Claim Handling

Accident MT/1119329							
Policy No.	5096010280-03	Vehicle No.	PA9427Z	GST R	egistration No.		
Certificate No.							
Policyholder Name	PRESBYTERIAN COMMUNITY SERVICE	ES .		Policyl	older NRIC	S75SS0	0022H
Product Code	BUS INSURANCE	Cover Type	Third Party, Fire & Theft	Loadir	Loading 0		
Contact No.(Mobile)	90389032	Contact No.(Office)		Conta	t No.(Home)		
Email Address		Special Remark		eCode		No 🗸	
KFK	No	TCA	No ○ Yes	eCode	Reason		
NCD Protection	No	NCD Entitlement(%)	20	Private		No	
▼ Accident Details		(,	20				
Report Date	30/01/2021 11:15	Accident Report Within 24 hrs	Yes	Accide	nt Type	Side Swi	ine
Date of Accident		Time of Accident hh:mm	18:35		y of Accident	Singapor	
Reporting Centre	28/01/2021	Orange Force	10.33	ICM N		Siligapoi	i e
Accident Location	NORTH BUONA VISTA ROAD TOWARD			ICH N	J.		
	NORTH BUONA VISTA ROAD TOWARD	DS ATE (CITT					
▼ Total Excess Applicable	Dan Annidant	Wordson Francis		0.00			
Excess Type	Per Accident	Windscreen Excess		0.00			
OD Standard Excess	0.00	TP Standard Excess	3	000.00			
YIED OD Excess	0.00	YIED TP Excess	3,		Driver is Covered?		
Additional Excess	0.00	TED IT EXCESS		0.00			Covered
Total OD Excess Applicable	0.00	Total TP Excess Applicable	2	000.00			
▼ Benefits	0.00	Total Tr Excess Applicable	3,	000.00			
Coverage			Sum Insured				
Accessory			10000				
	ion		10000				
GST Registered			GST Registration	n Nate	01/04/1004		
GST Registration No.	Yes M400031282		GST Status Veril		01/04/1994 Yes		
Modification History		04 System changed GST Registered from No to Y			103		
,	30/01/2021 11:18:	04 System changed GST Registration No. from no 04 System changed GST Registration Date from n	ull to M400031282				
▼ Policyholder Mailing Add							
Address 1	BLK 105 #01-1912	Address 2	JALAN BUKIT MERAH	Addre	ss 3	TIONG I	BAHRU OR
Address 4	SINGAPORE 160105	Address Type	Singapore address				
Unit No.	SINGAPORE 100105	Related Policy Number	5106625213-02	1 051 0		160105	
♥ OI Driver Info		Related Folicy Nulliber	3100023213-02				
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver				
Unnamed driver Name	CHO MUN WAI	Driver NRIC	S0765579G	Driver	DOB	06/02/1	1050
		Driver Age			Driving Experience		.950
Register Date of Driver License	18/05/1977	-	70		Contact No.(Home)		
Contact No.(Mobile) Address 1	90389032	Contact No.(Office)	TALLAN BUILT MEDALI	Addre		PDYCIAL	VODVO FOT
	BLK 3 #07-5070	Address 2	JALAN BUKIT MERAH				VORKS EST
Address 4	SINGAPORE 150003	Address Type	Foreign address	Post C	ode	150003	
Unit No. Does he own a Singapore	07-5070						
Registered car?	Yes No	Driver Vehicle No.	PA9427Z	Driver	Driver Insurer Company NTUC		
Declaration							
Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes No				
,							
M 100 11 11 11 1							
Modification History							
Claim 001 New							
Claim Type *			O	D-MX ✓ Insu Nam	PRESBYTERIAN CO	MMUNITY SE	Insured NRIC
				Cont			Contact
Contact No.(Mobile)				No. (Hor	ne)		No. (Office)
Email Address				OI Vohi	do DA04377		TP Vehicle
Ellidii Address				Vehi Num	tle PA9427Z ber		Number
Claim Description			PΔ	9427Z / SGE2020U ON 28 Jan 202	1		Name of Preferred
Cidim Description			[FA	54272 / 3GL20200 ON 20 Jan 202			Workshop
Preferred Workshop	Insured Liability No.	ot at Fault					
Rentike No. Finalisation	▼ Repair Preferred Wor	kshop, Name unknown GIA report Received	~	÷.			
Date Registered	Option		30	/01/2021 11:19 Clair	·		Date Received
Donort Takon By			D.C.	Date			
Report Taken By			RC	SLI WAHAB			
Print AK letter							
Frint AK letter							
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Attachment							
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Video List

Uploaded By/Date



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Normal

Normal

NRIC/ Driving License 2021-1-30

SAS 2021-1-30

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Folder Date