

Claim Handling

Accident MT/1121979

Policy No.	5118973395	Vehicle No.	SLD3110H	GST Registration No.	
Certificate No.					
Policyholder Name	TAN WEI XIANG			Policyholder NRIC	S8718437D
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	96155843	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

▼ Accident Details

Report Date	23/02/2021 09:32	Accident Report Within 24 hrs	Yes	Accident Type	Chain Collision
Date of Accident	22/02/2021	Time of Accident hh:mm	09:05	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ECP TWDS CITY B4 EAST COAST PARK				

▼ 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?	Covered
Additional Excess	0.00				
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 526C #10-525	Address 2	PASIR RIS STREET 51	Address 3	COSTA RIS
Address 4	SINGAPORE 513526	Address Type	Singapore address	Post Code	513526
Unit No.	10-525	Related Policy Number	5118973395		

▼ OI Driver Info

Driver Name	TAN WEI XIANG	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S8718437D	Driver DOB	28/06/1987
Register Date of Driver License	09/06/2006	Driver Age	33	Driving Experience	14
Contact No.(Mobile)	96155843	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 526C	Address 2	PASIR RIS STREET 51	Address 3	COSTA RIS
Address 4	SINGAPORE 513526	Address Type	Singapore address	Post Code	513526
Unit No.	#10-525				
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.		Driver Insurer Company	

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	TAN WEI XIANG	Insured NRIC	
Contact No.(Mobile)	96155843	Contact No. (Home)		Contact No. (Office)	
Email Address	WEIXIANG87@GMAIL.COM	OI Vehicle Number	SLD3110H	TP Vehicle Number	
Claim Description	SLD3110H / SLR499H ON 22 Feb 2021			Name of Preferred Workshop	
Preferred Workshop		Insured Liability	Not at Fault		
Contact No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered		Claim Close Date	23/02/2021 09:36	Date Received	
Report Taken By	ROSILINDA	Workshop Repairer		Total Loss but Repaired	

☒ Print AK letter

Attachment

Accident No.	MT/1121979	Claim No.	001
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Last Doc. Received

☒ Yes

☐ No

Upload Date

23/02/2021 00:00

Path *

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Normal

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Feb 2021 09:36	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2021-2-23
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Feb 2021 09:36	SAS		Normal	SAS 2021-2-23
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Feb 2021 09:36	Photos		Normal	Photos 2021-2-23
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Feb 2021 09:35	Photos		Normal	Photos 2021-2-23
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 23 Feb 2021 09:35	Photos		Normal	Photos 2021-2-23

Video List

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