

Claim Handling

Accident MT/1118281

Policy No.	5111071647-01	Vehicle No.	SKK4145B	GST Registration No.	
Certificate No.					
Policyholder Name	PEER MOHAMED S/O S A KADAR			Policyholder NRIC	S7571724E
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	90671075	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	40	Private Hire	No

▼ Accident Details

Report Date	22/01/2021 10:56	Accident Report Within 24 hrs	Yes	Accident Type	Damaged whilst pe
Date of Accident	20/01/2021	Time of Accident hh:mm	01:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	Desker Rd, Singapore				

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	600.00	TP Standard Excess	0.00		
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?	Covered
Additional Excess	0.00				
Total OD Excess Applicable	600.00	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 663 #12-12	Address 2	BUFFALO ROAD	Address 3	SINGAPORE 210663
Address 4		Address Type	Singapore address	Post Code	210663
Unit No.		Related Policy Number	5111071647-01		

▼ OI Driver Info

Driver Name	PEER MOHAMED S/O S A KADAR	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S7571724E	Driver DOB	25/10/1975
Register Date of Driver License	13/11/1997	Driver Age	45	Driving Experience	23
Contact No.(Mobile)	90671075	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 663 #12-12	Address 2	BUFFALO ROAD	Address 3	SINGAPORE 210663
Address 4		Address Type	Singapore address	Post Code	210663
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	PEER MOHAMED S/O S A KADAR	Insured NRIC	
Contact No.(Mobile)	90671075	Contact No. (Home)		Contact No. (Office)	
Email Address	shah1507@yahoo.com	Vehicle Number	SKK4145B	TP Vehicle Number	
Claim Description	SKK4145B / UNKNOWN ON 20 Jan 2021				
Preferred Workshop		Insured Liability	Not at Fault		
Contact No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered				Claim Close Date	22/01/2021 11:02
Report Taken By	SHAN HUI	Workshop Repairer		Date Received	
				Total Loss but Repaired	

☒ Print AK letter

Attachment

1/22/2021

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

Last Doc. Received

Yes

No

Upload Date

22/01/2021 13:13

Path *

Choose File

No file chosen

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No file chosen

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No file chosen

Message Read

Category *

Confidential

Urgency *

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NO

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NO

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NO

Normal

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NO

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Attachment List

Attachment

Uploaded By/Date

Category

Urgency

Description

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2021 13:13

SAS

Normal

SAS 2021-1-22

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2021 13:13

NRIC/ Driving License

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Normal

NRIC/ Driving License 2021-1-22

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2021 11:03

Photos

Normal

Photos 2021-1-22

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2021 11:03

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Photos

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Photos 2021-1-22

Video List

Uploaded By/Date

Folder Date

File Name

Source

Display in New Window

Scan and uploading

https://gicclaim.income.com.sg/gcs/icm/eclaim/icmmyTaskForward.do?taskInstanceId=275401418&caseId=2766180&objectId=null&taskId=501&action... 2/2