

Claim Handling

Accident MT/1109546

Policy No.	5115002951	Vehicle No.	GY5764G	GST Registration No.	
Certificate No.					
Policyholder Name	GUSTO ENTERPRISE			Policyholder NRIC	
Product Code	COMMERCIAL VEHICLE INSURANCE	Cover Type	Comprehensive	Loading	
Contact No.(Mobile)	84648400	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	

▼ Accident Details

Report Date	09/11/2020 17:45	Accident Report Within 24 hrs	Yes	Accident Type	
Date of Accident	08/11/2020	Time of Accident hh:mm	06:30	Country of Accident	
Reporting Centre		Orange Force		ICM No.	
Accident Location	NEAR BLK 175 YISHUN AVENUE 7 CARPARK				

▼ 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				
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	09/11/2020 17:48:54 System changed GST Status Verified from No to Yes		

▼ Policyholder Mailing Address

Address 1	25 KAKI BUKIT ROAD 4	Address 2	#06-32 SYNERGY @ KB	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.	06-32	Related Policy Number	5118630886		

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	SIVAN MUTHU KUMARAN S/O N	Driver NRIC	S8136934H	Driver DOB	
Register Date of Driver License	19/11/2013	Driver Age	39	Driving Experience	
Contact No.(Mobile)	84648400	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 209 #01-373	Address 2	BISHAN STREET 23	Address 3	
Address 4		Address Type	Foreign address	Post Code	
Unit No.	01-373				
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.	GY5764G	Driver Insurer Company	

Declaration

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

Claim 001 OD-MX New

Claim Type *	OD-MX	Insured Name	GUSTO
Contact No.(Mobile)	93371048	Contact No. (Home)	
Email Address		OI Vehicle Number	GY5764G
Claim Description	GY5764G / FBJ8457L ON 8 Nov 2020		
Preferred Workshop		Insured Liability	Partially at Fault
Contact No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered		GIA report	Received
			09/11/2020 17:50
		Claim Close Date	

☒ Print AK letter

Save

Submit

Attachment

▼

Accident No. MT/1109546

Claim No. 001

Last Doc. Received ☒ Yes ☐ No

Upload Date 09/11/2020 18:07

Path *

Choose FileNo file chosen

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Message Read

Category *

ClearPlease Select

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Confidential

NO

NO

NO

NO

NO

NO

▼ Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Desi
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Nov 2020 18:07	NRIC/ Driving License	Y	Normal	NRIC/ Driving L
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Nov 2020 18:07	SAS		Normal	SAS 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Nov 2020 17:51	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Nov 2020 17:51	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Nov 2020 17:51	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Nov 2020 17:51	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Nov 2020 17:50	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Nov 2020 17:50	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Nov 2020 17:50	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Nov 2020 17:50	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Nov 2020 17:50	Photos		Normal	Photos

▼ Video List

Uploaded By/Date	Folder Date	File Name	
Display in New Window Scan and uploading			