

eBaoTech

GeneralClaim

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Policy Query

Policy No. Date of Accident

Vehicle No.(For Motor) Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5118666046		KOH JIA WEN	S9732155H	GPC	drivo CLASSIC	SJF5142R	SJF5142R	16/08/2020	15/08/2021

Policy Information

Policy No.	5118666046	Policyholder Name	KOH JIA WEN	Policyholder NRIC	S9732155H
Certificate No.					
Address	34 SEGAR ROAD #18-28 BLOSSOM RESIDENCES SINGAPORE 677723				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	16/08/2020	Effective Date	16/08/2020 00:00	Expiry Date	15/08/2021 23:59
Excess Type	Per Accident	All Claims Excess			
Third Party Excess	1500	Own damage Excess	2000	Windscreen Excess	100
Additional Excess	0	OS Premium	339.76		
Outside Singapore OD Excess	2000	Outside Singapore TP Excess	1500		Young/Inexperience Driver Excess
Agent	ALL INS AGENCY PTE. LTD.	Agent Tel.	FAX 64514549	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

Policyholder Mailing Address

Address 1	34 SEGAR ROAD	Address 2	#18-28 BLOSSOM RESIDENCES	Address 3	SINGAPORE 677723
Address 4		Address Type	Singapore address	Post Code	677723
Unit No.	18-28	Related Policy Number	5118666046		

Insured Object: SJF5142R

Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
1	16/08/2020 00:00	NCD Endorsement	Endorsement Take Effective	<p>Thank you for giving us the opportunity to serve you. We have confirmed that the NCD entitlement from your previous insurer is 10% and not 30% as declared in your policy application. In view of the reduction of NCD, an additional premium of \$466.72 (inclusive of GST) is payable under your present policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque in favour of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash, credit card or NETS.</p> <p>Thank you for giving us the opportunity to serve you. We confirm that from 14 Oct 2020, the following amendment(s) is/are made to this policy: In view of this amendment, an additional premium of \$346.55 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque in favour of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash, credit card or NETS.</p> <p>Thank you for giving us the opportunity to serve you. We confirm that from 20 Oct 2020, the following amendment(s) is/are</p>
2	14/10/2020 00:00	Basic Information Endorsement	Entry Rejected	

Claim Handling

The premium on this policy has not been collected.

Accident MT/1108711

Policy No.	5118666046	Vehicle No.	SJF5142R	GST Registration No.	
Certificate No.					
Policyholder Name	KOH JIA WEN			Policyholder NRIC	S9732155H
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	82184306	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
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(%)	10	Private Hire	Yes

▼ Accident Details

Report Date	02/11/2020 16:46	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	01/11/2020	Time of Accident hh:mm	15:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	YIO CHU KANG RD TWDS HOUGANG AVE 9				

▼ 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?	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	34 SEGAR ROAD	Address 2	#18-28 BLOSSOM RESIDENCES	Address 3	SINGAPORE 677723
Address 4		Address Type	Singapore address	Post Code	677723
Unit No.	18-28	Related Policy Number	5118666046		

▼ OI Driver Info

Driver Name	koh jia wen	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	s9732155h	Driver DOB	19/09/1997
Register Date of Driver License	30/03/2016	Driver Age	23	Driving Experience	4
Contact No.(Mobile)	82184306	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	34 SEGAR ROAD	Address 2	BLOSSOM RESIDENCES	Address 3	SINGAPORE 677723
Address 4		Address Type	Singapore address	Post Code	677723
Unit No.	18-28				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

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	KOH JIA WEN	Insured NRIC	S9732155H
Contact No.(Mobile)	82184306	Contact No.(Office)	NIL	Contact No.(Office)	
Email Address	KOHJIAWEN97@GMAIL.COM	OI Vehicle Number	SJF5142R	TP Vehicle Number	SMD5599G
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select		
Claimant Name *		Claimant NRIC *			
Claimant Address					
Claim Description	SJF5142R / SMD5599G ON 1 Nov 2020				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	02/11/2020 16:49	Claim Close Date		Date Received	02/11/2020 00:00
Report Taken By	Jackson				

☒ Print AK letter

Save Submit

Attachment

Accident No.	MT/1108711	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	02/11/2020 16:51

Path *	Category *	Confidential	Urgency *	Description *
Browse... Clear	Please Select	NO	Normal	
Browse... Clear	Please Select	NO	Normal	
Browse... Clear	Please Select	NO	Normal	
Browse... Clear	Please Select	NO	Normal	
Browse... Clear	Please Select	NO	Normal	

Message Read

Browse...

Clear












Please Select

NO

Normal

Send Message

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 02 Nov 2020 16:51	NRIC/ Driving License	Y Normal	NRIC/ Driving License 2020-11-2	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 02 Nov 2020 16:50	SAS	Normal	SAS 2020-11-2	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 02 Nov 2020 16:50	Photos	Normal	Photos 2020-11-2	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 02 Nov 2020 16:50	Photos	Normal	Photos 2020-11-2	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 02 Nov 2020 16:50	Photos	Normal	Photos 2020-11-2	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 02 Nov 2020 16:49	Photos	Normal	Photos 2020-11-2	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 02 Nov 2020 16:49	Photos	Normal	Photos 2020-11-2	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 02 Nov 2020 16:49	Photos	Normal	Photos 2020-11-2	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 02 Nov 2020 16:49	Photos	Normal	Photos 2020-11-2	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 02 Nov 2020 16:49	Photos	Normal	Photos 2020-11-2	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 02 Nov 2020 16:49	Photos	Normal	Photos 2020-11-2	

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
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