Hello, NAC_PAYA_UBI_80060	01						· Chang	e Languag	e Chan	ge Password	· Log Ou
My Desktop	Policy Query										
Notice of Loss	Policy N	۱o.				Date of Accident			05/10/2020 1		
	Vehicle	No.(For Motor)	GBB6716U			Certificate Number					
						Search					
	Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5114983279		YOU PIN RENOVATION	53406346B	GCV	Third Party, Fire & Theft	GBB6716U	GBB6716U	18/12/2019	31/03/2021

Policy No.	5114983279	Policyholder Name	YOU PIN RENOVATION	Policyholder NRIC	53406346B		
ertificate							
Address	BLK 20 #06-756 LORONG 7 TOA	PAYOH KIM	KEAT PALM SINGAPORE 310020)			
Product Name	COMMERCIAL VEHICLE INSURAI	Plan	n		N		
Policy issue Date	18/12/2019	Effective Date	18/12/2019 00:00	Expiry Date	31/03/2021	23:59	
Excess Type	Per Accident	All Claims Excess					
Third Party Excess	0	Own damage Excess	0	Windscreen Excess	0		
Additional Excess		OS Premium	0				
Outside Singapore OD Excess		Outside Singapore TP Excess			Young/Inexperience Driver Excess		
Agent	SGML PTE. LTD.	Agent Tel.	86682223	GST Flag	Y		
Co- insurance Flag Open Policy Info	No						
Certificate							
Info							
▼ Policyh	older Mailing Address						
▼ Policyh	BLK 20 #06-756	Addre	ess 2 LORONG 7 TOA P	PAYOH	Address 3	KIM KEAT PALM	
Address 1 Address 4	BLK 20 #06-756 SINGAPORE 310020	Addre	ess Type Singapore addres		Address 3 Post Code	KIM KEAT PALM 310020	
Policyh Address 1 Address 4 Unit No.	BLK 20 #06-756 SINGAPORE 310020 06-756	Addre	ess Type Singapore addres ed Policy 5114983279				
Policyh Address 1 Address 4 Unit No.	BLK 20 #06-756 SINGAPORE 310020	Addre Relat	ess Type Singapore addres ed Policy 5114983279				
Policyh Address 1 Address 4 Unit No.	BLK 20 #06-756 SINGAPORE 310020 06-756 d Object: GBB6716U	Addre Relat	ess Type Singapore addres ed Policy 5114983279				
Policyh Address 1 Address 4 Unit No. Insure	BLK 20 #06-756 SINGAPORE 310020 06-756 d Object: GBB6716U ements	Addre Relat Numl	ess Type Singapore addres ed Policy 5114983279		Post Code	Management of the second secon	

Continue Cancel

Claim Handling Accident MT/1105589 5114983279 Vehicle No. GBB6716U GST Registration No. Policy No. Certificate No Policyholder Name YOU PIN RENOVATION Policyholder NRIC 53406346B COMMERCIAL VEHICLE INSURA Product Code Third Party, Fire & Theft Cover Type Loading 0 Contact No.(Mobile) 91212511 Contact No.(Office) Contact No.(Home) Special Remark No V **Email Address** eCode KFK No ○ Yes TCA No ○ Yes eCode Reason NCD Protection NCD Entitlement(%) Private Hire Accident Details 05/10/2020 16:53 Report Date Accident Report Within 24 hrs Accident Type Collision - Major Minor Road 05/10/2020 Date of Accident Time of Accident hh:mm 14:10 Country of Accident Singapore Reporting Centre Orange Force ICM No. Accident Location 5070 AMK IND PARK 2 ▼ Total Excess Applicable YIED OD Excess 0.00 YIED TP Excess Driver is Covered? Total OD Excess Applicable 0.00 Total TP Excess Applicable GST Registered Information GST Registered GST Registration Date GST Registration No. GST Status Verified Modification History 05/10/2020 16:55:21 System changed GST Status Verified from No to Yes Address 1 BLK 20 #06-756 Address 2 LORONG 7 TOA PAYOH Address 3 KIM KEAT PALM SINGAPORE 310020 Address Type Singapore address 310020 Address 4 Post Code 06-756 Related Policy Number 5114983279 OI Driver Info Driver Name Unnamed Driver Driver Type Unnamed Driver S2746728H Unnamed driver Name FAN CHENGLIANG Driver NRIC Driver DOB 03/11/1966 Register Date of Driver License 27/06/2016 53 Driver Age **Driving Experience** Contact No.(Mobile) 91212511 Contact No.(Office) Contact No.(Home) LORONG 7 TOA PAYOH KIM KEAT PALM Address 1 Address 3 Address 4 SINGAPORE 310020 Address Type Singapore address Post Code 310020 06-756 O Yes No Breathalyser or Blood Test Reading? ● Yes ○ No Modification History Claim 001 New Insured NRIC Claim Type * OD-MX V YOU PIN RENOVATION 53406346B Insured Name Contact No.(Mobile) Contact No.(Home) NIL Contact No.(Office) GBB6716U Email Address Claimant Type Claimant Type * Please Selec V Type of Benefit * Please Select V Claimant Name * Claimant NRIC + Name of Preferred Workshop Claim Description GBB6716U / YM6470Y ON 5 Oct 2020 Preferred Workshop Contact No. Not at Fault ~ Insured Liability * Preferred Workshop, Name unknown GIA report Received Require Finalisation V Preferered Repair Option 05/10/2020 00:00 05/10/2020 16:56 Date Registered Claim Close Date Date Received Report Taken By Jackson Print AK letter Save Submit Attachment MT/1105589 Claim No. 001 05/10/2020 17:22 Last Doc. Received ● Yes ○ No Upload Date Path * Category * Confidential Urgency * Description * V NO Browse... Clear Please Select V Normal Browse... | Clear | Please Select V NO V Browse... Clear Please Select V NO V Browse... Clear Please Select V V NO ∨ Normal Browse... Clear Please Select V Normal Browse... Clear Please Select V NO

Message Kess								Send Messag
Attachment	Upload	ed By/Date	Category	9	Urgency		Description	Msg Sent? (CO)
ALT TO	NAC_PAYA_UBI_800601(NATI CES) on 05	ONAL ASSESSMENT CENTRE SERVI Oct 2020 17:22	NRIC/ Driving License	Y	Normal	NRIC/ E	Priving License 2020-10-5	(66)
10		ONAL ASSESSMENT CENTRE SERVI Oct 2020 17:21	SAS		Normal		SAS 2020-10-5	
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		ONAL ASSESSMENT CENTRE SERVI Oct 2020 17:20	Photos		Normal		Photos 2020-10-5	
	NAC_PAYA_UBI_800601(NATION CES) on 05	ONAL ASSESSMENT CENTRE SERVI Oct 2020 16:56	Photos		Normal		Photos 2020-10-5	
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		I_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 05 Oct 2020 16:56		Normal		Photos 2020-10-5		
Video List	Uploaded By/Date	Folder Date	FI	le Name		9	Source	A