing Year: | 2016 |
| Engine No.: | HR16074660D |
| Chassis No.: | VM20100426 |
| Maximum Power Output: | - |
| Open Market Value: | \$22,055.00 |
| Original Registration Date: | 03 Aug 2017 |
| First Registration Date: | 03 Aug 2017 |
| Transfer Count: | 0 |
| Actual ARF Paid: | \$1,103.00 |
| Intended PARF Rebate Details | |
| PARF Eligibility: | No |
| PARF Eligibility Expiry Date: | - |
| PARF Rebate Amount: | \$0.00 |
| Intended COE Rebate Details | |
| COE Expiry Date: | 02 Aug 2027 |
| COE Category: | C - Goods Vehicle & Bus |
| COE Period(Years): | 10 |
| PQP Paid: | \$37,870.00 |
| COE Rebate Amount: | \$24,442.00 |
| Total Rebate Amount: | \$24,442.00 |

The information contained herein is correct as at 17 Feb 2021

OK

Bal = 6yrs 6mths.
M.V. \$47,000

Singapore Reckless Drivers Part IX

5 dead in Tanjong Pagar speeding accident

Unusual or Rare Car: Part 2

Post an Advertisement
Sell it yourself! Advertise it at just
\$58 until it's SOLD!

Post an Ad Advertiser Login Ways of Selling

2016 Mercedes CLA180 At \$93800



Super Low Mileage, 1 Owner,
Fully C&C Maintained, Flexible
Loan Package,
Hamilton Autohub StarAd

ABWIN 論壇
» Visit Our Profile «




Browse by Category

Sort by Date Posted 20 results/page

5 vehicles

Nissan NV200 1.6a dx

Advanced Search

| | Make | Model | Price | Depreciation | Reg Date | Eng Cap | Mileage | Veh Type | Status |
|--|---|-------|-----------------|--------------|-------------|----------|-----------|----------|----------|
| Search Selection | Nissan NV200 1.6a dx | | Any | Any | 2017 | Any | Any | Any | Availabl |
|  | Nissan NV200 1.6A DX | | \$49,800 | \$7,740 /yr | 26-Jul-2017 | 1,597 cc | - | Van | Availabl |
| Fuel Type: Petrol 1 Owner, Low Mileage. All Stock Agent Unit. Excellent Condition. High COE. Buy With A Peace Of Mind. Exclusive In House 3 Month Warranty. Contact Our Friendly Sales Consultant To Enquire For More! Car (S) Pte Ltd Posted: 17-Feb-2021 Tags: 2017 Nissan NV200, Nissan NV200, Nissan, NV200 | | | | | | | | | |
|  | Nissan NV200 1.6A DX | | \$50,000 | \$8,030 /yr | 11-May-2017 | 1,597 cc | - | Van | Availabl |
| Fuel Type: Petrol Only One Owner. Rear Car Seat That Can Be Folded And Moved Around. Posted: 17-Feb-2021 Tags: 2017 Nissan NV200, Nissan NV200, Nissan, NV200 | | | | | | | | | |
|  | Nissan NV200 1.6A DX | | \$47,800 | \$7,820 /yr | 30-Mar-2017 | 1,597 cc | - | Van | Availabl |
| Fuel Type: Petrol Let You Choose Color. Which One You Like You Tell Me. Previous Owner Change Bigger Van As Business Expend. 1 Careful Owner, Super Good Condition. Try It To Believe. Full Loan Very Simple. Trade In Get More Discount. Faster Come And Test Drive. ABS Bus Pte Ltd Posted: 16-Feb-2021 Tags: 2017 Nissan NV200, Nissan NV200, Nissan, NV200 | | | | | | | | | |
|  | Nissan NV200 1.6A DX | | \$49,800 | \$7,760 /yr | 18-Jul-2017 | 1,597 cc | - | Van | Availabl |
| Fuel Type: Petrol 1 Owner. Exclusive Premium Warranty Provided! Assurance Purchase. Very Well Maintained! New Paintwork. Interior Alteration Services Available. Full Loan Option Available! Speedy Loan Process. Immediate Handover Upon Loan Approval. Free Servicing. Buy Before Diesel... Car (S) Pte Ltd Posted: 08-Feb-2021 Tags: 2017 Nissan NV200, Nissan NV200, Nissan, NV200 | | | | | | | | | |
|  | Otopia Jet Auto Service Pte Ltd - Repair & Servicing At Otopia Jet Auto, they are committed to care for your cars and service, customers satisfaction is our top priority. More info about this shop | | | | | | | | |
|  | Nissan NV200 1.6A DX | | \$53,800 | \$7,840 /yr | 28-Dec-2017 | 1,597 cc | 37,000 km | Van | Availabl |
| Fuel Type: Petrol The Best Mid-size Compact Van In The Marker, Easy To Drive With Big Cargo Space! Great Condition No Repairs Needed, Low Mileage, Well Maintained Exterior And Interior. Finance, Insurance And Trade In Available Call Us Right Now To Book An Appointment! I-Deal Au Post: 2017 Nissan NV200, Nissan NV200, Nissan, NV200 | | | | | | | | | |

