eBao Tech		GeneralClaim									
Hello, NAC_PAYA_UBI_80			PPAR ISSUED		• Change	e Languag	e • Char	nge Password	, Log Out		
My Desktop	Policy Query										
Notice of Loss	Policy No.				Date of Accident			10/09/2020 16:30			
	Vehicle No.(For Motor)	SGT707G			Certificate Number						
				1	Search						
	Select Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date	
	O 5115692660		VIVEK PARASHER	S2658450G	GPC	drivo CLASSIC	SGT707G	SGT707G	24/01/2020	23/01/2021	
				i C	Continue						

Policy No.	5115692660	Policyholder	VIVEK PARAS	HER	Policyholder	S2658450G	
Certificate		Name			NRIC	320301300	
Address	32 BUKIT BATOK STREET 21 #	#16-09 THE DEV	V SINGAPORE 6	559637			
Product Name	PRIVATE CAR INSURANCE	Plan			Group Policy Flag	N	
Policy ssue Date	21/01/2020	Effective Date	24/01/2020 0	0:00	Expiry Date	23/01/2021	23:59
Excess Type	Per Accident	All Claims Excess					
Third Party Excess	0	Own damage Excess	600		Windscreen Excess	100	
Additional Excess	0	OS Premium	0				
Outside Singapore OD Excess	600	Outside Singapore TP Excess	0			Your	ng/Inexperience Driver Excess
Agent	SININS AGENCY PTE. LTD.	Agent Tel.	69503050		GST Flag	Υ	
Co- nsurance Flag	No						
Open Policy Info Certificate							
info							
Policyh	older Mailing Address						
ddress 1	32 BUKIT BATOK STREE	T 21 Addres	ss 2 #	16-09	,	Address 3	SINGAPORE 659637
ddress 4		Addres	s Type Si	ingapore address	F.	Post Code	659637
Jnit No.	16-09	Relate Numbe	d Policy er 5	115692660			
Insure	d Object: SGT707G						
T Endors							
	ements						
Sequen		nt E	ndorsement Ty	/pe	Endorsement	Status	Endorsement Content Thank you for giving us the opportunity to serve you. We
Sequen		nt E	ndorsement Ty	/pe	Endorsement	Status	Thank you for giving us the opportunity to serve you. We confirm that from 24 Jan 2020, the following amendment(s) is/are made to this policy: The Policy is extended to include Daily transposallowance and is subject to Endorsement M9 attached. In view of this amendment, an additional premium of \$53.50 (inclusive of
Sequen			nformation		Endorsement		Thank you for giving us the opportunity to serve you. We confirm that from 24 Jan 2020, the following amendment(s) is/are made to this policy: The Policy is extended to include Daily transpo allowance and is subject to Endorsement M9 attached. In view of this amendment, an additional premium of \$53.50 (inclusive of GST) is payable under your policy Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque in favour of "NTUC Income" with your name and policy number indicated on the
	ce Date of Endorseme	Basic I	nformation				Thank you for giving us the opportunity to serve you. We confirm that from 24 Jan 2020, the following amendment(s) is/are made to this policy: The Policy is extended to include Daily transposallowance and is subject to Endorsement M9 attached. In view of this amendment, an additional premium of \$53.50 (inclusive of GST) is payable under your policy Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque in favour of "NTUC Income" with your name and

Continue Cancel

Accident MT/1103047						
Policy No.	5115692660	Vehicle No.	SGT707G		GST Registration No.	
Certificate No.						
Policyholder Name	VIVEK PARASHER				Policyholder NRIC	S2658450G
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC		Loading	0
Contact No.(Mobile)	94244946	Contact No.(Office)	0		Contact No.(Home)	0
mail Address		Special Remark			eCode	No. V
FK	No ○ Yes	TCA	No		eCode Reason	
VCD Protection	Yes	NCD Entitlement(%)	50		Private Hire	No
Accident Details						
teport Date	11/09/2020 15:04	Accident Report Within 24 hrs	Yes		Accident Type	Collision - Head to Rear
Date of Accident	10/09/2020	Time of Accident hh:mm	16:30		Country of Accident	
leporting Centre		Orange Force	10.30			Singapore
ccident Location	UPP BUKIT TIMAH RD TWDS DUNEARN RD	Orange Force			ICM No.	
Total Excess Applicable						
xcess Type	Per Accident	Windscreen Excess	100.00			
D Standard Excess	600.00	TP Standard Excess	0.00			
IED OD Excess	0.00	YIED TP Excess	0.00		Driver is Covered?	Covered
dditional Excess	0					
otal OD Excess Applicable	600.00	Total TP Excess Applicable	0.00			
→ Benefits						
overage			Sum Insured			
ransport Allowance			9999999.99			
GST Registered Inform						
ST Registered	No		GST Registration Date			
ST Registration No.			GST Status Verified		Yes	
odification History						
Policyholder Mailing Ac	ddress					
Idress 1	32 BUKIT BATOK STREET 21	Address 2	#16-09		Address 3	SINGAPORE 659637
ddress 4		Address Type	Singapore address		Post Code	659637
nit No.	16-09	Related Policy Number	5115692660		roat code	039037
OI Driver Info		and the same of th	3113032000			
river Name	VIVEK PARASHER	Driver Type	Main Driver			
nnamed driver Name		Driver NRIC	S2658450G		Driver DOB	05/06/1965
egister Date of Driver License	01/10/1996	Driver Age	55		Driving Experience	23
ontact No.(Mobile)	94244946	Contact No.(Office)	0		Contact No.(Home)	0
ddress 1	32 BUKIT BATOK STREET 21	Address 2				
ddress 4			Classes		Address 3	SINGAPORE 659637
nit No.	15.00	Address Type	Singapore address		Post Code	659637
oes he own a Singapore	16-09					
egistered car?	○ Yes No	Driver Vehicle No.			Driver Insurer Company	
claration						
eathalyser or Blood Test	0 mg	Any Internal	○ Yes ⑥ No			
eading?	5 mg	Any injury?	O Yes (No			
odification History						
rumcation ristory						
Claim 001 New						
aim Type *	OD-MX	Insured Name	VIVEK PARASHER		Insured NRIC	S2658450G
ntact No.(Mobile)		Contact No.(Home)	NIL		Contact No.(Office)	63616555
nail Address		OI Vehicle Number	SGT707G		TP Vehicle Number	GBJ2903E
simant Type Claimant Type *	Please Select	Type of Benefit *	Please Select		Tamas number	30127032
imant Name *		Claimant NRIC *				
imant Address	<u>>></u>	-Aminum MNIC-			1	
im Description	SGT707G / GBJ2903E ON 10 Sept 2020				1	
eferred Workshop Contact	SOLVOYO / GONZOUSE ON 10 Sept 2020				Name of Preferred Workshop	
A CONTRACTOR OF THE PARTY OF TH		Insured Liability *	Not at Fault			3
quire Finalisation	Yes	Preferered Repair Option	Preferred Workshop, Name unknow	vn 🗸	GIA report	Received
te Registered	11/09/2020 15:06	Claim Close Date			Date Received	11/09/2020 00:00
port Taken By	Jackson					
Print AK letter						
			Save Submit			
Attachment						
7						
cident No.	MT/1103047	Claim No.	001			
st Doc. Received	● Yes ○ No	Upload Date	11/09/2020 15:08			
	Path *		Category *		Confidential Urgen	CV * December 1
		Browse	Clear Please Select	V		cy * Description
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		Browse	Clear Please Select	V		
						<u> </u>
		Browse	Clear Please Select	~	NO V Normal	V

