

Claim Handling

Accident MT/1120792

Policy No.	5120798482	Vehicle No.	FBD1657D	GST Registration No.	
Certificate No.					
Policyholder Name	HASHIM BIN HUSSEIN			Policyholder NRIC	
Product Code	MOTORCYCLE INSURANCE	Cover Type	Third Party	Loading	
Contact No.(Mobile)	90040065	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	

▼ Accident Details

Report Date	10/02/2021 15:19	Accident Report Within 24 hrs	Yes	Accident Type	
Date of Accident	05/02/2021	Time of Accident hh:mm	12:00	Country of Accident	
Reporting Centre		Orange Force		ICM No.	
Accident Location	WOODLANDS ROAD				

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess			
OD Standard Excess	0.00	TP Standard Excess	0.00		
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?	
Additional Excess					
Total OD Excess Applicable	0.00	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 4 #05-5077	Address 2	MARSILING ROAD	Address 3	
Address 4	SINGAPORE 730004	Address Type	Singapore address	Post Code	
Unit No.	05-5077	Related Policy Number	5120798482		

▼ OI Driver Info

Driver Name	HASHIM BIN HUSSEIN	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S1026812E	Driver DOB	
Register Date of Driver License	01/01/2010	Driver Age	73	Driving Experience	
Contact No.(Mobile)	90040065	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 4 #05-5077	Address 2	MARSILING ROAD	Address 3	
Address 4	SINGAPORE 730004	Address Type	Singapore address	Post Code	
Unit No.	05-5077				
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.	FBD1657D	Driver Insurer Com	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	☐ Yes ☒ No
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Modification History

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	HASHIM BIN HUSSEIN
Contact No.(Mobile)	93220050	Contact No. (Home)	689271
Email Address		OI Vehicle Number	FBD1657D
Claim Description	FBD1657D / SMN6040S ON 5 Feb 2021		
Preferred Workshop		Insured Liability	Not at Fault
Contact No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered	10/02/2021 15:23	GIA report	Received
		Claim Close Date	

☒ Print AK letter

Save

Submit

Attachment

▼

Accident No.

MT/1120792

Claim No.

001

Last Doc. Received

☒ Yes ☐ No

Upload Date

10/02/2021 15:28

Path *

Category *

Confidential

Choose File

No file chosen

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No file chosen

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No file chosen

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Message Read

▼ Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Desi
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Feb 2021 15:28	Photos		Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Feb 2021 15:28	Photos		Normal	Photos
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Feb 2021 15:28	Photos		Normal	Photos
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Feb 2021 15:23	NRIC/ Driving License	Y	Normal	NRIC/ Driving I
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 10 Feb 2021 15:23	SAS		Normal	SAS 2

▼ Video List

Uploaded By/Date	Folder Date	File Name
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