

Claim Handling

Accident MT/1108784

Policy No.	5114999544	Vehicle No.	SGP5646L	GST Registration No.
Certificate No.				
Policyholder Name	THNG HONG PING			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading
Contact No.(Mobile)	96770977	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input 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	03/11/2020 09:59	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	30/10/2020	Time of Accident hh:mm	11:15	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	ALONG CHURCH STREET			

▼ 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?
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 55 #08-138	Address 2	HAVELOCK ROAD	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	08-138	Related Policy Number	5114999544	

▼ OI Driver Info

Driver Name	THNG HONG PING	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	S1785953F	Driver DOB
Register Date of Driver License	01/01/2002	Driver Age	53	Driving Experience
Contact No.(Mobile)	96770977	Contact No.(Office)		Contact No.(Home)
Address 1	BLK 55 #08-138	Address 2	HAVELOCK ROAD	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	08-138			
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.	SGP5646L	Driver Insurer Comp

Declaration

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

Claim 001 New

Claim Type *	OD-MX	Insured Name	THNG HC
Contact No.(Mobile)	96770977	Contact No. (Home)	
Email Address		OI Vehicle Number	SGP5646
Claim Description	SGP5646L / SLQ7430P ON 30 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
			03/11/2020 10:04
		Claim Close Date	

☒ Print AK letter

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Submit

Attachment

▼

Accident No. MT/1108784

Claim No. 001

Last Doc. Received ☒ Yes ☐ No

Upload Date 03/11/2020 10:05

Path *

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No file chosen

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No file chosen

Message Read

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Category *

Confidential

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NO

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NO

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NO

▼ Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 03 Nov 2020 10:05	NRIC/ Driving License	Y	Normal	NRIC/ Driving Li
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 03 Nov 2020 10:05	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 03 Nov 2020 10:05	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 03 Nov 2020 10:05	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 03 Nov 2020 10:04	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 03 Nov 2020 10:04	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 03 Nov 2020 10:04	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 03 Nov 2020 10:04	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 03 Nov 2020 10:04	SAS		Normal	SAS 20

▼ Video List

Uploaded By/Date	Folder Date	File Name	
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