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GeneralClaim

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Policy Query

Policy No.		Date of Accident	27/08/2020 13:50							
Vehicle No.(For Motor)	SLU4213Z	Certificate Number								
Search										
Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
☐	5114938167	5114938167-000003	MEGA CAR LEASING	53322925A	GFM	drivo CLASSIC	SLU4213Z	SLU4213Z	18/12/2019	17/12/2020
Continue										

▼ Policy Information

Policy No.	5114938167	Policyholder Name	MEGA CAR LEASING	Policyholder NRIC	53322925A
Certificate No.	5114938167-000003				
Address	BLK 152 #04-326 SERANGOON NORTH AVENUE 1 SINGAPORE 550152				
Product Name	FLEET MASTER INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	16/12/2019	Effective Date	18/12/2019 00:00	Expiry Date	17/12/2020 23:59
Excess Type	Per Accident	All Claims Excess			
Third Party Excess	1500	Own damage Excess	2000	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	1500	Outside Singapore TP Excess			Young/Inexperience Driver Excess
Agent	ASSURE (SINGAPORE) PTE. LTD	Agent Tel.	68038751	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	BLK 152 #04-326	Address 2	SERANGOON NORTH AVENUE 1	Address 3	SINGAPORE 550152
Address 4		Address Type	Singapore address	Post Code	550152
Unit No.		Related Policy Number	5117409565		

▶ Insured Object: 5114938167-000003

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
▼ Certificate Endorsements					
Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content

Continue

Cancel

Claim Handling

Accident MT/1101417

Policy No.	5114938167	Vehicle No.	SLU4213Z	GST Registration No.	
Certificate No.	5114938167-000003				
Policyholder Name	MEGA CAR LEASING			Policyholder NRIC	53322925A
Product Code	FLEET MASTER INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	86994326	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes

▼ Accident Details

Report Date	27/08/2020 16:47	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	27/08/2020	Time of Accident hh:mm	13:50	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	JUNC TAMPINES RD & HOUGANG AVE 3				

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	2,000.00	TP Standard Excess	1,500.00		
YIED OD Excess	0.00	YIED TP Excess		Driver is Covered?	
Additional Excess	0				
Total OD Excess Applicable	2000.00	Total TP Excess Applicable			

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History	27/08/2020 16:48:46 System changed GST Status Verified from No to Yes		

▼ Policyholder Mailing Address

Address 1	BLK 152 #04-326	Address 2	SERANGOON NORTH AVENUE 1	Address 3	SINGAPORE 550152
Address 4		Address Type	Singapore address	Post Code	550152
Unit No.		Related Policy Number	5117409565		

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	LOW BENG HWEE	Driver NRIC	S7630751B	Driver DOB	20/09/1976
Register Date of Driver License	24/09/2013	Driver Age	43	Driving Experience	6
Contact No.(Mobile)	94884523	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 121A	Address 2	EDGE DALE PLAINS	Address 3	PUNGGOL EDGE
Address 4	SINGAPORE 821121	Address Type	Singapore address	Post Code	821121
Unit No.	12-249				
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
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Modification History

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	MEGA CAR LEASING	Insured NRIC	53322925A
Contact No.(Mobile)		Contact No.(Home)		Contact No.(Office)	NIL
Email Address		OI Vehicle Number	SLU4213Z	TP Vehicle Number	SKG4292E
Claimant Type Claimant *	Please Select	Type of Benefit *	Please Select		
Claimant Name *		Claimant NRIC *			
Claimant Address					
Claim Description	SLU4213Z / SKG4292E ON 27 Aug 2020				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	27/08/2020 16:49	Claim Close Date		Date Received	27/08/2020 00:00
Report Taken By	Jackson				

☒ Print AK letter

Save Submit

Attachment

Accident No.	MT/1101417	Claim No.	001
Last Doc. Received	☒ Yes ☐ No	Upload Date	27/08/2020 16:51

Path *	Category *	Confidential	Urgency *	Description *
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Browse... Clear	Please Select	☐ NO	Normal	
Browse... Clear	Please Select	☐ NO	Normal	
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