

Claim Handling

Task Transfer

Exit

Accident MT/1109279

LOS

SAL

SUB

Policy No.

5119034744

Certificate No.

Policyholder Name

ED BUILDERS PTE LTD

Product Code

COMMERCIAL VEHICLE INSURA

Contact No.(Mobile)

NA

Email Address

KFK

No

Yes

NCD Protection

No

Vehicle No.

YQ2628R

GST Registration No.

201016745G

Policyholder NRIC

201016745G

Loading

0

Contact No.(Office)

Contact No.(Home)

eCode

No

eCode Reason

Private Hire

No

Special Remark

TCA

No

Yes

NCD Entitlement(%)

0

Accident Details

Report Date

06/11/2020 15:49

Date of Accident

05/11/2020

Reporting Centre

NATIONAL ASSESSMENT CENTRE

Accident Location

JUNC KAKI BUKIT RD 3 & KAKI BUKIT IND TERRACE

Accident Report Within 24 hrs

Yes

Time of Accident hh:mm

18:10

Orange Force

No

Accident Type

Collision - Major Minor Road

Country of Accident

Singapore

ICM No.

Total Excess Applicable

Excess Type

Per Accident

Windscreen Excess

100.00

OD Standard Excess

600.00

YIED OD Excess

Additional Excess

Total OD Excess Applicable

600.00

TP Standard Excess

0.00

YIED TP Excess

Total TP Excess Applicable

0.00

Driver is Covered?

Not Applicable

Benefits

GST Registered Information

GST Registered

Yes

GST Registration No.

201016745G

Modification History

06/11/2020 15:50:31 System changed GST Registered from No to Yes
06/11/2020 15:50:31 System changed GST Registration No. from null to 201016745G
06/11/2020 15:50:31 System changed GST Registration Date from null to 27/05/2011

GST Registration Date

27/05/2011

GST Status Verified

Yes

Policyholder Mailing Address

Address 1

80 GENTING LANE

Address 2

#07-04 RUBY INDUSTRIAL COM

Address 3

SINGAPORE 349565

Address 4

Address Type

Singapore address

Post Code

349565

Unit No.

07-04

Related Policy Number

5119034744

OI Driver Info

Driver Name

Unnamed driver Name

Register Date of Driver License

Contact No.(Mobile)

Address 1

Address 4

Unit No.

Does he own a Singapore Registered car?

Yes

No

Driver Type

Driver NRIC

Driver Age

Contact No.(Office)

Address 2

Address Type

Foreign address

Driver Vehicle No.

Driver DOB

Driving Experience

Contact No.(Home)

Address 3

Post Code

Driver Insurer Company

Investigation

Claim 002 OD-MD

Claim Case Officer Yap Chee Ling

Claim Type

OD-MD

Contact No.(Mobile)

96968926

Email Address

Claim Description

YQ2628R / SJN6959C ON 5 Nov 2020

Preferred Workshop Contact

Yes

No

Preferred Repair Option

Income to assign workshop

Insured Liability report

Partially accepted

Date Registered

09/11/2020 20:19

Report Taken By

SHAN HUI

Insured Name

ED BUILDERS PTE LTD

Contact No. (Home)

OI Vehicle Number

YQ2628R

Insured NRIC

201016745G

Contact No. (Office)

NIL

TP Vehicle Number

SJN6959C

Name of Preferred Workshop

Claim Close Date

Workshop Repairer

Date Received

09/11/2020 00:

Total Loss but Repaired

OD Excess Collected by Workshop

Print AK letter

https://gicclaim.income.com.sg/gcs/icm/eclaim/damageAssessmentSave.do

1/2

Modification History

▼ Special Claim Creation Approval

Approval	Reason
Remarks	

damage assessment

Attachment

▼ Vehicle Info

Vehicle Make	mitsubishi	Vehicle Model	FE	Engine Capacity	2.5
Date of Registration	14/09/2020	Classis No.	FEB21EA35052		
Towing Required *	☐ Yes ☒ No	Vehicle in IDAC *	☐ Yes ☒ No	Parallel Import *	☐ Yes ☒ No
Type of Tender *	Own Damage	Assessor Name *	BRYAN	Survey Current Status	
IDAC/Workshop Name	NATIONAL ASSESSMENT CENTRE	IDAC/Workshop Location	51 UBI AVENUE 1 #01-25 PAYA		
Windscreen Parts & Labour Cost		Total Loss *	☐ Yes ☒ No		
Market Value(\$)		Scrape Value(\$)		Economical Repair Value(\$)	
Remark	REMARK:NO OF REPAIR DAYS:3 DAYS. 1X FRT LH HEADLAMP SIDE COVER GARNISH - REPLACE.1X FRT LH STEP PANEL GARNISH - REPLACE.1X FRT LEFT DOOR COMPANY LOGO & STICKER - REPLACE.1X FRT LH DOOR BLUETEC STICKER - REPLACE.				
Remark for Supplementary					

▼ Damage Listing

Find a Part

root
Not Applicable
ABS
ABSORBER
ACCELERATOR
ACTUATOR
ADVERTISEMENT STICKER
AIR BAG
AIR BLOWER
AIR BOX
AIR CHAMBER BOX
AIR CLEANER
AIR COMPRESSOR
AIR CON
AIR CON (VAN)
AIR COOLER
AIR DISTRIBUTOR
AIR FILTER
AIR FLOW
AIR GRILLE
AIR HORN

No.	Part No.	Description	Qty *	Repair Code *
1	16000101	BUMPER (FRONT)	1	Replace
2	16003101	BUMPER GARNISH (FRONT LEFT)	1	Replace
3	27700101	HEAD LAMP (LEFT)	1	Replace
4	38500201	SIGNAL LAMP (FRONT LEFT)	1	Replace
5	23300201	DOOR (FRONT LEFT)	1	Repair
6	21300101	CORNER PANEL (FRONT LEFT)	1	Repair
7	27101101	GRILLE PANEL (FRONT)	1	Repair
8	23303001	DOOR HINGE (BOTTOM) (FRONT LEFT)	1	Replace

Save

Submit