

Claim Handling

Accident MT/1121914

Policy No.	5102614732-02	Vehicle No.	SMC6728A	GST Registration No.
Certificate No.				
Policyholder Name	WUN LAI YING (YIN LIYING)			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading
Contact No.(Mobile)	82231436	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	☐ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	20	Private Hire

▼ Accident Details

Report Date	22/02/2021 17:38	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	20/02/2021	Time of Accident hh:mm	14:05	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	Upper Circular Rd, Singapore			

▼ 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 612B #06-895	Address 2	PUNGGOL DRIVE	Address 3
Address 4	SINGAPORE 822612	Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5102614732-02	

▼ OI Driver Info

Driver Name	KHAIRIL BIN ANWAR	Driver Type	Named Driver	
Unnamed driver Name		Driver NRIC	S7616723J	Driver DOB
Register Date of Driver License	06/06/1998	Driver Age	44	Driving Experience
Contact No.(Mobile)	82231436	Contact No.(Office)		Contact No.(Home)
Address 1	BLK 612B #06-895	Address 2	PUNGGOL DRIVE	Address 3
Address 4	SINGAPORE 822612	Address Type	Singapore address	Post Code
Unit No.	06-895			
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	WUN LAI
Contact No.(Mobile)	96498997	Contact No. (Home)	
Email Address	wlyben@yahoo.com	OI Vehicle Number	SMC6728
Claim Description	SMC6728A / SMR9553M ON 20 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
			22/02/2021 17:41
		Claim Close Date	

https://gicclaim.income.com.sg/gcs/icm/eclaim/registrationSave.do

1/3

Report Taken By

LIEW SHAN HUI

☒ Print AK letter

Save Submit

Attachment

▼

Accident No.

MT/1121914

Claim No.

001

Last Doc. Received

☒ Yes ☐ No

Upload Date

22/02/2021 17:42

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

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NO

Choose File

No file chosen

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NO

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No file chosen

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NO

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NO

Message Read

▼ Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Feb 2021 17:42	SAS		Normal	SAS 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Feb 2021 17:42	NRIC/ Driving License	Y	Normal	NRIC/ Driving Li
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 22 Feb 2021 17:41	Photos		Normal	Photos 2

▼ Video List

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