ATIONAL Assessment Centre	Services, puri sariosi.	SU08213F0003	
Dinte In: 15/03/2021 12/06	1cp description	Dute & Wino Complete	d . Done by
- VILLY	SAS c-Illing		`\ ,
Rei No: MBH //W 2000 3330/Y	E-malt (bjale shr, Alothus)		
Veh No. 51/30041 : 17/00	I-Motor Claim Form	MT 1124285-801	15/03/2021
0.0 1 1/03 24 1/20	I-Motor W/O (Wilhle: OD :	thrs, TP (brs)	12:18
OD The Reporting Only	I-Plioto Uploaded	,	1
	AssessmenUSurvey Repor		
TP Insurer:	Ass'l Report by Pax / Han		CHARLES THE STREET STREET
CLERCH STREET, CONTROL OF THE CONTRO	7537	Toli	Pax!
rotorrod Wkep INC Assign Wkep / QW: (C 4262C . INC	C(,)/Non-INC(),
Over / Driver: (13003	. Tel:	
	lod: () Cover Typo: (
Folicy No. (Datas	Timor	TAMAL OR
Conjumes of t	Note-Est Sinus (WO): N:	0-20%; P: 21-79%. P:	80-10041
Insured/Driver Liability: (%) [1 Year of Registration: ()	Werrenty: YES ()/NO	()	
Buccasi (\$) Longing \$1.0		THE STREET HE WAS A STREET TO STREET THE STR	34.120.44.
The state of the s	的,这个对公司,这是世经历,他就是这个人的。	则即是假现的对对对对对对	HICHY.
() Walle-In Customer 1 Customers Info	ermation sticily Confidential	& Svictly NO rotor of rop.	1
() William Glistonian (Cooking Ynsur () Total Loss Case ; to e-mail Ynsur	W UNGENTLY,	11	,)
- Yurania	101 Aug () / MO () : Towing Co: (THE WALL THE
Drive-in ()/"oved-in (); Invoid	en and () / NO () Towler Col	
Drive-in ()/Toved-in (); Invoice	PI ARA) L NO); Towlate Col (
Drive-in ()/ Towed-in (); Invoid	Courtesy Cur ()); Towlate Col (
Drive-in ()/Toved-in (); Invoid [Minute of the property of Allowands ()/ 2) OC Cheek / Post Roppir Inspection	Courtesy Car ()); Towing Col (i i i i i i i i i i i i i i i i i i i
Drive-in ()/ Towed-in (); Invoid	Courtesy Car ()		T.
Drive-In ()/ Towed-In (); Invoid Drive-In ()/ Towed-In (); Invoid Drive-In ()/ Towed-In ()/	Courtesy Car ()		A CONTROL OF THE PARTY OF THE P
Drive-In ()/ Towed-In (); Invoid 1) Apply for Transport Allowance ()/	Courtesy Car ()		
Drive-In ()/ Towed-In (); Invoid Drive-In ()/ Towed-In (); Invoid Drive-In ()/ Towed-In ()/	Courtesy Car ()		A CONTRACTOR OF THE PARTY OF TH
Drive-in ()/ Towed-in (); Invoid 1) Apply for Transport Allowance ()/ 2) QC Check/ Post Requir Inspection 3) Upload Resurvey Photo [Repuir Cost> 5]	Courtesy Car ()		
Drive-in ()/ Towed-in (); Invoid 1) Apply for Transport Allowance ()/ 2) QC Check/ Post Requir Inspection 3) Upload Resurvey Photo [Repuir Cost> 5]	Courtesy Car ()		
Drive-In ()/ Towed-In (); Invoid ()/ Towed-In (); Invoid ()/ ()/ ()/ ()/ ()/ ()/ ()/ ()	Courtesy Car ()		
Drive-in ()/ Towed-in (); Invoice ()/ Towed-in (); Invoice ()/ Check/ Post Report Allowance ()/ ()/ College/ Post Report Inspection ()	Courtesy Car ()		TOWNS MADE IN THE STATE OF THE
Drive-In ()/ Towed-In (): Invoice Called In (): Invoice 1) Apply for Transport Allowance ()/ 2) QC Cheele/ Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost> 5] Injury:	Courtesy Cur ()		
Drive-In ()/ Towed-In (): Invoice Drive-In ()/ Towed-In ()/	Courtesy Cur ()	Andident language (200); Derray to American (2100);	ING CID
Drive-in ()/ Towed-in (); Invoid (R) Clicin ()/ Towed-in (); Invoid 1) Apply for Transport Allowands ()/ 2) QC Check/ Post Repair Inspection 3) Upload Resurvey Photo (Repair Costs) (I) (III) APACIO 1937	Courtesy Cur ()	Apidoni lupor las (\$20); Derwyr Arestrosbi (\$100);	TRO (CID) TRO (CID) TRO (CID) TRO (CID)
Drive-in ()/ Towed-in (); Invoid (R) Clicin ()/ Towed-in (); Invoid 1) Apply for Transport Allowands ()/ 2) QC Check/ Post Repair Inspection 3) Upload Resurvey Photo (Repair Costs) (I) (III) APACIO 1937	Courtesy Car () \$3000] () 1 1 1 1 1 1 1 1 1 1	And don't institute the convergence of the converge	1) 330 1) 330 10 10 10 10 10 10 10 10 10 10 10 10 10
Drive-in ()/ Towed-in (): Invoid () () () () () () () () () (Courtesy Car () SS 000] () ST 1) ST 1) ST 1) ST 1) ST 1 S	Anddent Importing (DO); Towing Party (Incorp.) Tollow-Through Burvey (Incorp.) Tollow-Through Burvey (Incorp.)	TRO (CID) TRO (CID) TRO (CID) TRO (CID)
Driverin ()/Towed-in (); Invoid ()/Towed-in ()/Towed-in (); Invoid ()/Towed-in ()/Towed	Courtesy Car () \$3000] () \$3000] () \$3000] () \$3000 () \$30	And don't have y to look to lo	1120 (210) (273) (274) (275) (
Driverin ()/Towed-in (); Invoid ()/Towed-in ()/Towed-in (); Invoid ()/Towed-in ()/Towed	Courtesy Car () \$3000] ()	Acident luporting (SDO); Towner Free The Survey (Flacury Includes Included Survey (Flacury Included Survey (Flaury Included Survey (Flau	1150 (210) 210 (210)
Drive-In ()/Toved-In (); Invoid (1) Apply for Transport Allowance ()/ 2) QC Check/Post Repuir Inspection 3) Upload Resurvey Photo [Repuir Costs of the costs	Courtesy Car () \$9000] () \$9000] () \$9000] () \$1000	Anddent luporum (DO); Fowling Attentioned (S100); Fowling DA + 6MICT Survey US Adolphond Sorvious Units (S100); St Caustary Co. / Tpl Allows have St Caustary Co. /	1120 (210) 1120 (
Driverin ()/Toved-In (); Invoid () Apply for Transport Allowance ()/ 2) QC Check/Post Repair Inspection 3) Upload Resurvey Photo [Repair Costs of the costs	Courtesy Car () \$3000] ()	And dent lumporting (DO); Towney American (Stoo); Towney Heavy (Treary International Day of the property of th	11 10 10 10 10 10 10 10 10 10 10 10 10 1
Drive-in ()/Toved-in (); Invoid 1) Apply for Transport Allowance ()/ 2) QC Check/Post Repair Inspection 3) Upload Resurvey Photo [Repair Costs of the costs o	Courtesy Car () \$3000] ()	Apadem Importing (SDO); Towner Free Free Free Free Free Free Free F	19
Drive-in ()/Toved-in (); Invoid (1) Apply for Transport Allowands ()/ 2) QC Check/Post Repair Inspection 3) Upload Resurvey Photo [Repair Costs of the cost	Courtesy Car () \$3000]	Apadent Importing (DO); Towing Pie Yollow-Through Burvey Tollow-Through Through T	19 30 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Drive-In ()/Toved-In (); Invoid ()/Toved-In ()/Toved	Courtesy Car () \$3000]	Apadent luporting (SO)) Towney Its Follow-Through Burvey (Flacory Indiox-Through Burvey) Indiox-Through Burvey Indio	19