Compare

Claim Handling

▼ Accident MT/1121539

Task Transfer Exit

LOS SAL SUB

| | | | | | |
|---------------------|---------------------------|---------------------|---------------|----------------------|-----------|
| Policy No. | 5111096831-01 | Vehicle No. | GBG4441Z | GST Registration No. | |
| Certificate No. | | | | | |
| Policyholder Name | NG JUN SHENG | | | Policyholder NRIC | S1824250H |
| Product Code | COMMERCIAL VEHICLE INSURA | Cover Type | Comprehensive | Loading | 0 |
| Contact No.(Mobile) | 97824310 | Contact No.(Office) | 0 | Contact No.(Home) | 0 |
| Email Address | | Special Remark | | eCode | No ▼ |
| KFK | No Yes | TCA | No Yes | eCode Reason | |
| NCD Protection | No | NCD Entitlement(%) | 20 | Private Hire | No |

▼ Accident Details

| | | | | | |
|-------------------|---------------------------|-------------------------------|-------|---------------------|-----------|
| Report Date | 18/02/2021 18:07 | Accident Report Within 24 hrs | Yes | Accident Type | Others |
| Date of Accident | 10/02/2021 | Time of Accident hh:mm | 16:00 | Country of Accident | Singapore |
| Reporting Centre | NATIONAL ASSESSMENT CENTR | Orange Force | No | ICM No. | |
| Accident Location | EXPO DRIVE | | | | |

▼ 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? | Not Applicable |
| Additional Excess | | | | | |
| 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 53 #05-1472 | Address 2 | NEW UPPER CHANGI RD | Address 3 | SINGAPORE 461053 |
| Address 4 | | Address Type | Singapore address | Post Code | 461053 |
| Unit No. | | Related Policy Number | 5111096831-01 | | |

▼ OI Driver Info

| | | | | | |
|---|-----------------------|---------------------|------------------|------------------------|------------------|
| Driver Name | Unnamed Driver | Driver Type | Unnamed Driver | | |
| Unnamed driver Name | TAN MENG SONG WILLIAM | Driver NRIC | S1761634Z | Driver DOB | 11/08/2099 |
| Register Date of Driver License | 17/06/1988 | Driver Age | -78 | Driving Experience | 32 |
| Contact No.(Mobile) | 97824310 | Contact No.(Office) | 0 | Contact No.(Home) | 0 |
| Address 1 | BLK 606 | Address 2 | HOUGANG AVENUE 4 | Address 3 | SINGAPORE 530606 |
| Address 4 | | Address Type | Foreign address | Post Code | 530606 |
| Unit No. | #13-177 | | | | |
| 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

