

eBaoTech

GeneralClaim

Hello, NAC\_PAYA\_UBI\_800601

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## Policy Query

|                                         |                                       |                    |                                               |                   |         |               |             |                |               |             |
|-----------------------------------------|---------------------------------------|--------------------|-----------------------------------------------|-------------------|---------|---------------|-------------|----------------|---------------|-------------|
| Policy No.                              | <input type="text"/>                  | Date of Accident   | <input type="text" value="26/05/2020 20:45"/> |                   |         |               |             |                |               |             |
| Vehicle No.(For Motor)                  | <input type="text" value="SLX9488Z"/> | 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"/>                   | 5112088753                            |                    | ANG CHEE WEE                                  | S8603474C         | GPC     | drivo CLASSIC | SLX9488Z    | SLX9488Z       | 05/09/2019    | 04/09/2020  |
| <input type="button" value="Continue"/> |                                       |                    |                                               |                   |         |               |             |                |               |             |

## Claim Handling

Accident MT/1093341

|                                         |                                                               |                               |                                                               |                        |                          |
|-----------------------------------------|---------------------------------------------------------------|-------------------------------|---------------------------------------------------------------|------------------------|--------------------------|
| Policy No.                              | 5112088753                                                    | Vehicle No.                   | SLX9488Z                                                      | GST Registration No.   |                          |
| Certificate No.                         |                                                               |                               |                                                               |                        |                          |
| Policyholder Name                       | ANG CHEE WEE                                                  |                               |                                                               | Policyholder NRIC      | S8603474C                |
| 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                | Liability repudiated                                          | eCode                  |                          |
| KFK                                     | <input checked="" type="radio"/> No <input type="radio"/> Yes | TCA                           | <input checked="" type="radio"/> No <input type="radio"/> Yes | eCode Reason           |                          |
| NCD Protection                          | Yes                                                           | NCD Entitlement(%)            | 50                                                            | Private Hire           | Not available            |
| <b>▼ Accident Details</b>               |                                                               |                               |                                                               |                        |                          |
| Report Date                             | 28/05/2020 14:31                                              | Accident Report Within 24 hrs | Yes                                                           | Accident Type          | Collision - Head to Rear |
| Date of Accident                        | 26/05/2020                                                    | Time of Accident hh:mm        | 20:00                                                         | Country of Accident    | Singapore                |
| Reporting Centre                        | administrator                                                 | Orange Force                  | No                                                            | ICM No.                |                          |
| Accident Location                       | ALONG SIMS WAY TOWARDS SIMS AVENUE JUNCTION                   |                               |                                                               |                        |                          |
| <b>▼ Total Excess Applicable</b>        |                                                               |                               |                                                               |                        |                          |
| Excess Type                             | Per Accident                                                  | Windscreen Excess             | 100.00                                                        |                        |                          |
| OD Standard Excess                      | 600.00                                                        | TP Standard Excess            | 0.00                                                          |                        |                          |
| YIED OD Excess                          |                                                               | YIED TP Excess                |                                                               | Driver is Covered?     | Not Applicable           |
| Additional Excess                       | 0                                                             |                               |                                                               |                        |                          |
| Total OD Excess Applicable              | 600.00                                                        | Total TP Excess Applicable    | 0.00                                                          |                        |                          |
| <b>▼ Benefits</b>                       |                                                               |                               |                                                               |                        |                          |
| <b>▼ GST Registered Information</b>     |                                                               |                               |                                                               |                        |                          |
| GST Registered                          | No                                                            | GST Registration Date         |                                                               |                        |                          |
| GST Registration No.                    |                                                               | GST Status Verified           | Yes                                                           |                        |                          |
| Modification History                    |                                                               |                               |                                                               |                        |                          |
| <b>▼ Policyholder Mailing Address</b>   |                                                               |                               |                                                               |                        |                          |
| Address 1                               | BLK 103 #09-428                                               | Address 2                     | BEDOK RESERVOIR ROAD                                          | Address 3              | SINGAPORE 470103         |
| Address 4                               |                                                               | Address Type                  | Singapore address                                             | Post Code              | 470103                   |
| Unit No.                                |                                                               | Related Policy Number         | 5112088753                                                    |                        |                          |
| <b>▼ OI Driver Info</b>                 |                                                               |                               |                                                               |                        |                          |
| Driver Name                             |                                                               | Driver Type                   |                                                               | Driver DOB             |                          |
| Unnamed driver Name                     |                                                               | Driver NRIC                   |                                                               | Driving Experience     |                          |
| Register Date of Driver License         |                                                               | Driver Age                    |                                                               | Contact No.(Home)      |                          |
| Contact No.(Mobile)                     |                                                               | Contact No.(Office)           |                                                               | Address 3              |                          |
| Address 1                               |                                                               | Address 2                     |                                                               | Post Code              |                          |
| Address 4                               |                                                               | Address Type                  | Foreign address                                               |                        |                          |
| Unit No.                                |                                                               |                               |                                                               |                        |                          |
| Does he own a Singapore Registered car? | <input type="radio"/> Yes <input checked="" type="radio"/> No | Driver Vehicle No.            |                                                               | Driver Insurer Company |                          |
| Modification History                    |                                                               |                               |                                                               |                        |                          |