SN08213F0003 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 15/03/2021 12:06 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (15/03/2021 12:06 (SGT))



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 witholding of material facts may allow insurance companies to repudiate

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 Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

15/03/2021 12:06 (SGT) 12/03/2021 17:55 (SGT) Pioneer Rd North, Singapore TOWARDS NANYANG CRESCENT BEFORE INT'L RD Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SJK3004T

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No

Email Address Mobile Phone No Alternative Phone No No

TAN KAI WEN CALVIN SXXXX682I cloudvanvitaliano@hotmail.com (Phone) +65-92245335 +65-92245335

VEHICLE PARTICULARS

Manufacturer Model

Variant Exact purpose for which vehicle was being used at time of accident

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

Vehicle Category

Mitsubishi

Lancer

Private use

No - Claiming third party Private car

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy

Policy Number Cover Note Number NTUC

Comprehensive

5105324226-02

DRIVER

Name of Driver NRIC No

Date Of Birth Occupation

TAN KAI WEN CALVIN SXXXX682I 12/11/1995 Outdoor

Date Of Driving Pass 01/11/2018 Driving experience 2 YEARS AND 4 MONTHS Gender Mobile Number (Phone) +65-92245335 Alt. Phone Number +65-92245335 Email Address cloudvanvitaliano@hotmail.com Address BLK 162 JALAN TECK WHYE #02-212 Address complement Postcode 680162 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured 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 Chain Collision Weather Conditions Clear Dry Road Surface OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 3 Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? No Was any other material or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) No soliciting/offering accident claims assistance? DETAILS OF POLICE ACTION Was the accident reported to the police? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO SKETCH PLAN 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	SKF4362S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	•
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	÷
Address	
Address complement	
Postcode	-
Insurance Company Name	-

