

Claim Handling

Accident MT/1106296

Policy No.	5110151413-01	Vehicle No.	FBP7805R	GST Registrati
Certificate No.				
Policyholder Name	KUAN CHI SENG			Policyholder NI
Product Code	MOTORCYCLE INSURANCE	Cover Type	Third Party, Fire & Theft	Loading
Contact No.(Mobile)	81092414	Contact No.(Office)		Contact No.(H
Email Address		Special Remark		eCode
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	10	Private Hire

▼ Accident Details

Report Date	12/10/2020 14:01	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	06/10/2020	Time of Accident hh:mm	16:50	Country of Acc
Reporting Centre		Orange Force		ICM No.
Accident Location	ALONG LAVENDER STREET			

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess		
OD Standard Excess	0.00	TP Standard Excess	0.00	
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Cover
Additional Excess				
Total OD Excess Applicable	0.00	Total TP Excess Applicable	0.00	

▼ Benefits

▼ GST Registered Information

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

▼ Policyholder Mailing Address

Address 1	BLK 521 #05-335	Address 2	WOODLANDS DRIVE 14	Address 3
Address 4	SINGAPORE 730521	Address Type	Singapore address	Post Code
Unit No.	05-335	Related Policy Number	5110151413-01	

▼ OI Driver Info

Driver Name	KUAN CHI SENG	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	S7775202A	Driver DOB
Register Date of Driver License	22/11/2007	Driver Age	43	Driving Experie
Contact No.(Mobile)	81092414	Contact No.(Office)		Contact No.(H
Address 1	BLK 521 #05-335	Address 2	WOODLANDS DRIVE 14	Address 3
Address 4	SINGAPORE 730521	Address Type	Singapore address	Post Code
Unit No.	05-335			
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.	FBP7805R	Driver Insurer

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	☐ Yes ☒ No
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Modification History

Claim 001New

Claim Type *

Contact No.(Mobile)

Email Address

Claim Description

Preferred Workshop

Contact No. Finalisation

Date Registered

Report Taken By

☒ Print AK letter

OD-MX

Insured Name

KU

81092414

Contact No. (Home)

CSK6960@GMAIL.COM

OI Vehicle Number

FBI

FBP7805R / GBB6762K ON 6 Oct 2020

Insured Liability

Not at Fault

Preferred Repair Option

Preferred Workshop, Name unknown

GIA report

Received

12/10/2020 14:04

Claim Close Date

ROS LI WAHAB

Attachment

Accident No.	MT/1106296	Claim No.	001
Last Doc. Received	☒ Yes ☐ No	Upload Date	12/10/2020 14:05

Path *		Category *		Confider
Choose File	No file chosen	Clear	Please Select	NO
Choose File	No file chosen	Clear	Please Select	NO
Choose File	No file chosen	Clear	Please Select	NO
Choose File	No file chosen	Clear	Please Select	NO
Choose File	No file chosen	Clear	Please Select	NO
Choose File	No file chosen	Clear	Please Select	NO
Message Read				

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 12 Oct 2020 14:05	Photos		Normal	Phc
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 12 Oct 2020 14:05	Photos		Normal	Phc
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 12 Oct 2020 14:05	Photos		Normal	Phc
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 12 Oct 2020 14:04	Photos		Normal	Phc
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 12 Oct 2020 14:04	NRIC/ Driving License	Y	Normal	NRIC/ Driv
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 12 Oct 2020 14:04	SAS		Normal	S/

 Video List

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