

Claim Handling

Accident MT/1113707

Policy No.	5119408020	Vehicle No.	FBJ7848Z	GST Registration No.	
Certificate No.					
Policyholder Name	LIM SIONG INN			Policyholder NRIC	
Product Code	MOTORCYCLE INSURANCE	Cover Type	Third Party, Fire & Theft	Loading	
Contact No.(Mobile)	90683122	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	<input 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	

▼ Accident Details

Report Date	15/12/2020 14:06	Accident Report Within 24 hrs	Yes	Accident Type	
Date of Accident	10/12/2020	Time of Accident hh:mm	14:00	Country of Accident	
Reporting Centre		Orange Force		ICM No.	
Accident Location	MOUNTBATTEN RD				

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess			
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			

▼ Policyholder Mailing Address

Address 1	BLK 72 #03-11	Address 2	CIRCUIT ROAD	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.		Related Policy Number	5119408020		

▼ OI Driver Info

Driver Name	LIM SIONG INN	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S2757108E	Driver DOB	
Register Date of Driver License	20/09/2002	Driver Age	56	Driving Experience	
Contact No.(Mobile)	90683122	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 72 #03-11	Address 2	CIRCUIT ROAD	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.					
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Comp	

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	LIM SIONG INN
Contact No.(Mobile)	9068 3122	Contact No. (Home)	
Email Address		OI Vehicle Number	FBJ7848Z
Claim Description	FBJ7848Z / SKC1770H ON 10 Dec 2020		
Preferred Workshop		Insured Liability	Not at Fault
Contact No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered		GIA report	Received
			15/12/2020 14:10
		Claim Close Date	

☒ Print AK letter

Save

Submit

Attachment

▼

Accident No.

MT/1113707

Claim No.

001

Last Doc. Received

☒ Yes

☐ No

Upload Date

15/12/2020 14:10

Path *

Choose File

No file chosen

Choose File

No file chosen

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No file chosen

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No file chosen

Choose File

No file chosen

Choose File

No file chosen

Message Read

Clear

Category *

Confidential

Please Select

NO

Clear

Please Select

NO

Clear

Please Select

NO

Clear

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NO

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NO

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NO

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 15 Dec 2020 14:10	NRIC/ Driving License	Y	Normal	NRIC/ Driving Lic
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 15 Dec 2020 14:10	SAS		Normal	SAS 202
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 15 Dec 2020 14:10	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 15 Dec 2020 14:10	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 15 Dec 2020 14:10	Photos		Normal	Photos 20
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 15 Dec 2020 14:10	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 15 Dec 2020 14:10	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 15 Dec 2020 14:10	Photos		Normal	Photos 20

Video List

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