Nature Of Damage

Details of property damaged in accident

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJM6950G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	; - ;
Address	-
Address complement	-
Postcode	-
Insurance Company Name	
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	TAN KAI WEN CALVIN
Address	
Address Complement	5 .7
Post Code	馬
Approximate Age Years Old	
Injuries Sustained	NECK, BACK, WRIST AND HEADACHE
Injured person in which vehicle?	SJK3004T
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

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

Sketch Plan ROWAR Ro Marit (Tawaros Nawa-Jang Ceks) BJF IN1'L ROAD

A - STK3004T

B - SKF4302S

C - STM69504

MISTOR DOWN Witnessed by Reporting Centre Personnel

B - SKF4302S

C - STM69504

MISTOR DOWN Witnessed by Reporting Centre Personnel

B - SKF4302S

C - STM69504

MISTOR DOWN WITNESSED DOWN WITNESSE

escribe C	Circumstances of the Accident
S (v	On the stated time and dorte, I was driving my vehicle JK 3004T on Piuneer Road North toward Nanyang Cresent before Mernational Road on lane 2 of 3 lanes. Suddenty I felt an impact most from my rear so huge that my vehicle surge forward; and hit onto the vehicle infront of me. I alighted the vehicle, and realised I'm involved in a 3 car chain collision. I'm the peonel car from the Front. First car bear the vehicle number of SIM6950 G. The vehicle that cavsed the accident bearing plate number
	SXK4362S.

Declaration

IWVe 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

Witnessed by Reporting Centre Personnel

Date of Accident	: 12 3/2 Accident Time: 1755 (24-HR-Format)
Accident Place	: PIONEER ROAD MORTH (towards Nanyang Cresent) before international Rd
Vehicle No. (Car Plate No.)	: STK30047 Make/Model: MITSHURISHI LANCER EX 1.5A
Insurance Company	: NTV C Policy No: 3105324226-02
Owner or Company Name /IC No.	: TAN KAI WEN CALVIN S954[682]
Owner or Company Contact No.	: <u>9224 5335</u> Owner's HpCompany Tel
DRIVER'S Name / IC No.	:
DRIVER'S Date Of Birth	: 12/11/1995 DRIVER'S License Pass Date NUV 2018
Relationship of Owner & Driver	$: Spouse \ \ Parent \ \ Children \ \ Employee \ \ Others: ____$
DRIVER'S Address	: BUK 162 JALAN TECK WHYE #02-212
DRIVER'S Contact No./ Alt No.	:1)2)
DRIVER'S Occupation : INDO	OR \ OOTDOOR (e.g. working inside or outside office) to rytheat 16 @
Email Address	: Cloudvanvitaliano @ hotmait.com cloudvanvitaliano@hotanal.
Weather & Road Surface	: CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Repor	ting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including Driv	er):
Was there any video Captured by car c Exact purpose for which vehicle was be Any Injury (If YES, Pls state): No	eing used at time of accident. Private use \ Work Purpose
Other Part	y Driver's Particular (if any) SJM6950 G
Vehicle. No: \$ SKF4362S	Vehicle. No: S5K300
Vehicle Make \Model:	Vehicle Make \Model:
Name Driver:	Name Driver:
IC No. Driver/Contact:	IC No. Driver/Contact:

NEW - Passenger's name & gender:

