

Claim Handling

Accident MT/1120497

Policy No.	5120183365	Vehicle No.	SLU7529T	GST Registration No.	
Certificate No.					
Policyholder Name	LIM LIP HIAP			Policyholder NRIC	
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	
Contact No.(Mobile)	94350868	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	☐ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	20	Private Hire	

▼ Accident Details

Report Date	09/02/2021 09:21	Accident Report Within 24 hrs	Yes	Accident Type	
Date of Accident	07/02/2021	Time of Accident hh:mm	11:20	Country of Accident	
Reporting Centre		Orange Force		ICM No.	
Accident Location	Delta Rd, Singapore				

▼ 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 685C #14-202	Address 2	CHOA CHU KANG CRESCENT	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.	14-202	Related Policy Number	5120183365		

▼ OI Driver Info

Driver Name	LIM LIP HIAP	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S7669334Z	Driver DOB	
Register Date of Driver License	01/12/1998	Driver Age	45	Driving Experience	
Contact No.(Mobile)	94350868	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 685C #14-202	Address 2	CHOA CHU KANG CRESCENT	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.	14-202				
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 001New

Claim Type *

Contact No.(Mobile)

Email Address

Claim Description

Preferred Workshop

Contact No. Finalisation

Date Registered

Insured Liability

Preferred Repair Option

Insured Liability

Preferred Workshop, Name unknown

GIA report

Received

OD-MX

94350868

SLU7529T / SMC764J ON 7 Feb 2021

09/02/2021 09:22

Insured Name

Contact No. (Home)

OI Vehicle Number

Insured Name

Contact No. (Home)

Close Date

LIM LIP HIAP

SLU7529T

