

Claim Handling

Accident MT/1101984

Policy No.	5113531735	Vehicle No.	FBE561Y	GST Registrati
Certificate No.	5113531735-000056			
Policyholder Name	ALORIDE PTE. LTD.			Policyholder NI
Product Code	FLEET MASTER INSURANCE	Cover Type	Third Party	Loading
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(H
Email Address		Special Remark		eCode
KFK	☒ No ☐ Yes	TCA	☐ No ☐ Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	0	Private Hire

▼ Accident Details

Report Date	02/09/2020 05:44	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	31/08/2020	Time of Accident hh:mm	20:00	Country of Acc
Reporting Centre		Orange Force		ICM No.
Accident Location	AT PAYA LEBAR ROAD			

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess		
OD Standard Excess		TP Standard Excess	1,500.00	
YIED OD Excess		YIED TP Excess		Driver is Cover
Additional Excess				
Total OD Excess Applicable	0.00	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	31 ALEXANDRA ROAD	Address 2	#05-05 ALESSANDREA	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	04-08	Related Policy Number	5113531735	

▼ OI Driver Info

Driver Name		Driver Type		Driver DOB
Unnamed driver Name		Driver NRIC		Driving Exper
Register Date of Driver License		Driver Age		Contact No.(H
Contact No.(Mobile)		Contact No.(Office)		Address 3
Address 1		Address 2		Post Code
Address 4		Address Type	Foreign address	
Unit No.				
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.		Driver Insurer

Modification History

Claim 002

New

Claim Type *	OD-MX	Insured Name	ALI
Contact No.(Mobile)		Contact No. (Home)	
Email Address		OI Vehicle Number	FBI
Claim Description	FBE561Y / NBT8001 ON 31 Aug 2020		
Preferred Workshop		Insured Liability	Fully at Fault
Contact No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered		GIA report	Received
Report Taken By		Claim Close Date	01/10/2020 14:50
			ROSLI WAHAB

☒ Print AK letter

Save

Submit

Attachment

▼

Accident No.
Last Doc. Received

MT/1101984
☒ Yes ☐ No

Claim No.
Upload Date

002
01/10/2020 15:18

Path *

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▼ Attachment List

Attachment	Uploaded By/Date	Category		Urgency	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 01 Oct 2020 15:18	SAS		Normal	S
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 01 Oct 2020 14:50	NRIC/ Driving License	Y	Normal	NRIC/ Driv
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 01 Oct 2020 14:50	NRIC/ Driving License	Y	Normal	NRIC/ Driv
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 01 Oct 2020 14:50	NRIC/ Driving License	Y	Normal	NRIC/ Driv
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 01 Oct 2020 14:50	NRIC/ Driving License	Y	Normal	NRIC/ Driv
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 01 Oct 2020 14:50	Photos		Normal	Ph
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 01 Oct 2020 14:50	Photos		Normal	Ph

▼ Video List

Uploaded By/Date	Folder Date	File Name	
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