

Claim Handling

Accident MT/1122105

Policy No.	5092561357-03	Vehicle No.	GBG2529T	GST Registration No.	
Certificate No.					
Policyholder Name	CHUAN SOON HUAT SOH KEE			Policyholder NRIC	
Product Code	COMMERCIAL VEHICLE INSURA	Cover Type	Comprehensive	Loading	
Contact No.(Mobile)	83881333	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	20	Private Hire	

▼ Accident Details

Report Date	23/02/2021 17:35	Accident Report Within 24 hrs	Yes	Accident Type	
Date of Accident	23/02/2021	Time of Accident hh:mm	11:30	Country of Accident	
Reporting Centre		Orange Force		ICM No.	
Accident Location	PIE TOWARDS TUAS BEFORE KALLANG BAHRU EXIT				

▼ 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					
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	98 JOO CHIAT ROAD	Address 2	#01-01A	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.	01-01A	Related Policy Number	5092561357-03		

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	SEVUGAPERUMAL SATHEESHKL	Driver NRIC	G8186118N	Driver DOB	
Register Date of Driver License	03/12/2009	Driver Age	40	Driving Experience	
Contact No.(Mobile)	81778189	Contact No.(Office)		Contact No.(Home)	
Address 1	98 JOO CHIAT ROAD	Address 2	#	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.					
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 type="radio"/> Yes <input checked="" type="radio"/> No
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Modification History

Claim 001

New

Claim Type *	OD-MX	Insured Name	CHUAN S
Contact No.(Mobile)		Contact No. (Home)	NIL
Email Address		OI Vehicle Number	GBG2529
Claim Description	GBG2529T / SJS901G ON 23 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
			23/02/2021 17:38
		Claim Close Date	

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

1/2

☒ Print AK letter

Save

Submit

Attachment

▼

Accident No. MT/1122105

Claim No. 001

Last Doc. Received ☒ Yes ☐ No

Upload Date 23/02/2021 17:38

Path *

Category *

Confidential

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

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No file chosen

Message Read

Clear

Please Select

NO

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Please Select

NO

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NO

▼ Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 23 Feb 2021 17:38	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 23 Feb 2021 17:38	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 23 Feb 2021 17:38	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 23 Feb 2021 17:38	Photos		Normal	Photos 2
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 23 Feb 2021 17:38	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 23 Feb 2021 17:38	SAS		Normal	SAS 20
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 23 Feb 2021 17:38	NRIC/ Driving License	Y	Normal	NRIC/ Driving Li

▼ Video List

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