

Claim Handling

Accident MT/1121138

Policy No.	5113621823-01	Vehicle No.	SJX2173B	GST Registration No.
Certificate No.	5113621823-01-000004			
Policyholder Name	CCA LEASING PTE.LTD.			Policyholder NRIC
Product Code	FLEET MASTER INSURANCE	Cover Type	Third Party	Loading
Contact No.(Mobile)	85111127	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	16/02/2021 11:21	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	15/02/2021	Time of Accident hh:mm	16:40	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	TAMPINES STREET 45 CARPARK			

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	0.00	
OD Standard Excess	0.00	TP Standard Excess	1,500.00	
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	1,500.00	

Benefits

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History	16/02/2021 11:24:39 System changed GST Status Verified from No to Yes		

Policyholder Mailing Address

Address 1	33 UBI AVENUE 3	Address 2	#06-21C VERTEX	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	02-04	Related Policy Number	5113018077-01	

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	LUA BEE GEOK	Driver NRIC	S7321359B	Driver DOB
Register Date of Driver License	25/04/1994	Driver Age	47	Driving Experience
Contact No.(Mobile)	92358580	Contact No.(Office)		Contact No.(Home)
Address 1	BLK 679B #13-868	Address 2	PUNGOL DRIVE	Address 3
Address 4	SINGAPORE 822679	Address Type	Singapore address	Post Code
Unit No.	13-868			
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

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Claim 001 New

Claim Type *	OD-MX	Insured Name	CCA LEASING PTE.LTD.
Contact No.(Mobile)	94566955	Contact No. (Home)	NIL
Email Address	chris.yeo@infinite-partners.com	OI Vehicle Number	SJX2173B
Claim Description	SJX2173B / SML2579S ON 15 Feb 2021		
Preferred Workshop		Insured Liability	Not at Fault
Contact No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered	16/02/2021 11:26	GIA report	Received
		Claim Close Date	

Report Taken By

SHAN HUI

Print AK letter

Save Submit

Attachment

Accident No. MT/1121138 Claim No. 001
Last Doc. Received Yes No Upload Date 16/02/2021 11:26

Path *		Category *	Confidential
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	Please Select	NO
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/>	Please Select	NO
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<input type="button" value="Message Read"/>			

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Feb 2021 11:26	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Feb 2021 11:26	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Feb 2021 11:26	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Feb 2021 11:26	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Feb 2021 11:26	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Feb 2021 11:26	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Feb 2021 11:26	SAS	Normal	SAS 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 16 Feb 2021 11:26	NRIC/ Driving License	Y Normal	NRIC/ Driving Li

Video List

Uploaded By/Date	Folder Date	File Name
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