▼ Investigation

Claim 001 OD-MD

▼ Claim Case Officer Yap Chee Ling

LOS SAL SUB

| | | | | | |
|---------------------|-------------------------------------|-------------------------|---------------------------|---------------------------------|----------------------------|
| Claim Type | OD-MD | Insured Name | NG JUN SHENG | Insured NRIC | S1824250H |
| Contact No.(Mobile) | | Contact No. (Home) | 64441550 | Contact No. (Office) | |
| Email Address | | OI Vehicle Number | GBG4441Z | TP Vehicle Number | LAMP POST |
| Claim Description | GBG4441Z / LAMP POST ON 10 Feb 2021 | | | | Name of Preferred Workshop |
| Preferred Workshop | Yes | Preferred Repair Option | income to assign workshop | Insured Liability report | Fully at Resolved |
| Date Registered | 18/02/2021 18:15 | Claim Close Date | | Date Received | 18/02/2021 19:22 |
| Report Taken By | ROSILINDA | Workshop Repairer | | Total Loss but Repaired | |
| | | | | OD Excess Collected by Workshop | |

Print AK letter

Modification History

▼ Special Claim Creation Approval

| | |
|----------|--------|
| Approval | Reason |
| Remarks | |

damage assessment Attachment

Vehicle Info

| | | | | | |
|---|---|--------------------------|---|-------------------------------|---|
| Vehicle Make * | NISSAN | Vehicle Model * | NV200 | Engine Capacity * | 0.71 |
| Date of Registration * | 03/08/2017 | Classis No. * | VM20100426 | | |
| Towing Required * | <input checked="" type="radio"/> Yes <input type="radio"/> No | Vehicle in IDAC * | <input checked="" type="radio"/> Yes <input type="radio"/> No | Parallel Import * | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| Type of Tender * | Own Damage | Assessor Name * | SIMON | Survey Current Status * | |
| IDAC/Workshop Name * | NATIONAL ASSESSMENT CENTR | IDAC/Workshop Location * | 51 UBI AVENUE 1 #01-25 PAYA | | |
| Windscreen Parts & Labour Cost * | | Total Loss * | <input checked="" type="radio"/> Yes <input type="radio"/> No | | |
| Market Value(\$) * | 47,000.00 | Scrape Value(\$) * | 24,442.00 | Economical Repair Value(\$) * | 22,558.00 |
| TOTAL LOST DUE TO BOTH FRT CHASSIS BENT AND ENGINE LIKELY TO BE AFFECTED. | | | | | |
| Remark * | | | | | |

Remark for Supplementary

Damage Listing

| Find a Part | No. | Part No. | Description | Qty * | Repair Code * |
|------------------------------|-----|----------|----------------------|-------|---------------|
| ADVERTISEMENT STICKER | 1 | 32200101 | NUMBER PLATE (FRONT) | 1 | Replace |
| AIR BAG | | | | | |
| AIR BLOWER | | | | | |
| AIR BOX | | | | | |
| AIR CHAMBER BOX | | | | | |
| AIR CLEANER | | | | | |
| AIR COMPRESSOR | | | | | |
| AIR CON | | | | | |
| AIR CON (VAN) | | | | | |
| AIR COOLER | | | | | |
| AIR DISTRIBUTOR | | | | | |
| AIR FILTER | | | | | |
| AIR FLOW | | | | | |
| AIR GRILLE | | | | | |
| AIR HORN | | | | | |
| AIR INTAKE | | | | | |
| AIR RESONATOR BOX | | | | | |
| AIR THROTTLE BODY AND SENSOR | | | | | |
| ALARM | | | | | |
| ALTERNATOR | | | | | |
| ALUMINIUM PANEL - SIDE | | | | | |

Save Submit



NATIONAL ASSESSMENT CENTRE SERVICES
(LKK GROUP)

