

Claim Handling

Accident MT/1102406

Policy No.	5109963890-01	Vehicle No.	SFS858X	GST Registrati
Certificate No.				
Policyholder Name	POON LEE HENG			Policyholder NI
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading
Contact No.(Mobile)	91056638	Contact No.(Office)		Contact No.(H
Email Address		Special Remark		eCode
KFK	☒ No ☐ Yes	TCA	☐ No ☐ Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	50	Private Hire

▼ Accident Details

Report Date	05/09/2020 17:44	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	04/09/2020	Time of Accident hh:mm	21:15	Country of Acc
Reporting Centre		Orange Force		ICM No.
Accident Location	MACPHERSON RD TWDS PAYA LEBAR RD			

▼ 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 Cover
Additional Excess	0			
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	32 HAPPY AVENUE NORTH	Address 2	SINGAPORE 369776	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5109963890-01	

▼ OI Driver Info

Driver Name	POON LEE HENG	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	S1535873D	Driver DOB
Register Date of Driver License	27/03/1985	Driver Age	58	Driving Experie
Contact No.(Mobile)	91056638	Contact No.(Office)		Contact No.(H
Address 1	32 HAPPY AVENUE NORTH	Address 2	SINGAPORE 369776	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.				
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.		Driver Insurer

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	☒ Yes ☐ No
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Modification History

Claim 001New

Claim Type *

Contact No.(Mobile)

Email Address

Claim Description

Preferred Workshop

Contact No. Finalisation

Date Registered

Report Taken By

☒ Print AK letter

OD-MX

91056638

THOMASPOON.IPHONE@GMAIL

SFS858X / FBN994J ON 4 Sept 2020

Insured Name

Contact No. (Home)

OI Vehicle Number

Insured Liability

Preferred Repair Option

GIA report

Claim Close Date

PO

NII

SF:

Not at Fault

Preferred Workshop, Name unknown

Received

05/09/2020 17:46

SHAN HUI

Attachment

Accident No.	MT/1102406	Claim No.	001
Last Doc. Received	☒ Yes ☐ No	Upload Date	05/09/2020 17:47

Path *		Category *		Confider
Choose File	No file chosen	Clear	Please Select ▾	NO
Choose File	No file chosen	Clear	Please Select ▾	NO
Choose File	No file chosen	Clear	Please Select ▾	NO
Choose File	No file chosen	Clear	Please Select ▾	NO
Choose File	No file chosen	Clear	Please Select ▾	NO
Choose File	No file chosen	Clear	Please Select ▾	NO
Choose File	No file chosen	Clear	Please Select ▾	NO
Message Read				

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 05 Sep 2020 17:47	NRIC/ Driving License	Y	Normal	NRIC/ Dri
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 05 Sep 2020 17:46	Photos		Normal	Pt
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 05 Sep 2020 17:46	Photos		Normal	Pt

 Video List

Uploaded By/Date	Folder Date	File Name	
		Display in New Window Scan and uploading	