

Claim Handling

Task Transfer

Exit

Accident MT/1118957

LOS

SAL

SUB

Policy No.

5120580391

Certificate No.

Policyholder Name

TOH BOON CHUAN (ZHUO WENCHUAN)

Product Code

PRIVATE CAR INSURANCE

Contact No.(Mobile)

98002378

Email Address

KFK

No

Yes

NCD Protection

No

Vehicle No.

SMW3139P

GST Registration No.

Cover Type

drivo CLASSIC

Contact No.(Office)

Special Remark

TCA

No

Yes

NCD Entitlement(%)

50

Policyholder NRIC

S8003867D

Loading

0

Contact No.(Home)

eCode

No

eCode Reason

Private Hire

No

Accident Details

Report Date

27/01/2021 15:55

Date of Accident

25/01/2021

Reporting Centre

NATIONAL ASSESSMENT CENTRE

Accident Location

PARK CRESCENT CARPARK

Accident Report Within 24 hrs

Yes

Time of Accident hh:mm

11:55

Orange Force

No

Accident Type

Hit and run

Country of Accident

Singapore

ICM No.

Total Excess Applicable

Excess Type

Per Accident

Windscreen Excess

100.00

OD Standard Excess

2,000.00

YIED OD Excess

0.00

Additional Excess

0.00

Total OD Excess Applicable

2,000.00

TP Standard Excess

1,500.00

YIED TP Excess

0.00

Total TP Excess Applicable

1,500.00

Driver is Covered?

Covered

Benefits

GST Registered Information

GST Registered

No

GST Registration No.

Modification History

GST Registration Date

GST Status Verified

Yes

Policyholder Mailing Address

Address 1

BLK 93B #19-183

Address 2

TELOK BLANGAH STREET 31

Address 3

TELOK BLANGAH PARCVIEW

Address 4

SINGAPORE 102093

Unit No.

19-183

Address Type

Singapore address

Post Code

102093

Related Policy Number

5120580391

OI Driver Info

Driver Name

TOH BOON CHUAN (ZHUO WENCHUAN)

Unnamed driver Name

Register Date of Driver License

21/07/2003

Contact No.(Mobile)

98002378

Address 1

BLK 93B #19-183

Address 4

SINGAPORE 102093

Unit No.

19-183

Does he own a Singapore Registered car?

Yes

No

Driver Type

Main Driver

Driver NRIC

S8003867D

Driver Age

41

Contact No.(Office)

Address 2

TELOK BLANGAH STREET 31

Address Type

Singapore address

Driver Vehicle No.

SMW3139P

Driver DOB

22/01/1980

Driving Experience

17

Contact No.(Home)

Address 3

TELOK BLANGAH PARCVIEW

Post Code

102093

Driver Insurer Company

NTUC

Declaration

Breathalyser or Blood Test Reading?

0 mg

Any injury?

Yes

No

Modification History

Investigation

Claim 001 OD-MX

New

Claim

Case Officer

Claim Type

OD-MX

Contact No.(Mobile)

96608653

Email Address

Claim Description

SMW3139P / GBG1751Z ON 25 Jan 2021

Preferred Workshop

Preferred Repair Option

Preferred Workshop, Name unknown

Insured Liability report

Not at Fault Received

Date Registered

27/01/2021 16:12

Report Taken By

ROSLI WAHAB

Insured Name

TOH BOON CHUAN (ZHUO WEN

Contact No.(Home)

62782529

OI Vehicle Number

SMW3139P

Insured NRIC

S8003

Contact No.(Office)

TP Vehicle Number

GBG17

Name of Preferred Workshop

Claim Close Date

Workshop Repairer

Date Received

27/01/

Total Loss but Repaired

https://gicclaim.income.com.sg/gcs/icm/eclaim/reserveSearch.do?tabCode=Reserve&caseId=2767613&objectId=3220462&readAllBox=1&checkNewS...

1/2

