Claim Handling

Accident MT/1116172

Policy No.	5118353133	Vehicle No.	FBH5197S	GST Registration No.
Certificate No.				
Policyholder Name	MUHAMMAD AZHARI BIN AZMIE			Policyholder NRIC
Product Code	MOTORCYCLE INSURANCE	Cover Type	Third Party	Loading
Contact No.(Mobile)	86605261	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	05/01/2021 16:16	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	03/01/2021	Time of Accident hh:mm	17:30	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	CLEMENTI AVENUE 6			

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 272 #03-79	Address 2	TOH GUAN ROAD	Address 3
Address 4	SINGAPORE 600272	Address Type	Singapore address	Post Code
Unit No.	03-79	Related Policy Number	5118353133	

OI Driver Info

Driver Name	MUHAMMAD AZHARI BIN AZMIE	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	S9400343A	Driver DOB
Register Date of Driver License	17/07/2020	Driver Age	26	Driving Experience
Contact No.(Mobile)	86605261	Contact No.(Office)		Contact No.(Home)
Address 1	BLK 272 #03-79	Address 2	TOH GUAN ROAD	Address 3
Address 4	SINGAPORE 600272	Address Type	Singapore address	Post Code
Unit No.	03-79			
Does he own a Singapore Registered car?	○ Yes ◉ No	Driver Vehicle No.	FBH5197S	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	MUHAMM
Contact No.(Mobile)	86605261	Contact No. (Home)	
Email Address		OI Vehicle Number	FBH5197
Claim Description	FBH5197S / SHC3533Z ON 3 Jan 2021		
Preferred Workshop		Insured Liability	Partially at Fault
Contact No.			
Request Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
GIA report	Received		
Date Registered	05/01/2021 16:30	Claim Close Date	

Report Taken By: ROSLI WAHAB

☑ Print AK letter

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Attachment

Accident No.	MT/1116172	Claim No.	001
Last Doc. Received	(●) Yes ( ) No	Upload Date	05/01/2021 16:32

Path *		Category *	Confidential
Choose File No file chosen	Clear	Please Select	NO
Choose File No file chosen	Clear	Please Select	NO
Choose File No file chosen	Clear	Please Select	NO
Choose File No file chosen	Clear	Please Select	NO
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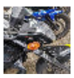
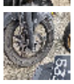
Choose File No file chosen	Clear	Please Select	NO

Message Read

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jan 2021 16:32	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jan 2021 16:32	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jan 2021 16:31	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jan 2021 16:31	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jan 2021 16:31	Photos		Normal	Photos 2
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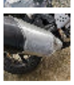	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jan 2021 16:31	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jan 2021 16:30	Photos		Normal	Photos 2
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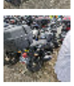	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jan 2021 16:30	Photos		Normal	Photos 2
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jan 2021 16:30	NRIC/ Driving License	Y	Normal	NRIC/ Driving L
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Jan 2021 16:30	SAS		Normal	SAS 20

Video List

Uploaded By/Date	Folder Date	File Name	

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