

Claim Handling

Accident MT/1119219

Policy No.	<input type="text" value="511173388-01"/>	Vehicle No.	<input type="text" value="SMM3425R"/>	GST Registration No.	<input type="text"/>
Certificate No.	<input type="text"/>				
Policyholder Name	<input type="text" value="FOO SIEW KIM"/>			Policyholder NRIC	<input type="text"/>
Product Code	<input type="text" value="PRIVATE CAR INSURANCE"/>	Cover Type	<input type="text" value="drivo CLASSIC"/>	Loading	<input type="text"/>
Contact No.(Mobile)	<input type="text" value="98173598"/>	Contact No.(Office)	<input type="text"/>	Contact No.(Home)	<input type="text"/>
Email Address	<input type="text"/>	Special Remark	<input type="text"/>	eCode	<input type="text"/>
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	<input type="text"/>
NCD Protection	<input type="text" value="No"/>	NCD Entitlement(%)	<input type="text" value="10"/>	Private Hire	<input type="text"/>

▼ Accident Details

Report Date	<input type="text" value="29/01/2021 14:35"/>	Accident Report Within 24 hrs	<input type="text" value="Yes"/>	Accident Type	<input type="text"/>
Date of Accident	<input type="text" value="28/01/2021"/>	Time of Accident hh:mm	<input type="text" value="17:58"/>	Country of Accident	<input type="text"/>
Reporting Centre	<input type="text"/>	Orange Force	<input type="text"/>	ICM No.	<input type="text"/>
Accident Location	<input type="text" value="AYE TOWARDS MCE BEFORE TUAS FLYOVER"/>				

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	<input type="text" value="100.00"/>		
OD Standard Excess	<input type="text" value="0.00"/>	TP Standard Excess	<input type="text" value="0.00"/>		
YIED OD Excess	<input type="text" value="0.00"/>	YIED TP Excess	<input type="text" value="0.00"/>	Driver is Covered?	<input type="text"/>
Additional Excess	<input type="text" value="0.00"/>				
Total OD Excess Applicable	<input type="text" value="0.00"/>	Total TP Excess Applicable	<input type="text" value="0.00"/>		

▼ Benefits

Coverage	<input type="text"/>	Sum Insured	<input type="text"/>
Excess Waiver	<input type="text"/>		<input type="text" value="99999999.99"/>

▼ GST Registered Information

GST Registered	<input type="text" value="No"/>	GST Registration Date	<input type="text"/>
GST Registration No.	<input type="text"/>	GST Status Verified	<input type="text" value="Yes"/>
Modification History	<input type="text"/>		

▼ Policyholder Mailing Address

Address 1	<input type="text" value="BLK 298C #12-86"/>	Address 2	<input type="text" value="COMPASSVALE STREET"/>	Address 3	<input type="text"/>
Address 4	<input type="text" value="SINGAPORE 543298"/>	Address Type	<input type="text" value="Singapore address"/>	Post Code	<input type="text"/>
Unit No.	<input type="text" value="12-86"/>	Related Policy Number	<input type="text" value="511173388-01"/>		

▼ OI Driver Info

Driver Name	<input type="text" value="LEE MIN KEONG"/>	Driver Type	<input type="text" value="Named Driver"/>		
Unnamed driver Name	<input type="text"/>	Driver NRIC	<input type="text" value="S1730222A"/>	Driver DOB	<input type="text"/>
Register Date of Driver License	<input type="text" value="01/01/1990"/>	Driver Age	<input type="text" value="55"/>	Driving Experience	<input type="text"/>
Contact No.(Mobile)	<input type="text" value="98316981"/>	Contact No.(Office)	<input type="text"/>	Contact No.(Home)	<input type="text"/>
Address 1	<input type="text" value="BLK 298C #12-86"/>	Address 2	<input type="text" value="COMPASSVALE STREET"/>	Address 3	<input type="text"/>
Address 4	<input type="text" value="SINGAPORE 543298"/>	Address Type	<input type="text" value="Singapore address"/>	Post Code	<input type="text"/>
Unit No.	<input type="text" value="12-86"/>				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.	<input type="text"/>	Driver Insurer Comp	<input type="text"/>

Declaration

Breathalyser or Blood Test Reading?	<input type="text" value="0 mg"/>	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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Modification History

Claim 001 OD-MX New

Claim Type *	<input type="text" value="OD-MX"/>	Insured Name	<input type="text" value="FOO SI"/>
Contact No.(Mobile)	<input type="text" value="98173598"/>	Contact No.(Home)	<input type="text" value="638432"/>
Email Address	<input type="text" value="s5887222@singnet.com.sg"/>	OI Vehicle Number	<input type="text" value="SMM34"/>
Claim Description	<input type="text" value="SMM3425R / XD6871H ON 28 Jan 2021"/>		

Preferred Workshop	<input type="text" value="Yes"/>	Insured Liability	<input type="text" value="Preferred Workshop, Name unknown"/>	GIA report	<input type="text" value="Received"/>
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Date Registered Option Claim Close Date

Report Taken By Workshop Repairer

Print AK letter

Attachment

Accident No. Claim No.

Last Doc. Received Yes No Upload Date

Path *	Category *	Confidential
<input type="button" value="Choose File"/> No file chosen <input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>
<input type="button" value="Choose File"/> No file chosen <input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>
<input type="button" value="Choose File"/> No file chosen <input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>
<input type="button" value="Choose File"/> No file chosen <input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>
<input type="button" value="Choose File"/> No file chosen <input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>
<input type="button" value="Choose File"/> No file chosen <input type="button" value="Clear"/>	<input type="text" value="Please Select"/>	<input type="text" value="NO"/>
<input type="button" value="Message Read"/>		

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Des
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jan 2021 14:40	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jan 2021 14:40	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jan 2021 14:40	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jan 2021 14:40	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jan 2021 14:40	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jan 2021 14:40	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jan 2021 14:40	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jan 2021 14:40	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jan 2021 14:40	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jan 2021 14:40	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jan 2021 14:39	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jan 2021 14:39	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jan 2021 14:39	Photos		Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jan 2021 14:39	SAS		Normal	SAS 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jan 2021 14:39	NRIC/ Driving License	Y	Normal	NRIC/ Driving I
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 29 Jan 2021 14:39	NRIC/ Driving License	Y	Normal	NRIC/ Driving I



▼ **Video List**

Uploaded By/Date	Folder Date	File Name	
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Scan and uploading