

Claim Handling

Accident MT/1107988

Policy No.	5110865912-01	Vehicle No.	SMM5879B	GST Registration No.	
Certificate No.					
Policyholder Name	CHONG SHOW WAH (ZHANG SHAOHUA)			Policyholder NRIC	S7770330F
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	91127523	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	No
▼ Accident Details					
Report Date	27/10/2020 12:46	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to
Date of Accident	25/10/2020	Time of Accident hh:mm	16:15	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	CASHEW RD SLIP RD TURNING LEFT INTO PETIR RD				
▼ 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 Covered?	Covered
Additional Excess	0.00				
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	82 HILLVIEW AVENUE	Address 2	#09-09 CHANTILLY RISE	Address 3	SINGAPORE 66951
Address 4		Address Type	Singapore address	Post Code	669581
Unit No.		Related Policy Number	5110865912-01		
▼ OI Driver Info					
Driver Name	CHONG SHOW WAH (ZHANG SHAOHUA)	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S7770330F	Driver DOB	29/06/1977
Register Date of Driver License	27/03/1996	Driver Age	43	Driving Experience	24
Contact No.(Mobile)	91127523	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	82 HILLVIEW AVENUE	Address 2	CHANTILLY RISE	Address 3	SINGAPORE 66951
Address 4		Address Type	Singapore address	Post Code	669581
Unit No.	#09-09				
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.		Driver Insurer Company	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	☒ Yes ☐ No		
Modification History					

Claim 001 OD-MX New

Claim Type *	OD-MX	Insured Name	CHONG SHOW WAH (ZHANG SHAOHUA)	Insured NRIC		
Contact No.(Mobile)	91127523	Contact No. (Home)	66692166	Contact No. (Office)		
Email Address	gnrr@hotmail.com	Vehicle Number	SMM5879B	TP Vehicle Number		
Claim Description	SMM5879B / SLE2516Y ON 25 Oct 2020				Name of Preferred Workshop	
Preferred Workshop		Insured Liability	Not at Fault			
Contact No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received	
Date Registered		Claim Close Date	27/10/2020 15:03	Date Received		
Report Taken By	ROSILINDA	Workshop Repairer		Total Loss but Repaired		
☒ Print AK letter						

Save Submit

Attachment

10/27/2020

Claim Handling(accident reporting Claim Task 001 OD-MX)

Last Doc. Received

Yes

No

Upload Date

27/10/2020 00:00

Path *

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Message Read

Category *

Confidential

Urgency *

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Attachment List

Attachment

Uploaded By/Date

Category

Urgency

Description

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 27 Oct 2020 15:03

NRIC/ Driving License

Y

Normal

NRIC/ Driving License 2020-10-27

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 27 Oct 2020 15:03

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SAS 2020-10-27

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 27 Oct 2020 15:03

Photos

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Photos 2020-10-27

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 27 Oct 2020 15:03

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NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 27 Oct 2020 15:03

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