Claim 004 **New**

|                                                     |                                    |                         |                                  |                            |                  |
|-----------------------------------------------------|------------------------------------|-------------------------|----------------------------------|----------------------------|------------------|
| Claim Type *                                        | OD-MX                              | Insured Name            | ANG CHEE WEE                     | Insured NRIC               | S8603474C        |
| Contact No.(Mobile)                                 | 93838857                           | Contact No.(Home)       | 67442379                         | Contact No.(Office)        |                  |
| Email Address                                       |                                    | OI Vehicle Number       | SLX9488Z                         | TP Vehicle Number          | SKE2286Y         |
| Claimant Type Claimant Type *                       | Please Select                      | Type of Benefit *       | Please Select                    |                            |                  |
| Claimant Name *                                     |                                    | Claimant NRIC *         |                                  |                            |                  |
| Claimant Address                                    |                                    |                         |                                  |                            |                  |
| Claim Description                                   | SLX9488Z / SKE2286Y ON 26 May 2020 |                         |                                  |                            |                  |
| Preferred Workshop Contact No.                      |                                    | Insured Liability *     | Fully at Fault                   | Name of Preferred Workshop |                  |
| Require Finalisation                                | Yes                                | Preferred Repair Option | Preferred Workshop, Name unknown | GIA report                 | Received         |
| Date Registered                                     | 28/08/2020 16:08                   | Claim Close Date        |                                  | Date Received              | 28/08/2020 00:00 |
| Report Taken By                                     | Jackson                            |                         |                                  |                            |                  |
| <input checked="" type="checkbox"/> Print AK letter |                                    |                         |                                  |                            |                  |

Save Submit

## Attachment

|                                       |                                                               |               |                             |                                 |               |
|---------------------------------------|---------------------------------------------------------------|---------------|-----------------------------|---------------------------------|---------------|
| Accident No.                          | MT/1093341                                                    | Claim No.     | 004                         |                                 |               |
| Last Doc. Received                    | <input checked="" type="radio"/> Yes <input type="radio"/> No | Upload Date   | 28/08/2020 16:09            |                                 |               |
| Path *                                |                                                               | Category *    | Confidential                | Urgency *                       | Description * |
| Browse... Clear                       |                                                               | Please Select | <input type="checkbox"/> NO | <input type="checkbox"/> Normal |               |
| Browse... Clear                       |                                                               | Please Select | <input type="checkbox"/> NO | <input type="checkbox"/> Normal |               |
| Browse... Clear                       |                                                               | Please Select | <input type="checkbox"/> NO | <input type="checkbox"/> Normal |               |
| Browse... Clear                       |                                                               | Please Select | <input type="checkbox"/> NO | <input type="checkbox"/> Normal |               |
| Browse... Clear                       |                                                               | Please Select | <input type="checkbox"/> NO | <input type="checkbox"/> Normal |               |
| Browse... Clear                       |                                                               | Please Select | <input type="checkbox"/> NO | <input type="checkbox"/> Normal |               |
| Browse... Clear                       |                                                               | Please Select | <input type="checkbox"/> NO | <input type="checkbox"/> Normal |               |
| <input type="checkbox"/> Send Message |                                                               |               |                             |                                 |               |
| <b>▼ Attachment List</b>              |                                                               |               |                             |                                 |               |
| Attachment                            | Uploaded By/Date                                              | Category      | Urgency                     | Description                     | Msg Sent?     |

(CO)

| <br><br><br><br><br><br><br><br><br><br><br><br><br> | NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICE) on 28 Aug 2020 16:09 | NRIC/ Driving License | Y | Normal             | NRIC/ Driving License 2020-8-28 |
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| Video List                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                               |                       |   |                    |                                 |
| Uploaded By/Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Folder Date                                                                   | File Name             |   | Source             | Action                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                               | Display in New Window |   | Scan and uploading |                                 |