

eBaoTech

GeneralClaim

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Policy Query

Policy No. Date of Accident

Vehicle No. (For Motor) Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
☐	5116990441		CHUA WAH LENG (CAI HUALONG)	S8009997E	GPC	drivo CLASSIC	SFE4994H	SFE4994H	10/04/2020	09/04/2021

 Policy Information

Policy No.	5116990441	Policyholder Name	CHUA WAH LENG (CAI HUALON)	Policyholder NRIC	S8009997E
Certificate No.					
Address	BLK 29 #11-231 TELOK BLANGAH RISE SINGAPORE 090029				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	30/03/2020	Effective Date	10/04/2020 00:00	Expiry Date	09/04/2021 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	Young/Inexperience Driver Excess	
Agent	WTT INSURANCE AGENCIES PT	Agent Tel.	62965445	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

 Policyholder Mailing Address

Address 1	BLK 29 #11-231	Address 2	TELOK BLANGAH RISE	Address 3	SINGAPORE 090029
Address 4		Address Type	Singapore address	Post Code	090029
Unit No.		Related Policy Number	5116990441		

 Insured Object: SFE4994H

 Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
Continue Cancel				

Claim Handling

Accident MT/1104465

Policy No.	S116990441	Vehicle No.	SFE4994H	GST Registration No.	
Certificate No.					
Policyholder Name	CHUA WAH LENG (CAI HUALONG)			Policyholder NRIC	S8009997E
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	92713001	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	Nc
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	No
▼ Accident Details					
Report Date	24/09/2020 16:05	Accident Report Within 24 hrs	Yes	Accident Type	Chain Collision
Date of Accident	23/09/2020	Time of Accident hh:mm	17:40	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	PIE (CHANGI) AFTER KIM KEAT LINK EXIT				
▼ 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	0				
Total OD Excess Applicable	600.00	Total TP Excess Applicable	0.00		
▼ Benefits					

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

▼ Policyholder Mailing Address			
Address 1	BLK 29 #11-231	Address 2	TELOK BLANGAH RISE
Address 4		Address Type	Singapore address
Unit No.		Related Policy Number	S116990441
Address 3	SINGAPORE 090029	Post Code	090029

▼ OI Driver Info			
Driver Name	CHUA WAH LENG	Driver Type	Main Driver
Unnamed driver Name		Driver NRIC	S8009997E
Register Date of Driver License	24/11/2003	Driver Age	40
Contact No.(Mobile)	92713001	Contact No.(Office)	0
Address 1	BLK 249	Address 2	JURONG EAST STREET 24
Address 4		Address Type	Singapore address
Unit No.	09-92		
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

Modification History

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	CHUA WAH LENG (CAI HUALONG)	Insured NRIC	S8009997E	
Contact No.(Mobile)	92713001	Contact No.(Home)	63971080	Contact No.(Office)		
Email Address		OI Vehicle Number	SFE4994H	TP Vehicle Number	SLE6790U	
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select			
Claimant Name *	>>	Claimant NRIC *				
Claimant Address						
Claim Description	SFE4994H / SLE6790U ON 23 Sept 2020				Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault			
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received	
Date Registered	24/09/2020 16:07	Claim Close Date		Date Received	24/09/2020 00:00	
Report Taken By	Jackson					
☒ Print AK letter						

Save Submit

Attachment

Accident No.		MT/1104465	Claim No.		001
Last Doc. Received		☒ Yes ☐ No	Upload Date		24/09/2020 16:08
Path *		Category *	Confidential	Urgency *	Description *
	Browse... Clear	Please Select	NO	Normal	
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Message Read

Attachment List

Attachment

Uploaded By/Date

Category

Urgency

Description

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NRIC/ Driving License 2020-9-24

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