

Claim Handling

Accident MT/1120622

Policy No.	5104537149-02	Vehicle No.	SME6963B	GST Registration No.
Certificate No.				
Policyholder Name	JRIMAGEXPRESS PRODUCTIONS			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading
Contact No.(Mobile)	86868873	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	09/02/2021 15:36	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	08/02/2021	Time of Accident hh:mm	14:30	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	CTE TOWARDS PIE CHANGI			

▼ 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	09/02/2021 15:40:58 System changed GST Status Verified from No to Yes		

▼ Policyholder Mailing Address

Address 1	BLK 513 #07-2772	Address 2	ANG MO KIO AVENUE 8	Address 3
Address 4	SINGAPORE 560513	Address Type	Singapore address	Post Code
Unit No.	07-2772	Related Policy Number	5104537149-02	

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	TAN YONG TECK	Driver NRIC	S7340036H	Driver DOB
Register Date of Driver License	30/09/2002	Driver Age	47	Driving Experience
Contact No.(Mobile)	86868873	Contact No.(Office)		Contact No.(Home)
Address 1	BLK 513 #07-2772	Address 2	ANG MO KIO AVENUE 8	Address 3
Address 4	SINGAPORE 560513	Address Type	Singapore address	Post Code
Unit No.	07-2772			
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	JRIMAGE
Contact No.(Mobile)		Contact No. (Home)	
Email Address		OI Vehicle Number	SME6963
Claim Description	SME6963B / GBD6041Y ON 8 Feb 2021		
Preferred Workshop		Insured Liability	Not at Fault
Contact No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered		GIA report	Received
			09/02/2021 15:43
		Claim Close Date	

☒ Print AK letter

Save

Submit

Attachment

▼

Accident No.

MT/1120622

Claim No.

001

Last Doc. Received

☒ Yes

☐ No

Upload Date

09/02/2021 15:46

Path *

Choose File

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Message Read

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Category *

Confidential

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NO

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Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Feb 2021 15:46	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 09 Feb 2021 15:46	Photos		Normal	Photos 2
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Video List

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