Claim Handling

Part	cident MT/1124325					
Ministration Mini	icy No. 5	5105324226-02	Vehicle No.	SJK3004	Т	GST Registration No.
Ministra No. Mini	rtificate No.					
Contact No. (1999ins) 922-93335 Contact No. (1991es) Septial America's Special America's Speci	licyholder Name T.	AN KAI WEN CALVIN				Policyholder NRIC
Special Remark K	oduct Code F	PRIVATE CAR INSURANCE	Cover Type	drivo CL/	ASSIC	Loading
Teach No Yes Teach No Yes Code Reason Private Mine	ntact No.(Mobile)	92245335	Contact No.(Office)			Contact No.(Home)
Total Content	nail Address		Special Remark			eCode
### Protection No		No Yes	TCA	® No	Yes	eCode Reason
## Accident Details 15/03/2021 11157			NCD Entitlement(%)	0		Private Hire
Accident 15/03/2021 11:57		10				
District 1,000,0021 11.97 Time of Accident Numm 17.55 Country of Accident 10.00			Assident Penert Within 24 hrs	Vos		Accident Type
Control Con						
	ite of Accident	12/03/2021		17:55		
Proteit Excess Applicable						10111101
Note	cident Location	PIONEER ROAD NORTH TOWARDS NANYANG	CRESCENT BEFORE INTERNATIO	NAL ROAD		
Standard Excess Soc.00 TP Standard Excess D.00 Driver is Covered?	▼ Total Excess Applicable					
December	cess Type	Per Accident	Windscreen Excess		100.00	
ED OD Excess 1,500.00 Interest 1,500.00 Total TP Excess Applicable 0,00 Peneritis Series Applicable 2,100.00 Total TP Excess Applicable 0,00 Series Septilised 1,500.00 Total TP Excess Applicable 0,00 Series Septilised 1,500.00 Total TP Excess Applicable 0,00 Series Septilised 1,500.00 Series		500.00	TP Standard Excess		0.00	
Diver Dive						Driver is Covered?
Tal OD Excess Applicable 2,100.00 Total TP Excess Applicable 0.0.00 ***Denefits*** ***OFT Registered Information** ***T Registered Information No.** ***T Registered Information No.** **T Registered Information No.** ***T Registered Information No.** ***T Registered Information No.** ***Policyholder Mailing Address** ***P			TED IF LACESS		Alba a	
## Benefits ## SER Registered Information ## ST Registered No			Tital To Policy Application		0.00	
### STR Registered Information ### STR Registered No	tal OD Excess Applicable	2,100.00	Total TP Excess Applicable		0.00	
ST Registered No GST Registeration No.						
Si Registration No. colification History Policyholder Mailling Address Uddress 1 BLK 162 #02-212 Address 2 Address 7ype Singapore address Address 3 Address 7ype Singapore address Post Code Driver Name Tan Kat Wen Cal.VIN Driver Type Main Driver Driver Name Tan Kat Wen Cal.VIN Driver Name Driver Name Priver Name Address 7ype Register Date of Driver License Uf1/1/2018 Driver Age 25 Driving Experience Address 1 BLK 162 #02-212 Address 2 JALAN TECK WHYE Address 3 Driver DOB Driver Name Address 1 BLK 162 #02-212 Address 2 JALAN TECK WHYE Address 3 Address 3 Address 3 Address 4 Address 2 JALAN TECK WHYE Address 3 Address 7ype Singapore address Post Code Unit No. Driver Name Driver Name Address 7 Add	GST Registered Informat	ion				
ST Registration No. loodification History Policyholder Mailling Address Address 1 BLK 162 #02-212 Address 7ype Singapore address Post Code Address 7ype Main Driver Driver Info Driver NRIC S95418821 Driver DDB Driving Experience Contact No. (Mobile) 92245335 Contact No. (Mobile) 92245335 Contact No. (Mobile) 92245335 Contact No. (Mobile) 92243335 Driver Post Code Ves No Driver Vehicle No. Driver Vehicle No. SJK3004T Driver Insurer Co Contact No. (Mobile) Driver Insurer Co Address 1 Address 7ype Singapore address Post Code Ves No Driver Vehicle No. SJK3004T Driver Insurer Co Contact No. (Mobile) Driver Insurer Co Driver Vehicle No. SJK3004T Driver Insurer Co Contact No. (Mobile) Driver Insurer Co Contact No. (Mobile) Driver Insurer Co Driver Vehicle No. SJK3004T Driver Insurer Co Contact No. (Mobile) Driver Insurer Co Contact No. (Mobile) Driver Insurer Co Contact No. (Mobile) Driver Insurer Co Driver Vehicle No. Driver Vehicle No. SJK3004T Driver Insurer Co Contact No. (Mobile) Driver Insurer Co Contact No. (Mobile) Driver Insurer Co Contact No. (Mobile) Driver Insurer Co Driver Insurer Co Driver Vehicle No. Driver Insurer Co D	ST Registered	No			- Carlotte - An 1999 - 19	Vac
Policyholder Mailing Address Middress 1 BUX 162 #02-212 Address 2 Address 2 Address 3 Address 3 Address 4 Unit No. Oz-212 Related Policy Number TAN KAI WEN CALVIN Driver Type Main Driver Profered Type Main Driver Main Driver Main Driver Main Driver Main Driver Profered Register Date of Driver Lucense O/11//2018 Driver Age 25 Driver DDB Driver Age 25 Driver Age 25 Driver DDB Address 1 BUX 162 #02-212 Address 2 Address 2 Address 3 Address 4 Holk 102 #02-212 Address 4 Unit No. Oz-212 Does he own a Singapore Registered car? Yes No Driver Vehicle No. Driver Vehicle No. Driver Vehicle No. SJK3004T Driver Insurer Co Modification History Claim O10 OD-MX New Claim Type * OD-MX Version 1 Driver Marcol Six Profered Workshop Name unknown To vehicle Number Driver Registered Insured Liability * Nore Registered Nore Registered Fredering the survey of the	ST Registration No.			1	GST Status Verified	Yes
Address 1 BLK 162 #02-212 Address Type Singapore address Singapore	odification History					
