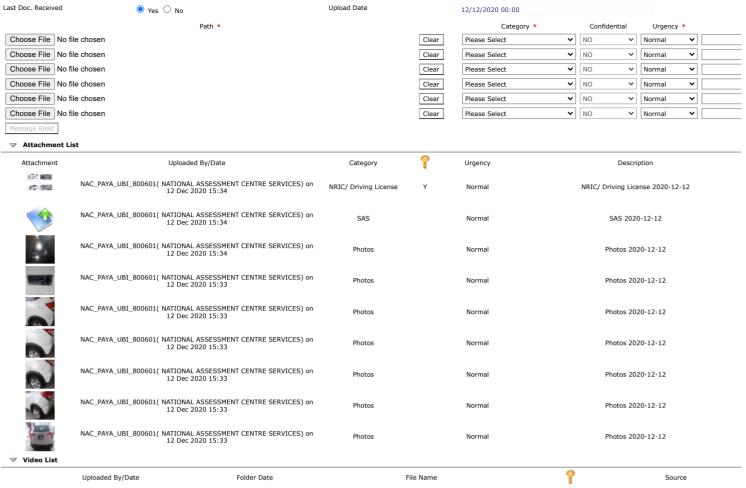
Claim Handling

Accident MT/1113384									
Policy No.	5083378460-04		Vehicle No.	SLF3993R		GST Regis	tration No.		
Certificate No.									
Policyholder Name	CHUNG CHI KWONG (ZHONG ZH	HIGUANG)				Policyholde	er NRIC	S094837	72A
Product Code	PRIVATE CAR INSURANCE		Cover Type	drivo CLASSIC		Loading		0	
Contact No.(Mobile)	97568981		Contact No.(Office)	0		Contact No	o.(Home)	0	
Email Address			Special Remark			eCode		No 🗸	
KFK	No Yes		TCA	No Yes		eCode Rea	ison		
NCD Protection	Yes		NCD Entitlement(%)	50		Private Hir	re	No	
Accident Details									
Report Date	12/12/2020 15:27		Accident Report Within 24 hrs	Yes		Accident T	уре	Side Swi	pe
Date of Accident	11/12/2020		Time of Accident hh:mm	18:35		Country of	Accident	Singapor	re
Reporting Centre			Orange Force			ICM No.			
Accident Location	UPP BOON KENG RD BLK 18 CA	RPARK							
▼ Total Excess Applicable									
Excess Type	Per Accident		Windscreen Excess		100.00				
			TP Standard Excess						
OD Standard Excess	600.00	0.00		0.00		D			
YIED OD Excess						Driver is Covered?			Covered
Additional Excess	0.00		Tabal TD France Applicable						
Total OD Excess Applicable Benefits	600.00		Total TP Excess Applicable		0.00				
▼ GST Registered Informat	uia								
GST Registered	No			GST Registral	tion Date				
GST Registration No.	NO			GST Status V			Yes		
Modification History							103		
▼ Policyholder Mailing Add	ress								
Address 1	BLK 506B #15-428		Address 2	SERANGOON NORTH	AVENUE 4	Address 3		SINGAP	ORE 5525
Address 4			Address Type	Singapore address		Post Code		552506	
Unit No.	06-26		Related Policy Number	5083378460-04					
▽ OI Driver Info									
Driver Name	CHUNG CHI KWONG (ZHONG ZH	lIGUANG)	Driver Type	Main Driver					
Unnamed driver Name			Driver NRIC	S0948372A		Driver DO	В	02/01/1	949
Register Date of Driver License	19/10/1973		Driver Age	71		Driving Ex	perience	47	
Contact No.(Mobile)	97568981		Contact No.(Office)	0		Contact No	o.(Home)	0	
Address 1	BLK 506B		Address 2	SERANGOON NORTH	AVENUE 4	Address 3		SINGAPO	ORE 5525
Address 4			Address Type	Singapore address		Post Code		552506	
Unit No.	#15-428								
Does he own a Singapore Registered car?	Yes No	Yes No				Driver Insurer Company			
· J · · · · · ·									
Declaration									
Breathalyser or Blood Test Reading?	0 mg		Any injury?	Yes No					
Modification History									
- Indunication miscory									
Claim 001 OD-MX New									
Claim Time				Г.	00 MV	Insured Name		NG (TUONG T	Insured
Claim Type *				_(OD-MX ✓		CHUNG CHI KWOI	NG (ZHONG Z	· WICIC
Contact No.(Mobile)				g	7568981	Contact No.			No.
				_		(Home) _ OI			(Office) TP
Email Address				E	ENQUIRY@MEIKOTAILOR.COM	Vehicle Number	SLF3993R		Vehicle Number
Claire Description				T _a	21 52002B / CBV777 ON 44 B	2020			Name of Preferred
Claim Description				[5	SLF3993R / SBY77Z ON 11 Dec	2020			Worksho
Preferred Workshop	Insured Liability	Fully at Fault	: •						
Workshop Rentike No. Finalisation	Preferered ✓ Repair Preferred	Workshop, Na		•		Claire			
Date Registered	Option		Topolit -		12/12/2020 15:34	Claim Close			Date Received
						Date			Total Los
Report Taken By				F	ROSLINDA	Workshop Repairer			but Repaired
									Repaired
Print AK letter									
				Save Submit					
_				Jave Jubinit					
Attachment									
▼									
Accident No.	MT/1113384		Claim No.	00	1				



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