

Claim Handling

Accident MT/1119149

Policy No.	5116779291	Vehicle No.	SJD2947R	GST Registration No.
Certificate No.				
Policyholder Name	R. SRIMITHA			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading
Contact No.(Mobile)	88589644	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire

Accident Details

Report Date	28/01/2021 17:47	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	27/01/2021	Time of Accident hh:mm	22:30	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	PIE TOWARDS CHANGI BEFORE ENG NEO ENTRANCE EXIT 22			

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			
Total OD Excess Applicable	2000.00	Total TP Excess Applicable	1,500.00	

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 689A #03-88	Address 2	WOODLANDS DRIVE 75	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5116779291	

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	SREETHARAN SHANKER	Driver NRIC	S7701114E	Driver DOB
Register Date of Driver License	14/03/2018	Driver Age	44	Driving Experience
Contact No.(Mobile)	86254824	Contact No.(Office)		Contact No.(Home)
Address 1	BLK 116 #13-154	Address 2	LORONG 2 TOA PAYOH	Address 3
Address 4	SINGAPORE 310116	Address Type	Singapore address	Post Code
Unit No.	13-154			
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.		Driver Insurer Comp

Declaration

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

Claim 001 New

Claim Type *	OD-MX	Insured Name	R. SRIMI
Contact No.(Mobile)	88589644	Contact No. (Home)	NIL
Email Address	rajasha2718@yahoo.com	OI Vehicle Number	SJD2947
Claim Description	SJD2947R / FBQ9325R ON 27 Jan 2021		
Preferred Workshop	Insured Liability	Not at Fault	
Contact No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered	28/01/2021 17:52	GIA report	Received
		Claim Close Date	

☒ Print AK letter

Save

Submit

Attachment

Accident No.

MT/1119149

Claim No.

001

Last Doc. Received

☒ Yes ☐ No

Upload Date

28/01/2021 17:54

Path *

Category *

Confidential

Choose File

No file chosen

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Please Select

NO

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No file chosen

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NO

Choose File

No file chosen

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NO

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No file chosen

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NO

Message Read

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jan 2021 17:54	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Jan 2021 17:54	Photos		Normal	Photos 2
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28 Jan 2021 17:52



NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o NRIC/ Driving License Y Normal NRIC/ Driving Li

28 Jan 2021 17:52

Video List

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