

Claim Handling

Accident MT/1121672

Policy No.	5114681663-01	Vehicle No.	SFC1099Y	GST Registration No.
Certificate No.				
Policyholder Name	KOH WEE KHNG			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo PREMIUM	Loading
Contact No.(Mobile)	94306181	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	19/02/2021 17:15	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	19/02/2021	Time of Accident hh:mm	06:50	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	THOMSON ROAD			

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00	
OD Standard Excess	600.00	TP Standard Excess	0.00	
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?
Additional Excess	0			
Total OD Excess Applicable	600.00	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 448 #09-133	Address 2	BRIGHT HILL DRIVE	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5114681663-01	

OI Driver Info

Driver Name	KOH WEE KHNG	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	S1208302E	Driver DOB
Register Date of Driver License	23/12/1977	Driver Age	64	Driving Experience
Contact No.(Mobile)	94306181	Contact No.(Office)		Contact No.(Home)
Address 1	BLK 448 #09-133	Address 2	BRIGHT HILL DRIVE	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.				
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-MD	Insured Name	KOH WEE
Contact No.(Mobile)	94306181	Contact No. (Home)	6455223
Email Address	weekhng.koh@income.com.sg	OI Vehicle Number	SFC1099
Claim Description	SFC1099Y / SBL8822E ON 19 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
			19/02/2021 17:20
		Claim Close Date	

Report Taken By

HUI ZHEN

☒ Print AK letter

Save Submit

Attachment

Accident No.

MT/1121672

Claim No.

001

Last Doc. Received

☒ Yes ☐ No

Upload Date

19/02/2021 17:23

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Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 19 Feb 2021 17:23	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 19 Feb 2021 17:23	Photos		Normal	Photos 2
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