

Claim Handling

Accident MT/1102181

Policy No.	5114589833	Vehicle No.	GBE4678T	GST Registration No.	
Certificate No.					
Policyholder Name	HOME SPRAY COATING &PAINTING SRV			Policyholder NRIC	52847976L
Product Code	COMMERCIAL VEHICLE INSURA	Cover Type	Comprehensive	Loading	0
Contact No.(Mobile)	90085314	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

▼ Accident Details

Report Date	03/09/2020 16:44	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	03/09/2020	Time of Accident hh:mm	10:45	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	BARTLEY ROAD EAST BEFORE BARTLEY VIADUCT				

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	600.00	TP Standard Excess	0.00		
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?	Covered
Additional Excess					
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	03/09/2020 16:47:58 System changed GST Status Verified from No to Yes		

▼ Policyholder Mailing Address

Address 1	BLK 225 #03-201	Address 2	CHOA CHU KANG CENTRAL	Address 3	SINGAPORE 680225
Address 4		Address Type	Singapore address	Post Code	680225
Unit No.	03-201	Related Policy Number	5114589833		

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	ISLAM NURUL	Driver NRIC	F8309456R	Driver DOB	02/07/1976
Register Date of Driver License	06/06/2018	Driver Age	44	Driving Experience	2
Contact No.(Mobile)	90085314	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 225 #03-201	Address 2	CHOA CHU KANG CENTRAL	Address 3	SINGAPORE 680225
Address 4		Address Type	Foreign address	Post Code	680225
Unit No.	03-201				
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.	GBE4678T	Driver Insurer Company	NTUC

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	HOME SPRAY COATING &PAINT	Insured NRIC	52847976L		
Contact No.(Mobile)		Contact No. (Home)		Contact No. (Office)	96819211		
Email Address		OI Vehicle Number	GBE4678T	TP Vehicle Number	CB8271K		
Claim Description	GBE4678T / CB8271K ON 3 Sept 2020				Name of Preferred Workshop		
Preferred Workshop		Insured Liability	Partially at Fault				
Report No.	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received		
Date Registered				Claim Close Date	03/09/2020 16:52	Date Received	03/09/2020 00:
Report Taken By	ROS LI WAHAB						
☒ Print AK letter							

Save Submit

Attachment

▼

Accident No.	MT/1102181	Claim No.	001
Last Doc. Received	☒ Yes ☐ No	Upload Date	03/09/2020 16:53

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Attachment List

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 Video List

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