

Accident MT/1118147

Policy No.	5115559562	Vehicle No.	SLX6600K	GST Registration No.
Certificate No.				
Policyholder Name	THAVANESON S/O PARAMASON			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading
Contact No.(Mobile)	92788411	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	20	Private Hire

▼ Accident Details

Report Date	21/01/2021 09:34	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	19/01/2021	Time of Accident hh:mm	18:30	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	BLK 365 YISHUN RING ROAD			

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	
OD Standard Excess	600.00	TP Standard Excess	0.00
YIED OD Excess	500.00	YIED TP Excess	0.00
Additional Excess	0.00		
Total OD Excess Applicable	1,100.00	Total TP Excess Applicable	0.00

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	BLK 364 #03-1586	Address 2	YISHUN RING ROAD	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5115559562	

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	EVANGELINE ANNE ESWARIA	Driver NRIC	S9205668F	Driver DOB
Register Date of Driver License	31/03/2015	Driver Age	28	Driving Experience
Contact No.(Mobile)	88918995	Contact No.(Office)		Contact No.(Home)
Address 1	BLK 370 #10-847	Address 2	WOODLANDS AVENUE 1	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	10-847			
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

Modification History

Claim 001 OD-MX

New

Claim Type *	OD-MX		Insured Name	THAVAN
Contact No.(Mobile)			Contact No. (Home)	675500
Email Address			OI Vehicle Number	SLX660
Claim Description	SLX6600K / GBE2977T ON 19 Jan 2021			
Preferred Workshop		Insured Liability	Not at Fault	
Repair No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report
Date Registered	Received		Claim Close Date	21/01/2021 09:46

☒ Print AK letter

Save

Submit

Attachment

▼

Accident No. MT/1118147

Claim No. 001

Last Doc. Received ☒ Yes ☐ No

Upload Date 21/01/2021 00:00

Path *

Category *

Confidential

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Message Read

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NO

NO

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▼ Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Desi
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jan 2021 09:46	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jan 2021 09:44	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jan 2021 09:44	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jan 2021 09:44	Photos		Normal	Photos
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jan 2021 09:44	SAS		Normal	SAS 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jan 2021 09:44	NRIC/ Driving License	Y	Normal	NRIC/ Driving I
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 21 Jan 2021 09:44	NRIC/ Driving License	Y	Normal	NRIC/ Driving I

▼ Video List

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