

Claim Handling

Accident MT/1114400

Policy No.	5091345484-03	Vehicle No.	SLN6517X	GST Registration No.	
Certificate No.					
Policyholder Name	TUAN ARIFFEEN BONGSO			Policyholder NRIC	
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	

▼ Accident Details

Report Date	21/12/2020 12:28	Accident Report Within 24 hrs	Yes	Accident Type	
Date of Accident	18/12/2020	Time of Accident hh:mm	13:15	Country of Accident	
Reporting Centre		Orange Force		ICM No.	
Accident Location	NA				

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	600.00	TP Standard Excess	0.00		
YIED OD Excess		YIED TP Excess		Driver is Covered?	
Additional Excess	0				
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			

▼ Policyholder Mailing Address

Address 1	139 GREENWOOD AVENUE	Address 2	SINGAPORE 287058	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.		Related Policy Number	5091345484-03		

▼ OI Driver Info

Driver Name		Driver Type		Driver DOB	
Unnamed driver Name		Driver NRIC		Driving Experience	
Register Date of Driver License		Driver Age		Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	
Address 1		Address 2		Post Code	
Address 4		Address Type	Foreign address		
Unit No.					
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.		Driver Insurer Comp	

Modification History

Claim 002

New

Claim Type *	OD-MX	Insured Name	TUAN AR
Contact No.(Mobile)	90048740	Contact No. (Home)	6463733
Email Address	obgbongs@nus.edu.sg	OI Vehicle Number	SLN6517
Claim Description	SLN6517X / SHC5727R ON 18 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
Report Taken By		Claim Close Date	
☒ Print AK letter			

Save

Submit

Attachment

▼

Accident No. MT/1114400

Claim No. 002

Last Doc. Received ☒ Yes ☐ No

Upload Date 22/12/2020 12:40

Path *

Choose FileNo file chosen

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Message Read

Category *

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Confidential

NO

NO

NO

NO

NO

NO

▼ Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 22 Dec 2020 12:40	SAS		Normal	SAS 202
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 22 Dec 2020 12:40	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 22 Dec 2020 12:40	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 22 Dec 2020 12:40	Photos		Normal	Photos 20
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o n 22 Dec 2020 12:27	Photos		Normal	Photos 20

▼ Video List

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

