

Claim Handling

Accident MT/1106932

Policy No.	5106550819-01	Vehicle No.	SKZ7792J	GST Registrati
Certificate No.				
Policyholder Name	HO CHUI SHENG			Policyholder NI
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading
Contact No.(Mobile)	97902244	Contact No.(Office)		Contact No.(Ho
Email Address		Special Remark		eCode
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	50	Private Hire

▼ Accident Details

Report Date	17/10/2020 14:19	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	17/10/2020	Time of Accident hh:mm	01:40	Country of Acc
Reporting Centre		Orange Force		ICM No.
Accident Location	ALONG CLIVE ST			

▼ 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 Cover
Additional Excess	0			
Total OD Excess Applicable	600.00	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 115 #11-19	Address 2	RIVERVALE WALK	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5106550819-01	

▼ OI Driver Info

Driver Name	HO CHUI SHENG	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	S8026233G	Driver DOB
Register Date of Driver License	13/08/2004	Driver Age	40	Driving Experie
Contact No.(Mobile)	97902244	Contact No.(Office)		Contact No.(Ho
Address 1	BLK 115 #11-19	Address 2	RIVERVALE WALK	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.		Driver Insurer

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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Modification History

Claim 001

New

Claim Type *	OD-MX	Insured Name	HO
Contact No.(Mobile)	97902244	Contact No. (Home)	67
Email Address		OI Vehicle Number	SK
Claim Description	SKZ7792J / SKC7928G ON 17 Oct 2020		
Preferred Workshop		Insured Liability	Not at Fault
Contact No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered		GIA report	Received
Report Taken By		Claim Close Date	17/10/2020 14:21
			SHAN HUI
<input checked="" type="checkbox"/> Print AK letter			

Attachment

▼

Accident No.

MT/1106932

Claim No.

001

Last Doc. Received

☒ Yes

☐ No

Upload Date

17/10/2020 14:22

Path *

Category *

Confider

Choose FileNo file chosen

Choose FileNo file chosen

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Choose FileNo file chosen

Choose FileNo file chosen

Message Read

Clear

Clear

Clear

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Please Select

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NO

NO

NO

NO

NO

NO

▼ Attachment List

Attachment	Uploaded By/Date	Category		Urgency	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Oct 2020 14:22	SAS		Normal	S/
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Oct 2020 14:22	NRIC/ Driving License	Y	Normal	NRIC/ Driv
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Oct 2020 14:22	Photos		Normal	Phc
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Oct 2020 14:22	Photos		Normal	Phc
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Oct 2020 14:22	Photos		Normal	Phc
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Oct 2020 14:22	Photos		Normal	Phc
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Oct 2020 14:21	Photos		Normal	Phc
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Oct 2020 14:21	Photos		Normal	Phc

▼ Video List

Uploaded By/Date	Folder Date	File Name	
<div>Display in New WindowScan and uploading</div>			