## **Claim Handling**

## Accident MT/1118301

Policy No.	5114559335	Vehicle No.	SLD5871G	GST Registration No
Certificate No.	5114559335-000010			
Policyholder Name	WJ CAR RENTAL PTE. LTD.			Policyholder NRIC
Product Code	FLEET MASTER INSURANCE	Cover Type	drivo CLASSIC	Loading
Contact No.(Mobile)	86089649	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	No  Yes	TCA	No	eCode Reason
NCD Protection	No	NCD Entitlement(%)	0	Private Hire
Accident Details				
Report Date	22/01/2021 12:12	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	21/01/2021	Time of Accident hh:mm	18:55	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	DEFU AVE 1 TOWARDS HOUGANG AV	/ENUE 3		
<b>▼</b> Total Excess Applicable				
Excess Type	Per Accident	Windscreen Excess	100.00	
OD Standard Excess	2,000.00	TP Standard Excess	1,500.00	
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?
Additional Excess	0.00			
Total OD Excess Applicable	2,000.00	Total TP Excess Applicable	1,500.00	
▼ Benefits	, , , , , ,		,	
	ion			
GST Registered	No		GST Registration Date	
GST Registration No.			GST Status Verified	Yes
Modification History				
▼ Policyholder Mailing Add	ress			
Address 1	6001 BEACH ROAD	Address 2	#13-06 GOLDEN MILE TOWER	Address 3
Address 4	SSST SEXICIT NOXE	Address Type	Singapore address	Post Code
Unit No.	13-06	Related Policy Number	5114559335	1 000 0000
▼ OI Driver Info	13 00	Related Folley Hamber	3114333333	
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	LEE KOK HENG	Driver NRIC	S1471730G	Driver DOB
Register Date of Driver License	14/04/1982	Driver Age	59	Driving Experience
Contact No.(Mobile)	98318201	Contact No.(Office)	39	Contact No.(Home)
		·	DEDOK COLITH AVENUE 2	
Address 1	BLK 159 #04-559	Address 2	BEDOK SOUTH AVENUE 3	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	04-559			
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.		Driver Insurer Com
Declaration				
Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes No	
Redding.				
Modification History				
Claim 001 OD-MX New				
Claim 601 OD-MX				
Claim Type *			OD-MX	✓ Insured WJ CAF
				Name W3 CAP
Contact No.(Mobile)				No.
				(Home)
Email Address				Vehicle SLD587
				Number
Claim Description			SLD5871G / XD459	5T ON 21 Jan 2021
Preferred	Inquired Liability			
Workshop	Fieleleleu	ot at Fault  V  GIA  Received	•	
Finalisation Finalisation	Repair Preferred Wor	kshop, Name unknown	<b>&gt;</b>	Claim
Date Registered			22/01/2021 12:28	Close Date

Report Taken By Workshop SHAN HUI Repairer Print AK letter Save Submit Attachment MT/1118301 Accident No. Claim No. 001 Last Doc. Received O Yes O No Upload Date 22/01/2021 00:00 Category \* Confidential Path \* Choose File No file chosen Clear NO Please Select 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 Choose File No file chosen Clear Please Select V NO Attachment List Attachment Uploaded By/Date Category Urgency Des NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Normal Photos 22 Jan 2021 12:27 NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Photos Normal NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2021 12:27 Photos Normal Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on Photos Normal Photos 22 Jan 2021 12:27 NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on  $$22\ Jan\ 2021\ 12:27$ Photos Normal Photos NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 22 Jan 2021 12:27 SAS Normal SAS 2 NAC\_PAYA\_UBI\_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on NRIC/ Driving License NRIC/ Driving L Normal Video List Uploaded By/Date Folder Date File Name

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