Address 1 BLK 162 #02-212 Address Type Singapore address Singapore						
Address 1 BLX 162 #02-212 Address Type Singapore address Post Code Address Type Singapore address Post Code Address Type Singapore address Post Code Post Code Address Type Singapore address Post Code Address Type Main Driver TAN KAI WEN CALVIN Driver NICL 595416921 Driver DOB Driver NICL 595416921 Driver DOB Address 1 Driver License 01/11/2018 Driver Age 25 Driving Experience Contact No.(Mobile) 92245335 Contact No.(Office) Contact No.(Home Address 1 BLX 162 #02-212 Address 2 JALAN TECK WHYE Address 3 Address 3 Address 7 Pype Singapore address Post Code Unit No. 02-212 Does he own a Singapore Registered are Post Code Post Code Post Code Any Injury? Yes No Modification History Claim 001 OD-MX New Claim Type * OD-MX Y Insured Name TAN KAI WEN CALVIN Insured NRIC Contact No.(Mobile) 92245335 Contact No.(Home) 8926879 Contact No.(Office No.) Contact No.(Home) Six3004T Ty Vehicle No. Six3004T Ty Vehicle No. Insured NRIC Contact No.(Home) Six3004T Ty Vehicle No.(Office Name TAN KAI WEN CALVIN Ty Vehicle No.(Office No.) Freathalyser or Blood Test No. Contact No.(Home) Six3004T Ty Vehicle No.(Office No.) Six3004T Ty Vehicle No. Insured NRIC Contact No.(Home) Six3004T Ty Vehicle No.(Office No.) Six3004T Ty Vehicle No. Ty Vehicle No. OI Vehicle Number Six3004T Ty Vehicle Number OI Vehi	Policyholder Mailing Add	iress		200	1000 mm.	Address 3
Address 4 Address 1/19 S105324226-02 Related Policy Number 5105324226-02 Total Name	ddress 1	BLK 162 #02-212	Address 2			
## OF Driver Info ## OF Driver	ddress 4		Address Type	Singapo	ore address	Post Code
Driver Name TAN KAI WEN CALVIN Driver Type Main Driver Dri	Jnit No.	02-212	Related Policy Number	510532	24226-02	
Driver Name Univar Marie Univar Marie Univar Marie Register Date of Driver License 01/11/2018 Driver Age 25 Driving Experience Contact No.(Mobile) 92245335 Contact No.(Office) Contact No.(Mobile) 92245335 Contact No.(Office) Address 1 BLK 162 #02-212 Address 2 Address 3 Address 4 Unit No. 02-212 Does he own a Singapore Registered car? Post Code Driver Vehicle No. Driver Vehicle No. Driver Vehicle No. SJK3004T Driver Insurer Co Contact No.(Mobile) Driver Insurer Co Claim Ool OD-MX New Claim Ool OD-MX New Claim Ool OD-MX New Claim Ool OD-MX New Insured Name Tan Kai Wen Calvin G8926879 Contact No.(Office) To Vehicle Number SJK3004T Try Vehicle Number Claim Description SJK3004T/SKF4362S ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes Yes Preferred Workshop Contact No. Require Finalisation Yes Preferred Workshop Contact No. Require Finalisation Yes Preferred Workshop Name unknown GIA report Date Registered 15/03/2021 12:02 Claim Close Date Poor Taken By ROSLI WAHAB Driver NRIC Contact No.(Goffice) Driver NRIC Contact No.(Home) SJK3004T Try Vehicle Number SJK3004T Try Vehicle Number SJK3004T Try Vehicle Number Preferred Workshop, Name unknown GIA report Date Registered Total Loss but Registered	OI Driver Info					
United driver Name Contact No.(Mobile) 92245335 Contact No.(Office) Contact No.(Office) 92245335 Contact No.(Office) Address 2 Address 2 Address 3 Address 4 Unit No. 02-212 Ones he own a Singapore Registered car? Contact No.(Office) Peeclaration Breathalyser or Blood Test Reading? Claim 001 0D-MX New Claim Type * OD-MX V Insured Name Insured Name TAN KAI WEN CALVIN Syk3004T Driver Name Contact No.(Office) Contact No.(Office) Insured Name Syk3004T Try Vehicle Numb Tan KAI WEN CALVIN Insured Name Contact No.(Office) Contact No.(Office) Name of Preferred Name of Preferred Contact No.(Office) Syk3004T Try Vehicle Numb Try Vehicle Numb Try Vehicle Numb Try Vehicle Numb Claim Description Syk3004T / SKP4362S ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes Preferred Workshop Contact No. Require Finalisation Yes Preferred Repair Option Preferred Workshop, Name unknown GIA report Date Registered 15/03/2021 12:02 Claim Close Date Workshop Repairer Total Loss but Report Taken By ROSLI WAHAB Nore System Contact No. Contact No	Driver Name	TAN KAI WEN CALVIN	Driver Type	Main Dr	river	
Register Date of Driver License 01/11/2018 Driver Age 25 Driving Experience Contact No.(Mobile) 92245335 Contact No.(Office) Contact No.(Home) Address 1 BLK 162 #02-212 Address 2 JALAN TECK WHYE Address 3 Address 4 Address 7type Singapore address Post Code Unit No. 02-212 Does he own a Singapore Registered car? Yes No Driver Vehicle No. SJK3004T Driver Insurer Co Registered Car? Omg Any Injury? Yes No Claim Ool OD-MX New Claim Ool OD-MX New Claim Type * OD-MX Y Insured Name TAN KAI WEN CALVIN Insured Name SJK3004T TP Vehicle Number SJK3004T TP Vehicle Number SJK3004T TP Vehicle Number SJK3004T TP Vehicle Number Claim Description SJK3004T/SKF4362S ON 12 Mar 2021 Preferred Workshop Contact No. (Office) Require Finalisation Yes Yes Yes Preferred Repair Option Preferred Workshop, Name unknown Yes GIA report Taken By ROSLI WAHAB Workshop Repairer Total Loss but Received Total Loss	Jonamed driver Name		Driver NRIC	59541	6821	Driver DOB
