

Claim Handling

Accident MT/1107205

Policy No.	5099669454-02	Vehicle No.	SLN2206U	GST Registration No.	
Certificate No.					
Policyholder Name	SYED ABUBAKAR BIN ABDUL KARIM			Policyholder NRIC	
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	
Contact No.(Mobile)	98334460	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	

▼ Accident Details

Report Date	20/10/2020 14:33	Accident Report Within 24 hrs	Yes	Accident Type	
Date of Accident	19/10/2020	Time of Accident hh:mm	12:00	Country of Accident	
Reporting Centre		Orange Force		ICM No.	
Accident Location	T-JUNCTION OF DEMPSEY 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 Covered?	
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 86 #04-07	Address 2	DAWSON ROAD	Address 3	
Address 4	SINGAPORE 141086	Address Type	Singapore address	Post Code	
Unit No.		Related Policy Number	5099669454-02		

▼ OI Driver Info

Driver Name	SYED MOHAMED MUSTAFA BIN SYED ABUBAKAR	Driver Type	Named Driver		
Unnamed driver Name		Driver NRIC	S8001624G	Driver DOB	
Register Date of Driver License	21/11/2006	Driver Age	40	Driving Experience	
Contact No.(Mobile)	98334460	Contact No.(Office)		Contact No.(Home)	
Address 1		Address 2		Address 3	
Address 4		Address Type	Foreign address	Post Code	
Unit No.					
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.	SLN2206U	Driver Insurer Comp	

Declaration

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

Claim 001New

Claim Type *	OD-MX	Insured Name	SYED ABI
Contact No.(Mobile)	98334460	Contact No. (Home)	6220333
Email Address	SMMUSTAFA24@GMAIL.COM	OI Vehicle Number	SLN2206
Claim Description	SLN2206U / SMV4958R ON 19 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
			20/10/2020 15:00
		Claim Close Date	

☒ Print AK letter

Save

Submit

Attachment

▼

Accident No. MT/1107205

Claim No. 001

Last Doc. Received ☒ Yes ☐ No

Upload Date 20/10/2020 15:00

Path *

Category *

Confidential

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Message Read

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▼ Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 20 Oct 2020 15:00	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 20 Oct 2020 15:00	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 20 Oct 2020 15:00	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 20 Oct 2020 15:00	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 20 Oct 2020 15:00	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 20 Oct 2020 15:00	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 20 Oct 2020 15:00	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 20 Oct 2020 15:00	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 20 Oct 2020 15:00	NRIC/ Driving License	Y	Normal	NRIC/ Driving Lic
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 20 Oct 2020 15:00	SAS		Normal	SAS 202

▼ Video List

Uploaded By/Date	Folder Date	File Name	
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