

Claim Handling

Accident MT/1116344

Policy No.	5097059709-02	Vehicle No.	SLU8189J	GST Registration No.	
Certificate No.					
Policyholder Name	ROSEMARY ENG SU YIN (WENG SHUYIN)			Policyholder NRIC	S7636136C
Product Code	PRIVATE CAR INSURANCE	Cover Type	Third Party	Loading	0
Contact No.(Mobile)	81003183	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	No

▼ Accident Details

Report Date	06/01/2021 16:38	Accident Report Within 24 hrs	Yes	Accident Type	Collided into Parke
Date of Accident	02/01/2021	Time of Accident hh:mm	12:40	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	KOVAN CENTRAL CARPARK INFRT OF DBS KOVAN				

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	0.00		
OD Standard Excess	0.00	TP Standard Excess	0.00		
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?	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	27K JALAN HOCK CHYE	Address 2	SINGAPORE 538238	Address 3	
Address 4		Address Type	Singapore address	Post Code	538238
Unit No.		Related Policy Number	5108865920-01		

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	FERNANDEZ NICHOLAS DAMIAI	Driver NRIC	S7423397Z	Driver DOB	23/07/1974
Register Date of Driver License	06/02/1995	Driver Age	46	Driving Experience	25
Contact No.(Mobile)	97402428	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	1143A UPPER SERANGOON RO/	Address 2	SILVER HILL	Address 3	SINGAPORE 53471
Address 4		Address Type	Foreign address	Post Code	534784
Unit No.					
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.		Driver Insurer Company	

Declaration

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

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	ROSEMARY ENG SU YIN (WENG)	Insured NRIC			
Contact No.(Mobile)	81003183	Contact No. (Home)		Contact No. (Office)			
Email Address	ROSEMARY_ENG@YAHOO.COM	Vehicle Number	SLU8189J	TP Vehicle Number			
Claim Description	SLU8189J / SMV7310P ON 2 Jan 2021				Name of Preferred Workshop		
Preferred Workshop		Insured Liability	Not at Fault				
Contact No. Finalisation	Yes	Repair Option	Preferred Workshop, Name unknown	GIA report	Received		
Date Registered				Claim Close Date	06/01/2021 16:49	Date Received	
Report Taken By		Workshop Repairer	ROSLINDA			Total Loss but Repaired	

☒ Print AK letter

Attachment

▼

Accident No.	MT/1116344	Claim No.	001
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1/6/2021

Claim Handling(accident reporting Claim Task 001 OD-MX)

Last Doc. Received

☒ Yes

☐ No

Upload Date

06/01/2021 00:00

Path *

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Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Jan 2021 16:48	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2021-1-6
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Jan 2021 16:48	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2021-1-6
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Jan 2021 16:48	SAS		Normal	SAS 2021-1-6
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Jan 2021 16:48	Photos		Normal	Photos 2021-1-6
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Jan 2021 16:48	Photos		Normal	Photos 2021-1-6
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Jan 2021 16:47	Photos		Normal	Photos 2021-1-6
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 06 Jan 2021 16:47	Photos		Normal	Photos 2021-1-6

Video List

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