Contact No. (Mobile) 92245335		01/11/2018	Driver Age	25		Driving Experience
Address 1 BLK 162 #02-212 Address 2 JALAN TECK WHYE Address 3 Address 4 Address 7ype Singapore address Post Code Unit No. 02-212 Does he own a Singapore Registered car? Declaration Breathalyser or Blood Test Reading? Claim 001 OD-MX New Insured Name TAN KAI WEN CALVIN Insured NRIC Contact No. (Mobile) 92245335 Contact No. (Home) 68926879 Contact No. (Office Number SJX3004T TP Vehicle Number Claim Description Claim Description SJX3004T / SKF4362S ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes Yes Preferred Repair Option Preferred Workshop, Name unknown Office Received Repoir Taken By ROSLI WAHAB Workshop Repairer Address 2 JALAN TECK WHYE Singapore address Post Code Driver Insurer Co	The Same of the Sa		Contact No.(Office)			Contact No.(Home)
Address 1 Address Type Singapore address Post Code Address 4 Unit No. 02-212 Does he own a Singapore Registered Car? Declaration Breathalyser or Blood Test Reading? Any injury? Yes No Any injury? Yes No Modification History Claim 001 OD-MX New Claim Type * OD-MX V Insured Name TAN KAI WEN CALVIN Insured NRIC Contact No.(Mobile) 92245335 Contact No.(Home) 68926879 Contact No.(Offic Email Address Ol Vehicle Number Six3004T Ty Vehicle Number Claim Description Six3004T / SKF43625 ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes Preferred Repair Option Preferred Workshop, Name unknown GIA report Date Received RoostI WAHAB Workshop Repairer Total Loss but R.			Address 2	JALAN	TECK WHYE	Address 3
Declaration Declaration		BLK 102 #02 212		Singap	ore address	Post Code
Does he own a Singapore Registered car? Declaration Breathalyser or Blood Test Reading? Modification History Claim 001 OD-MX New Claim 7ype * OD-MX V Insured Name TAN KAI WEN CALVIN Insured NRIC Contact No.(Mobile) 92245335 Contact No.(Home) 68926879 Contact No.(Office Number SJX3004T TP Vehicle Number Claim Description SJX3004T / SKF4362S ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes Preferred Repair Option Preferred Workshop, Name unknown V GIA report Date Registered I5/03/2021 12:02 Claim Close Date Report Taken By ROSLI WAHAB Workshop Repairer Declaration SJX3004T SJX3004T Date Received Report Taken By ROSLI WAHAB Workshop Repairer Declaration SJX3004T SIX No. SJX3004T Preferred Workshop, Name unknown V GIA report Date Received Report Taken By ROSLI WAHAB Workshop Repairer		07.747	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1.550.00		
Registered car? Pecclaration Breathalyser or Blood Test Reading? Modification History Claim 001 OD-MX New Claim 001 OD-MX New Claim Type * OD-MX Y Insured Name TAN KAI WEN CALVIN Insured NRIC Contact No. (Mobile) 92245335 Contact No. (Home) 68926879 Contact No. (Office Number SJK3004T TP Vehicle Number Claim Description SJK3004T/ SKF43625 ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes Y Preferred Repair Option Preferred Workshop, Name unknown Y GIA report Date Registered 15/03/2021 12:02 Claim Close Date Total Loss but Report Taken By ROSLI WAHAB Workshop Repairer			Delver Mahisla No	E1430	041	Driver Insurer Company
Breathalyser or Blood Test Reading? Any Injury? Yes No Modification History Claim 001 OD-MX New Claim 17pe * OD-MX V Insured Name TAN KAI WEN CALVIN Insured NRIC Contact No.(Mobile) 92245335 Contact No.(Home) 68926879 Contact No.(Office Email Address OI Vehicle Number \$3iX3004T TP Vehicle Number Claim Description \$5iX3004T / SKF4362S ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes Preferred Repair Option Preferred Workshop, Name unknown GIA report Date Registered I5/03/2021 12:02 Claim Close Date Report Taken By ROSLI WAHAB Workshop Repairer Total Loss but Ro		Yes No	Driver Venicle No.	51K30	041	
Breathalyser or Blood Test Reading? Any Injury? Yes No Modification History Claim 001 OD-MX New Claim Type * OD-MX V Insured Name TAN KAI WEN CALVIN Insured NRIC Contact No.(Mobile) 92245335 Contact No.(Home) 68926879 Contact No.(Office Email Address OI Vehicle Number SJK3004T TP Vehicle Number Claim Description SJK3004T / SKF43625 ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes Preferred Repair Option Preferred Workshop, Name unknown GIA report Date Registered I5/03/2021 12:02 Claim Close Date ROOT Taken By ROSLI WAHAB Workshop Repairer Total Loss but Root Any Injury? Yes No Insured Name TAN KAI WEN CALVIN Insured NRIC Contact No.(Office S8926879 Contact No.(Office S1K3004T TP Vehicle Number SJK3004T TP Vehicle Number SJK3004						
Modification History Claim 001 OD-MX New Claim Type * OD-MX V Insured Name TAN KAI WEN CALVIN Insured NRIC Contact No.(Mobile) 92245335 Contact No.(Home) 68926879 Contact No.(Office Email Address OI Vehicle Number SJK3004T TP Vehicle Number Claim Description SJK3004T / SKF4362S ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes V Preferred Repair Option Preferred Workshop, Name unknown V GIA report Date Registered 15/03/2021 12:02 Claim Close Date Report Taken By ROSLI WAHAB Workshop Repairer Total Loss but Ro			South the Value Count (Inc.)		No.	
