

Claim Handling

Accident MT/1104405

Policy No.	5109910175-01	Vehicle No.	SLG9083Y	GST Registration No.	
Certificate No.	5109910175-01-000008				
Policyholder Name	OSCARS LEASING PRIVATE LIMITED			Policyholder NRIC	201431292
Product Code	FLEET MASTER INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	82188800	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
KFK	☐ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes

▼ Accident Details

Report Date	24/09/2020 11:42	Accident Report Within 24 hrs	Yes	Accident Type	Others
Date of Accident	11/09/2020	Time of Accident hh:mm	22:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	AIRPORT BLVD(CHANGI FLYOVER)TWDS PIE/TUAS				

▼ 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	0.00	Driver is Covered?	Covered
Additional Excess	0.00				
Total OD Excess Applicable	2,000.00	Total TP Excess Applicable	1,500.00		

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

▼ Policyholder Mailing Address

Address 1	50 EAST COAST ROAD	Address 2	#01-90 ROXY SQUARE	Address 3	SINGAPORE
Address 4		Address Type	Singapore address	Post Code	428769
Unit No.		Related Policy Number	5109909289-01		

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	RASIDAH BINTI YAYAH	Driver NRIC	S6835867A	Driver DOB	25/09/1961
Register Date of Driver License	24/06/2009	Driver Age	51	Driving Experience	11
Contact No.(Mobile)	91374377	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 676A	Address 2	PUNGGOL DRIVE	Address 3	WATERWAY
Address 4	SINGAPORE 821676	Address Type	Singapore address	Post Code	821676
Unit No.	#07-700				
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 OD-MD

New

Claim Type *	OD-MD	Insured Name	OSCARS LEASING PRIVATE LIM	In: NF
Contact No.(Mobile)		Contact No. (Home)		Co Nc (O
Email Address		OI Vehicle Number	SLG9083Y	TP Ve Nu
Claim Description	SLG9083Y ON 11 Sept 2020			Na Pri Wk
Preferred Workshop		Insured Liability	Fully at Fault	
Repair No. Finalisation	Yes	Preferred Repair Option	income to assign workshop	GIA report
Date Registered	24/09/2020 11:54	Claim Close Date		Da Re
Report Taken By	ROSLINDA	Workshop Repairer		To bu Re
☒ Print AK letter				OT Ex Co by Wk

Save Submit

Attachment

▼

Accident No.	MT/1104405	Claim No.	001
Last Doc. Received	☒ Yes ☐ No	Upload Date	24/09/2020 00:00

Path *

Choose File No file chosen

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Category *

Clear

Please Select

Confidential

Urgency *

Normal

Clear

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Confidential

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Confidential

Normal

Choose File

No file chosen

Choose File

No file chosen

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No file chosen

Message Read

Clear

Please Select

NO

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Normal

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Sep 2020 11:52	Photos		Normal	Photos 2020-9-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Sep 2020 11:52	Photos		Normal	Photos 2020-9-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Sep 2020 11:52	Photos		Normal	Photos 2020-9-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Sep 2020 11:52	Photos		Normal	Photos 2020-9-24
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Sep 2020 11:50	Photos		Normal	Photos 2020-9-24
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Sep 2020 11:50	Photos		Normal	Photos 2020-9-24
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Sep 2020 11:50	Photos		Normal	Photos 2020-9-24

Video List

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