

Claim Handling

Accident MT/1106303

Policy No.	5105252672-01	Vehicle No.	SLU3780J	GST Registrati
Certificate No.				
Policyholder Name	YONG CHEE SENG			Policyholder NI
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading
Contact No.(Mobile)	97698661	Contact No.(Office)		Contact No.(H
Email Address		Special Remark		eCode
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	20	Private Hire
▼ Accident Details				
Report Date	12/10/2020 14:21	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	11/10/2020	Time of Accident hh:mm	16:45	Country of Acc
Reporting Centre		Orange Force		ICM No.
Accident Location	ALONG BIDEFORD ROAD			
▼ Total Excess Applicable				
Excess Type	Per Accident	Windscreen Excess	100.00	
OD Standard Excess	2,000.00	TP Standard Excess	1,500.00	
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Cover
Additional Excess	0			
Total OD Excess Applicable	2000.00	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	BLK 52 #13-84	Address 2	TELOK BLANGAH DRIVE	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5105252672-01	
▼ OI Driver Info				
Driver Name	Yong Chee Seng	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	S1829934H	Driver DOB
Register Date of Driver License	17/05/1985	Driver Age	53	Driving Experie
Contact No.(Mobile)	97698661	Contact No.(Office)		Contact No.(H
Address 1	BLK 52 #13-84	Address 2	TELOK BLANGAH DRIVE	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.	SLU3780J	Driver Insurer
Declaration				
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Modification History				
Claim 001 New				

Claim Type *	OD-MX	Insured Name	YO
Contact No.(Mobile)		Contact No. (Home)	62
Email Address	ixoye@singnet.com.sg	OI Vehicle Number	SLI
Claim Description	SLU3780J / SLP6053G ON 11 Oct 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			
<input checked="" type="checkbox"/> Print AK letter			

12/10/2020 14:27

Claim Close Date

ROS LI WAHAB

Attachment

▼

Accident No.

MT/1106303

Claim No.

001

Last Doc. Received

☒ Yes

☐ No

Upload Date

12/10/2020 14:27

Path *

Category *

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▼ Attachment List

Attachment	Uploaded By/Date	Category		Urgency	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Oct 2020 14:27	Photos		Normal	Phc
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Oct 2020 14:27	Photos		Normal	Phc
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Oct 2020 14:27	Photos		Normal	Phc
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Oct 2020 14:27	Photos		Normal	Phc
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Oct 2020 14:27	NRIC/ Driving License	Y	Normal	NRIC/ Driv
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Oct 2020 14:27	SAS		Normal	S/

▼ Video List

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