Claim Type * OD-MX Y Insured Name TAN KAI WEN CALVIN Insured NRIC Contact No.(Mobile) 92245335 Contact No.(Home) 68926879 Contact No.(Office Number SJK3004T TP Vehicle Number Claim Description SJK3004T / SKF4362S ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes Y Preferred Repair Option Preferred Workshop, Name unknown Y GIA report Date Registered 15/03/2021 12:02 Claim Close Date Total Loss but Report Taken By ROSLI WAHAB Workshop Repairer		0 mg	Any injury?	Yes	s & No	
Claim Type * OD-MX Y Insured Name TAN KAI WEN CALVIN Insured NRIC Contact No.(Mobile) 92245335 Contact No.(Home) 68926879 Contact No.(Office Number SJK3004T TP Vehicle Number Claim Description SJK3004T / SKF4362S ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes Y Preferred Repair Option Preferred Workshop, Name unknown Y GIA report Date Registered 15/03/2021 12:02 Claim Close Date Total Loss but Report Taken By ROSLI WAHAB Workshop Repairer	3)					
Claim Type * OD-MX Y Insured Name TAN KAI WEN CALVIN Insured NRIC Contact No.(Mobile) 92245335 Contact No.(Home) 68926879 Contact No.(Office Number SJK3004T TP Vehicle Number Claim Description SJK3004T / SKF4362S ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes Y Preferred Repair Option Preferred Workshop, Name unknown Y GIA report Date Registered 15/03/2021 12:02 Claim Close Date Total Loss but Report Taken By ROSLI WAHAB Workshop Repairer	M. difference Michael					
Claim Type * OD-MX	Modification History					
Claim Type * OD-MX	Claim 001 OD-MX Nev	w				
Contact No. (Mobile) Email Address Contact No. (Mobile) Email Address Contact No. (Home) Claim Description SJK3004T / SKF4362S ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes Preferred Repair Option Date Registered 15/03/2021 12:02 ROSLI WAHAB ROSLI WAHAB Contact No. (Office Substitution of Preferred Sepair Option SJK3004T SKF4362S ON 12 Mar 2021 Name of Preferred SJK3004T SKF4362S ON 12 Mar 2021 Preferred Repair Option Preferred Workshop, Name unknown GIA report Date Received Total Loss but Received	200					
Contact No. (Mobile) Email Address Contact No. (Mobile) Email Address Contact No. (Home) SJK3004T TP Vehicle Number Claim Description SJK3004T / SKF4362S ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes Preferred Repair Option Date Registered 15/03/2021 12:02 ROSLI WAHAB ROSLI WAHAB Contact No. (Office Structure) SJK3004T Not at Fault Preferred Workshop, Name unknown Freferred Workshop, Name unknown Olate Received Total Loss but Research Total Lo						Toward NIDIC
Contact No.(Mobile) 92245335 Contact No.(Mobile) 92245335 Contact No.(Mobile) 92245335 TP Vehicle Number Claim Description SJK3004T / SKF4362S ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes Preferred Repair Option Preferred Workshop, Name unknown GIA report Date Registered 15/03/2021 12:02 Claim Close Date Report Taken By ROSLI WAHAB Workshop Repairer Total Loss but Reserved.	Claim Type *	OD-MX 🗸	Insured Name	TAN	(AI WEN CALVIN	
Email Address Claim Description SJK3004T / SKF4362S ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes Preferred Repair Option Preferred Workshop, Name unknown GIA report Date Registered 15/03/2021 12:02 Claim Close Date Workshop Repairer Total Loss but Residuation Workshop Repairer	Contact No.(Mobile)	92245335	Contact No.(Home)	6892	6879	Contact No.(Office)
Claim Description SJK3004T / SKF4362S ON 12 Mar 2021 Preferred Workshop Contact No. Require Finalisation Yes Preferred Repair Option Preferred Workshop, Name unknown GIA report Date Registered 15/03/2021 12:02 Claim Close Date Date Received Report Taken By ROSLI WAHAB Workshop Repairer Total Loss but Received Total Loss bu	Email Address		OI Vehicle Number	SJK30	004T	TP Vehicle Number
Preferred Workshop Contact No. Require Finalisation Yes Preferend Repair Option Date Registered I5/03/2021 12:02 ROSLI WAHAB Insured Liability * Not at Fault Preferred Workshop, Name unknown Olaim Close Date Workshop Repairer Total Loss but Registered Total Loss but Registered Not at Fault Preferred Workshop, Name unknown Olaim Close Date Workshop Repairer Total Loss but Registered	Claim Description	SJK3004T / SKF4362S ON 12 Mar 2021				Name of Preferred Works
Require Finalisation Yes Preferered Repair Option Preferred Workshop, Name unknown GIA report Claim Close Date Report Taken By ROSLI WAHAB Workshop Repairer Total Loss but Reserved	Preferred Workshop Contact		Insured Liability *	Not a	at Fault	
Require Finalisation Yes Preference Report Finalisation Yes Date Received Date Registered 15/03/2021 12:02 Claim Close Date Date Received Report Taken By ROSLI WAHAB Workshop Repairer Total Loss but R.				Prefe	erred Workshop. Name unknown	GIA report
Date Registered 15/03/2021 12:02 Claim close Date Report Taken By ROSLI WAHAB Workshop Repairer Total Loss but Ro		1.03		Freie	The transcript frame amount	
Report Taken By ROSLI WAHAB WORSHOP REPORTS	Date Registered	15/03/2021 12:02				
Print AK letter	Report Taken By	ROSLI WAHAB	Workshop Repairer			Total Loss but Repaired
	Print AK letter					
	FILL AN ICCCC					
Save Submit	- Frinc Alt Tetter			-	Culomit	
Attachment	FIRE AN ACCO			Save	Submit	

