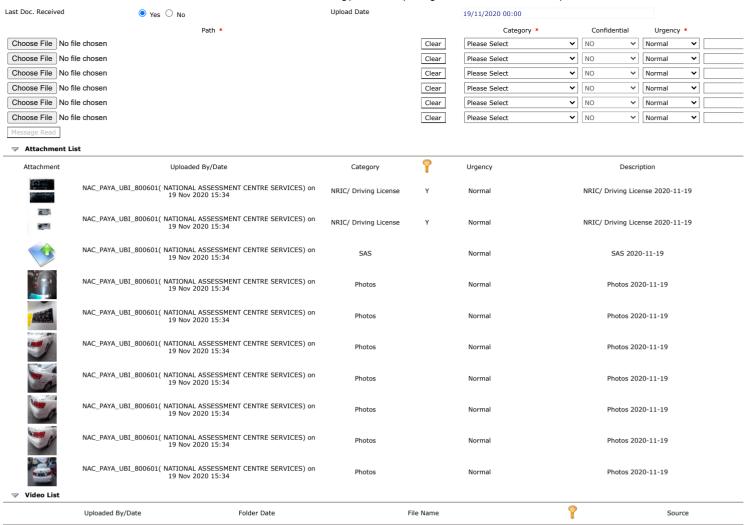
Claim Handling

Accident M1/1110/11										
Policy No.	5114240368		Vehicle No.	SJR6179R		GST Regis	tration No.			
Certificate No.										
Policyholder Name	LIAN KWOK WENG, DANIEL					Policyhold	er NRIC	S81089	27B	
Product Code	PRIVATE CAR INSURANCE		Cover Type	drivo CLASSIC		Loading		0		
Contact No.(Mobile)	93653332		Contact No.(Office)	0		Contact N	o.(Home)	0		
Email Address			Special Remark			eCode		No 🗸		
KFK	No Yes		TCA	No Yes		eCode Rea	ison			
NCD Protection	No		NCD Entitlement(%)	20		Private Hi	re	No		
▼ Accident Details										
Report Date	19/11/2020 15:30		Accident Report Within 24 hrs	Yes		Accident 1	уре	Side Swi	ipe	
Date of Accident	18/11/2020		Time of Accident hh:mm	16:10		Country o	f Accident	Singapo	re	
Reporting Centre			Orange Force			ICM No.				
Accident Location	ALONG BEDOK NORTH ST 1 ENT	FRANCE TO BLK 4	17							
▼ 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 0	'overed?	Covered	1	
Additional Excess	0.00		TIED IT EXCESS		0.00	Silver is covered.		Covercu		
Total OD Excess Applicable		600.00		Total TP Excess Applicable 0.00						
▼ Benefits	600.00		Total 11 Excess Applicable		0.00					
▼ GST Registered Informat	ion									
GST Registered	No			GST Registra	ation Date					
GST Registration No.	110		GST Status Verifie			Yes				
Modification History										
▼ Policyholder Mailing Add	ress									
Address 1	BLK 477 #09-520		Address 2	PASIR RIS DRIVE 6		Address 3		SINGAP	ORE 5104	
Address 4			Address Type	Singapore address		Post Code		510477	510477	
Unit No.	09-520		Related Policy Number	5114240368						
▼ OI Driver Info										
Driver Name	LIAN KWOK WENG, DANIEL (YAI	N GUORONG,	Driver Type	Main Driver						
Unnamed driver Name	DANIEL)		Driver NRIC	S8108927B		Driver DO	В	14/03/1	1981	
Register Date of Driver License	31/05/2004		Driver Age	39		Driving Ex		16	.501	
Contact No.(Mobile)	93653332		Contact No.(Office)	0		Contact N		0		
Address 1	BLK 477		Address 2	PASIR RIS DRIVE 6		Address 3	o.(Home)		ORE 5104	
Address 4	DLN 4//		Address Type	Singapore address		Post Code		510477		
Unit No.	#09-520		Address Type	Singapore address		rost code		3104//		
Does he own a Singapore			Driver Vehicle No.			n				
Registered car?	Yes No		Driver venicie No.			Driver Ins	urer Company			
Declaration										
Breathalyser or Blood Test				0.11						
Reading?	0 mg		Any injury?	Yes No						
Modification History										
Claim 001 OD-MX New										
Claim 001 OD-PIX										
Claim Type *				[OD-MX ✓	Insured Name	LIAN KWOK WENG, D	ANIEL	Insured NRIC	
Contract No. (Mak ")				ı		Contact			Contact	
Contact No.(Mobile)				L		No. (Home)			No. (Office)	
Email Address				[OI Vehicle	SJR6179R		TP Vehicle	
				ı		Number	B311017311		Number	
Claim Description]	SJR6179R / PC1737X ON 18 No	ov 2020			Name of Preferred	
Preferred									Workshop	
Workshop	Insured Liability Preferered	INOC ACT AUIC	GIA Received							
Rentact No. Finalisation	Repair Preferred Option	l Workshop, Name	e unknown report Received			Claim			Date	
Date Registered				l	19/11/2020 15:35	Close Date			Received	
Report Taken By				1	ROSLINDA	Workshop			Total Loss but	
Report Taken by				l	RUSLINDA	Repairer			Repaired	
Print AK letter										
				Save Submit						
Attachment										
₩										
Accident No.	MT/1110711		Claim No.	00	01					



Display in New Window Scan and uploading