

Claim Handling

Accident MT/1120691

Policy No.	5120678047	Vehicle No.	SLN1338D	GST Registration No.
Certificate No.				
Policyholder Name	HAR KAH HAUR			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading
Contact No.(Mobile)	81617417	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	0	Private Hire

Accident Details

Report Date	10/02/2021 08:36	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	08/02/2021	Time of Accident hh:mm	10:25	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	TAMPINES STREET 72			

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00	
OD Standard Excess	600.00	TP Standard Excess	0.00	
YIED OD Excess	500.00	YIED TP Excess	0.00	Driver is Covered?
Additional Excess	0			
Total OD Excess Applicable	1100.00	Total TP Excess Applicable	0.00	

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 613A #05-859	Address 2	PUNGOL DRIVE	Address 3
Address 4	SINGAPORE 821613	Address Type	Singapore address	Post Code
Unit No.	05-859	Related Policy Number	5120678047	

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	HAR KING YOUN	Driver NRIC	S2615333F	Driver DOB
Register Date of Driver License	15/08/1988	Driver Age	57	Driving Experience
Contact No.(Mobile)	91815118	Contact No.(Office)		Contact No.(Home)
Address 1	BLK 613A #05-859	Address 2	PUNGOL DRIVE	Address 3
Address 4	SINGAPORE 821613	Address Type	Singapore address	Post Code
Unit No.	05-859			
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Comp

Declaration

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

Claim 001

New

Claim Type *	OD-MX	Insured Name	HAR KAH
Contact No.(Mobile)	81617417	Contact No. (Home)	
Email Address	kahhaur@hotmail.com	OI Vehicle Number	SLN1338
Claim Description	SLN1338D / FBG8802P 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
			10/02/2021 08:40
		Claim Close Date	

☒ Print AK letter

Save

Submit

Attachment

Accident No.

MT/1120691

Claim No.

001

Last Doc. Received

☒ Yes ☐ No

Upload Date

10/02/2021 08:41

Path *

Category *

Confidential

Choose File

No file chosen

Clear

Please Select

NO

Choose File

No file chosen

Clear

Please Select

NO

Choose File

No file chosen

Clear

Please Select

NO

Choose File

No file chosen

Clear

Please Select

NO

Choose File

No file chosen

Clear

Please Select

NO

Choose File

No file chosen

Clear

Please Select

NO

Message Read

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 10 Feb 2021 08:41	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 10 Feb 2021 08:41	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 10 Feb 2021 08:41	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 10 Feb 2021 08:41	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 10 Feb 2021 08:41	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 10 Feb 2021 08:41	SAS		Normal	SAS 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 10 Feb 2021 08:41	NRIC/ Driving License	Y	Normal	NRIC/ Driving Li

Video List

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