Claim Handling(accident reporting Claim Task 001 OD-MX)

Accident No.

MT/1124325

Claim No.

001

Last Doc. Received

Yes ○ No

Path *

Upload Date

15/03/2021 12:18

Choose File	No file chosen
Choose File	No file chosen
Choose File	No file choser

	Category *	Confid	Urgen		
Clear	Please Select	~	NO	~	Normal
Clear	Please Select	~	NO	~	Normal
Clear	Please Select	~	NO	~	Normal
Clear	Please Select	~	NO	~	Normal
Clear	Please Select	~	NO	~	Normal
Clear	Please Select	~	NO	~	Normal

Message Read					
▽ Attachment	List		0		
Attachment	Uploaded By/Date	Category	7	Urgency	Description
(tr	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:18	Photos		Normal	Photos 2021-3-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:18	Photos		Normal	Photos 2021-3-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BÜKIT MERAH)) on 15 Mar 2021 12:18	Photos		Normal	Photos 2021-3-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:18	Photos		Normal	Photos 2021-3-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:17	Photos		Normal	Photos 2021-3-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:17	Photos		Normal	Photos 2021-3-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:17	Photos		Normal	Photos 2021-3-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:17	Photos		Normal	Photos 2021-3-15
1	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:17	Photos		Normal	Photos 2021-3-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:17	Photos		Normal	Photos 2021-3-15
J	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:16	Photos		Normal	Photos 2021-3-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:16	Photos		Normal	Photos 2021-3-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:16	Photos		Normal	Photos 2021-3-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:16	Photos		Normal	Photos 2021-3-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:16	Photos		Normal	Photos 2021-3-15
-6	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:16	Photos		Normal	Photos 2021-3-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:12	Photos		Normal	Photos 2021-3-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:12	Photos		Normal	Photos 2021-3-15
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:12	Photos		Normal	Photos 2021-3-15
All The same	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:12	NRIC/ Driving License	Υ	Normal	NRIC/ Driving License 2021-
2.2	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:12	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2021-
1	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE S ERVICES (BUKIT MERAH)) on 15 Mar 2021 12:12	SAS		Normal	SAS 2021-3-15
(7)					

Uploaded By/Date

Folder Date

Sou

Display in New Window Scan and uploading

eBaoTech GeneralClaim Hello, NAC_BUKIT_MERAH_800676 Change Language Change Password Log Out My Desktop **Policy Query** Notice of Loss Policy No. 12/03/2021 12:21 Date of Accident Vehicle No.(For Motor) SJK3004T Certificate Number Search Certificate Number Policyholder Name Policyholder NRIC Vehicle No. Insured Object Commence Date Policy No. Select Product Cover Type Expiry Date TAN KAI WEN CALVIN drivo CLASSIC 5105324226-• S9541682I GPC SJK3004T SJK3004T 15/10/2020 14/10/2021 02

Continue