51 Ubi Ave 1, #01-25, Paya Ubi Industrial Park,
Singapore 408933, TEL: 6841 0055 FAX: 6841 6315



Vehicle Movement Form

Vehicle Check-In

Vehicle No: _____ Date In: _____ Time In: _____ with Keys: Yes / No _____

For Office use

Attended by: _____

Workshop Collection of Vehicle

Workshop: Chew Boon

Collection Date: 24-2-21 Time: 12.20pm with Keys: Yes / No

Tow Truck No: XP624601 Tow Man: THAN NAYANNA NRIC: 662114051

Signature: [Signature] 83044084

For office use

Attended by: _____

Approved by: _____

Workshop Return of Vehicle

Workshop: _____

Returned Date: _____ Time: _____ with Key: Yes / No

* Tow In / Drive In

Tow Man / Workshop Representative: _____ NRIC: _____

Signature: _____

For office use

Attended by: _____

Owner Collection of Vehicle

Collection Date: _____ Time: _____ with Key: Yes / No

Owner: _____ NRIC: _____

Signature: _____

For office use

Attended by: _____

Approved by: _____

LKK Paya Ubi

From: Yap Chee Ling <CheeLing.Yap@income.com.sg>
Sent: Wednesday, 24 February 2021 9:28 AM
To: Chew Goon Motor - Mrs Chew; Chew Goon Motor(ad3); Chew Goon Motor; LKK Paya Ubi
Subject: GBG4441Z | MT/1121539 (Awarding Letter to Chew Goon)
Importance: High

Hi IDAC and Chew Goon

Vehicle is currently in IDAC.

Excess of \$600 is applicable.

Please liaise with the owner – Mr Ng Jun Sheng at tel: 9669 6873 on the necessary.

Yap Chee Ling (Ms)

Executive

Operations, Motor and Personal Lines

T +65 6430 7893

www.income.com.sg



Our Ref: MT/CA/OD/051/1121539-001/YCL

24 Feb 2021

CHEW GOON MOTOR
BLK 10 AMK IND PARK 2A AVE 5
#01-15, 16 & 17 AMK AUTOPOINT
SINGAPORE 568047

Dear Sir

CLAIM NUMBER: MT/1121539-001
REPAIR OF VEHICLE NUMBER: GBG4441Z

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

Award Date: 24 Feb 2021
Make: NISSAN
Model: NV200

Estimated Repair Days: 30

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

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.



NATIONAL ASSESSMENT CENTRE SERVICES
(LKK GROUP)

51 Ubi Ave 1, #01-25, Paya Ubi Industrial Park,
Singapore 408933, TEL: 6841 0055 FAX: 6841 6315

NAC NATIONAL
ASSESSMENT
CENTRE

Vehicle Movement Form

Vehicle Check-In

Vehicle No: SJC5692K Date In: 4/12/20 Time In: 10am with Keys: Yes / No

For Office use

Attended by: _____

Workshop Collection of Vehicle

Workshop: VIN'S AUTO

Collection Date: 4/12/20 Time: 10am with Keys: Yes / No

Tow Truck No: Q6 645499T Tow Man: GOH PENG KIM NRIC: 136321212

Signature: [Signature]

For office use

Attended by: Jackson

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: _____



Our Ref: MT/CA/OD/087/1110231-003/ZBM/NHJ

03 Dec 2020

NATIONAL ASSESSMENT CENTRE SERVICES
51 UBI AVENUE 1
#01-25 PAYA UBI INDUSTRIAL PARK
SINGAPORE 408933

Dear Sir/Madam

VEHICLE NUMBER: SJC5692K
CLAIM NUMBER: MT/1110231-003

We have awarded this vehicle to VIN'S AUTO PTE. LTD.. Please release the vehicle to the assigned dealer's towing agent.

If you have any queries, please contact Zuraimee Bin Mantau at 6430 7891 or email us at Zuraimee.mantau@income.com.sg.

Yours sincerely

Jenny Pe
Deputy Vice President
Motor Insurance