Claim Handling
Accident MT/1111365

Policy No.	5112834264-01	Vehicle No.	GBB1816Y	GST Registration No.	
Certificate No.					
Policyholder Name	EDEN NEWS AGENCY			Policyholder NRIC	
Product Code	COMMERCIAL VEHICLE INSURA	Cover Type	Third Party	Loading	
Contact No.(Mobile)	91471622	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	● No ○ Yes	TCA	● No ○ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	20	Private Hire	

▽ Accident Details

Report Date	25/11/2020 11:31	Accident Report Within 24 hrs	Yes	Accident Type	
Date of Accident	25/11/2020	Time of Accident hh:mm	08:00	Country of Accident	
Reporting Centre		Orange Force		ICM No.	
Accident Location	PRINT MEDIA HUB @ 61 TAI SENG AVENUE				

▽ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	0.00		
OD Standard Excess	0.00	TP Standard Excess	0.00		
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?	
Additional Excess					
Total OD Excess Applicable	0.00	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	25/11/2020 11:39:12 System changed GST Status Verified from No to Yes		

▽ Policyholder Mailing Address

Address 1	BLK 2 #12-5160	Address 2	JALAN BUKIT MERAH	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.	06-03	Related Policy Number	5112834264-01		

▽ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	TEOH HEE HAW	Driver NRIC	S7680583J	Driver DOB	
Register Date of Driver License	03/05/2014	Driver Age	44	Driving Experience	
Contact No.(Mobile)	91471622	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 2 #09-5168	Address 2	JALAN BUKIT MERAH	Address 3	
Address 4	SINGAPORE 150002	Address Type	Foreign address	Post Code	
Unit No.	09-5168				
Does he own a Singapore Registered car?	○ Yes ● No	Driver Vehicle No.	GBB1816Y	Driver Insurer Compa	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	○ Yes ● No	

Modification History

Claim 001	**New**

Claim Type *		OD-MX ⌄	Insured Name EDEN NE
Contact No.(Mobile)			Contact No. (Home)
Email Address			OI Vehicle Number GBB1816
Claim Description			GBB1816Y / SLX4077J ON 25 Nov 2020
Preferred Workshop Contact No.		Insured Liability Not at Fault ⌄	
Finalisation	Yes ⌄	Preferred Repair Option Preferred Workshop, Name unknown ⌄ GIA report Received ⌄	
Date Registered		25/11/2020 11:46	Claim Close Date

Report Taken By

ROSLI WAHAB

☑ Print AK letter

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Attachment

▽

| Accident No. | MT/1111365 | Claim No. | 001 |
| Last Doc. Received | ◉ Yes ○ No | Upload Date | 25/11/2020 11:47 |

	Path *			Category *	Confidential
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▽ **Attachment List**

Attachment	Uploaded By/Date	Category	🔑	Urgency	Descri
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Nov 2020 11:47	Photos		Normal	Photos 20
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Nov 2020 11:46	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Nov 2020 11:46	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Nov 2020 11:46	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Nov 2020 11:46	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Nov 2020 11:46	NRIC/ Driving License	Y	Normal	NRIC/ Driving Lic
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Nov 2020 11:46	SAS		Normal	SAS 202

▽ **Video List**

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