

Claim Handling

Accident MT/1124165

|                                                     |                                                               |                               |                                                               |                            |      |
|-----------------------------------------------------|---------------------------------------------------------------|-------------------------------|---------------------------------------------------------------|----------------------------|------|
| Policy No.                                          | 5110563860-01                                                 | Vehicle No.                   | GBH576P                                                       | GST Registration No.       | 199  |
| Certificate No.                                     | 5110563860-01-000008                                          |                               |                                                               |                            |      |
| Policyholder Name                                   | SWEE BUILDERS PTE LTD                                         |                               |                                                               | Policyholder NRIC          | 199  |
| Product Code                                        | FLEET MASTER INSURANCE                                        | Cover Type                    | Comprehensive                                                 | Loading                    | 0    |
| Contact No.(Mobile)                                 | 65470091                                                      | Contact No.(Office)           |                                                               | Contact No.(Home)          |      |
| Email Address                                       |                                                               | Special Remark                |                                                               | eCode                      | No   |
| 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(%)            | 0                                                             | Private Hire               | No   |
| ▼ Accident Details                                  |                                                               |                               |                                                               |                            |      |
| Report Date                                         | 12/03/2021 16:17                                              | Accident Report Within 24 hrs | Yes                                                           | Accident Type              | Chai |
| Date of Accident                                    | 11/03/2021                                                    | Time of Accident hh:mm        | 17:00                                                         | Country of Accident        | Sing |
| Reporting Centre                                    |                                                               | Orange Force                  |                                                               | ICM No.                    |      |
| Accident Location                                   | KPE EXIT BARTLEY ROAD EAST L/P 67                             |                               |                                                               |                            |      |
| ▼ 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?         | Cove |
| Additional Excess                                   |                                                               |                               |                                                               |                            |      |
| Total OD Excess Applicable                          | 600.00                                                        | Total TP Excess Applicable    | 0.00                                                          |                            |      |
| ▼ Benefits                                          |                                                               |                               |                                                               |                            |      |
| ▼ GST Registered Information                        |                                                               |                               |                                                               |                            |      |
| GST Registered                                      | Yes                                                           | GST Registration Date         | 20/02/1999                                                    |                            |      |
| GST Registration No.                                | 199801449R                                                    | GST Status Verified           | Yes                                                           |                            |      |
| Modification History                                |                                                               |                               |                                                               |                            |      |
| ▼ Policyholder Mailing Address                      |                                                               |                               |                                                               |                            |      |
| Address 1                                           | 19A TANNERY ROAD                                              | Address 2                     | SINGAPORE 347731                                              | Address 3                  |      |
| Address 4                                           |                                                               | Address Type                  | Singapore address                                             | Post Code                  | 347  |
| Unit No.                                            |                                                               | Related Policy Number         | 5119116296                                                    |                            |      |
| ▼ OI Driver Info                                    |                                                               |                               |                                                               |                            |      |
| Driver Name                                         | Unnamed Driver                                                | Driver Type                   | Unnamed Driver                                                |                            |      |
| Unnamed driver Name                                 | VENKITACHALAM UTHIRAPATHY                                     | Driver NRIC                   | G7208831N                                                     | Driver DOB                 | 27/0 |
| Register Date of Driver License                     | 08/11/2010                                                    | Driver Age                    | 41                                                            | Driving Experience         | 10   |
| Contact No.(Mobile)                                 | 86048182                                                      | Contact No.(Office)           |                                                               | Contact No.(Home)          |      |
| Address 1                                           | 19A # TANNERY ROAD                                            | Address 2                     | SINGAPORE 347731                                              | Address 3                  |      |
| Address 4                                           |                                                               | Address Type                  | Singapore address                                             | Post Code                  | 347  |
| Unit No.                                            |                                                               |                               |                                                               |                            |      |
| Does he own a Singapore Registered car?             | <input type="radio"/> Yes <input checked="" type="radio"/> No | Driver Vehicle No.            |                                                               | Driver Insurer Company     |      |
| Declaration                                         |                                                               |                               |                                                               |                            |      |
| Breathalyser or Blood Test Reading?                 | 0 mg                                                          | Any injury?                   | <input type="radio"/> Yes <input checked="" type="radio"/> No |                            |      |
| Modification History                                |                                                               |                               |                                                               |                            |      |
|                                                     |                                                               |                               |                                                               |                            |      |
| Claim 001 New                                       |                                                               |                               |                                                               |                            |      |
|                                                     |                                                               |                               |                                                               |                            |      |
| Claim Type *                                        | OD-MX                                                         | Insured Name                  | SWEE BUILDERS PTE LTD                                         | Insured NRIC               | 199  |
| Contact No.(Mobile)                                 | 96709979                                                      | Contact No.(Home)             |                                                               | Contact No.(Office)        | 654  |
| Email Address                                       | sweebpl@singnet.com.sg                                        | OI Vehicle Number             | GBH576P                                                       | TP Vehicle Number          | GBC  |
| Claim Description                                   | GBH576P / GBG5140K ON 11 Mar 2021                             |                               |                                                               | Name of Preferred Workshop |      |
| Preferred Workshop Contact No.                      |                                                               | Insured Liability *           | Not at Fault                                                  |                            |      |
| Require Finalisation                                | Yes                                                           | Preferred Repair Option       | Preferred Workshop, Name unknown                              | GIA report                 | Rec  |
| Date Registered                                     | 12/03/2021 16:22                                              | Claim Close Date              |                                                               | Date Received              | 12/0 |
| Report Taken By                                     | HUI ZHEN                                                      |                               |                                                               |                            |      |
| <input checked="" type="checkbox"/> Print AK letter |                                                               |                               |                                                               |                            |      |

Save

Submit

Attachment

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Accident No. 

MT/1124165

Claim No. 

001

Last Doc. Received 

☒ Yes

☐ No

Upload Date 

12/03/2021 16:22

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Message Read

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▼ Attachment List

| Attachment                                                                          | Uploaded By/Date                                                                | Category              |  | Urgency | Description                     |
|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-----------------------|-----------------------------------------------------------------------------------|---------|---------------------------------|
|    | NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 12 Mar 2021 16:22 | Photos                |                                                                                   | Normal  | Photos 2021-3-12                |
|    | NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 12 Mar 2021 16:22 | Photos                |                                                                                   | Normal  | Photos 2021-3-12                |
|    | NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 12 Mar 2021 16:22 | Photos                |                                                                                   | Normal  | Photos 2021-3-12                |
|    | NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 12 Mar 2021 16:22 | Photos                |                                                                                   | Normal  | Photos 2021-3-12                |
|   | NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 12 Mar 2021 16:22 | Photos                |                                                                                   | Normal  | Photos 2021-3-12                |
|  | NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 12 Mar 2021 16:22 | Photos                |                                                                                   | Normal  | Photos 2021-3-12                |
|  | NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 12 Mar 2021 16:22 | Photos                |                                                                                   | Normal  | Photos 2021-3-12                |
|  | NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 12 Mar 2021 16:22 | SAS                   |                                                                                   | Normal  | SAS 2021-3-12                   |
|  | NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVI CES) on 12 Mar 2021 16:22 | NRIC/ Driving License | Y                                                                                 | Normal  | NRIC/ Driving License 2021-3-12 |

▼ Video List

| Uploaded By/Date                                                         | Folder Date | File Name |  | Source |
|--------------------------------------------------------------------------|-------------|-----------|---------------------------------------------------------------------------------------|--------|
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