Claim Handling

Task Transfer | Exit

LOS SAL SUB

Accident MT/1105030

Policy No.	5095529566-02	Vehicle No.	GBG8057Z	GST Registration No.	200207318D
Certificate No.					
Policyholder Name	MULTI WAYS EQUIPMENT PTE. LTD.			Policyholder NRIC	200207318D
Product Code	COMMERCIAL VEHICLE INSURA	Cover Type	Comprehensive	Loading	0
Contact No.(Mobile)	96925428	Contact No.(Office)	62875252	Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	◉ No ○ Yes	TCA	◉ No ○ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	15	Private Hire	No

Accident Details

Report Date	30/09/2020 10:03	Accident Report Within 24 hrs	Yes	Accident Type	Damaged whilst parked
Date of Accident	28/09/2020	Time of Accident hh:mm	17:15	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTI	Orange Force	No	ICM No.	
Accident Location	AT 3E GUL CIRCLE				

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	Yes	GST Registration Date	02/09/2002
GST Registration No.	200207318D	GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	3E GUL CIRCLE	Address 2	SINGAPORE 629633	Address 3	
Address 4		Address Type	Singapore address	Post Code	629633
Unit No.		Related Policy Number	5118923233		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	LIM KIM LEE	Driver NRIC	S1709613C	Driver DOB	30/11/1965
Register Date of Driver License	11/01/1989	Driver Age	54	Driving Experience	31
Contact No.(Mobile)	96925428	Contact No.(Office)	62875252	Contact No.(Home)	
Address 1	BLK 122 #05-1043	Address 2	BEDOK RESERVOIR ROAD	Address 3	EUNOS SPRING
Address 4	SINGAPORE 470122	Address Type	Foreign address	Post Code	470122
Unit No.	05-1043				
Does he own a Singapore Registered car?	○ Yes ◉ No	Driver Vehicle No.	GBG8057Z	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	○ Yes ◉ No
Modification History			

Investigation

Claim 001 OD-MD

Claim Case Officer Yap Chee Ling

Claim Type	OD-MD	Insured Name	MULTI WAYS EQUIPMENT PTE.	Insured NRIC	20020731
Contact No.(Mobile)		Contact No. (Home)		Contact No. (Office)	96332592
Email Address		OI Vehicle Number	GBG8057Z	TP Vehicle Number	-
Claim Description	GBG8057Z / - ON 28 Sept 2020			Name of Preferred Workshop	

Preferred Workshop	Contact No.	Secure Finalisation	Yes	Prefererred Repair Option	Preferred Workshop, Name unknown	Insured Liability GIA report	Not at Fault	Received

Date Registered	30/09/2020 10:17	Claim Close Date		Date Received	07/10/20
Report Taken By	ROSLI WAHAB	Workshop Repairer		Total Loss but Repaired	
☑ Print AK letter				OD Excess Collected by Workshop	
Modification History	05/10/2020 09:53 s069588 Modify Claim Type(OD-MX-->OD-MD)				

Special Claim Creation Approval

Approval		Reason	
Remarks			

damage assessment | Activity Handling | Attachment

Vehicle Info

Vehicle Make	NISSAN	Vehicle Model	CABSTAR	Engine Capcity	1.72
Date of Registration	03/11/2017	Classis No.	JN1SC2F24Z0860262		
Towing Required *	(•) Yes ( ) No	Vehicle in IDAC *	(•) Yes ( ) No	Parallel Import *	( ) Yes (•) No
Type of Tender *	Own Damage	Assessor Name *	ROSLI WAHAB	Survey Current Status	
IDAC/Workshop Name	NATIONAL ASSESSMENT CENTF	IDAC/Workshop Location	51 UBI AVENUE 1 #01-25 PAYA		
Windscreen Parts & Labour Cost		Total Loss *	(•) Yes ( ) No		
Market Value($) *	47,000.00	Scrape Value($) *	33,000.00	Economical Repair Value($) *	

Remark *: POTENTIAL TOTAL LOSS AND THE VEHICLE IS AT IDAC PAYA UBI

Remark for Supplementary:

Damage Listing

Find a Part

- root
  - Not Applicable
  - ABS
  - ABSORBER
  - ACCELERATOR
  - ACTUATOR
  - ADVERTISEMENT STICKER
  - AIR BAG
  - AIR BLOWER
  - AIR BOX
  - AIR CHAMBER BOX
  - AIR CLEANER
  - AIR COMPRESSOR
  - AIR CON
  - AIR CON (VAN)
  - AIR COOLER
  - AIR DISTRIBUTOR
  - AIR FILTER
  - AIR FLOW
  - AIR GRILLE
  - AIR HORN

No.	Part No.	Description	Qty *	Repair Co
1	32200101	NUMBER PLATE (FRONT)	1	Replace

Save Submit