

Claim Handling

Accident MT/1115495

Policy No.	5114368352	Vehicle No.	SLQ2449U	GST Registration No.
Certificate No.	5114368352-000006			
Policyholder Name	TW AUTOMOBILE			Policyholder NRIC
Product Code	FLEET MASTER INSURANCE	Cover Type	drivo CLASSIC	Loading
Contact No.(Mobile)	81265771	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	29/12/2020 18:52	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	27/12/2020	Time of Accident hh:mm	22:25	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	Short St, Singapore			

▼ **Total Excess Applicable**

Excess Type	Per Accident	Windscreen Excess	100.00
OD Standard Excess	2,000.00	TP Standard Excess	1,500.00
YIED OD Excess	0.00	YIED TP Excess	0.00
Additional Excess	0		
Total OD Excess Applicable	2000.00	Total TP Excess Applicable	1,500.00

Driver is Covered?

Benefits

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	9 TAGORE LANE	Address 2	#02-01 9 @ TAGORE	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	02-01	Related Policy Number	5112474973-01	

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	LUM WAI KHUAN DORAN	Driver NRIC	SXXXX167I	Driver DOB
Register Date of Driver License	20/05/2003	Driver Age	38	Driving Experience
Contact No.(Mobile)	81265771	Contact No.(Office)		Contact No.(Home)
Address 1	BLK 535 #06-825	Address 2	BUKIT PANJANG RING ROAD	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	06-825			
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.		Driver Insurer Comp

Declaration

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

Claim 001 New

Claim Type *	OD-MX Insured Name TW AUTO	
Contact No.(Mobile)	86865535 Contact No. (Home)	
Email Address	OI Vehicle Number SLQ2449	
Claim Description	SLQ2449U / SLG9460S ON 27 Dec 2020	
Preferred Workshop	Insured Liability Not at Fault	
Contact No. Finalisation	Preferred Repair Option Preferred Workshop, Name unknown	GIA report Received
Date Registered	29/12/2020 18:55 Claim Close Date	

☒ Print AK letter

Save Submit

Attachment

Accident No.

MT/1115495

Claim No.

001

Last Doc. Received

☒ Yes ☐ No

Upload Date

29/12/2020 18:57

Path *

Category *

Confidential

Choose File No file chosen

Clear Please Select NO

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Choose File No file chosen

Clear Please Select NO

Choose File No file chosen

Clear Please Select NO

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Message Read

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Dec 2020 18:57	SAS		Normal	SAS 202
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Dec 2020 18:57	NRIC/ Driving License	Y	Normal	NRIC/ Driving Lic
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Dec 2020 18:56	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Dec 2020 18:56	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Dec 2020 18:56	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Dec 2020 18:56	Photos		Normal	Photos 20
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NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Dec 2020 18:55	Photos	Normal	Photos 20

Video List

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