Claim Handling

Task Transfer Exit

LOS SAL SUB

Accident MT/1124438

Policy No.	5120289479	Vehicle No.	SFU4168S	GST Registration No.	
Certificate No.					
Policyholder Name	LEE CHIN CHIAT (LI QINJIE)			Policyholder NRIC	S7035641D
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	97939121	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	(•) No ( ) Yes	TCA	(•) No ( ) Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	50	Private Hire	No

Accident Details

Report Date	15/03/2021 17:02	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	12/03/2021	Time of Accident hh:mm	15:40	Country of Accident	Singapore
Reporting Centre	NATIONAL ASSESSMENT CENTF	Orange Force	No	ICM No.	
Accident Location	TAMPINES AVE 5 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?	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	86 JELLICOE ROAD	Address 2	#14-20 CITYLIGHTS	Address 3	SINGAPORE 208745
Address 4		Address Type	Singapore address	Post Code	208745
Unit No.		Related Policy Number	5120289479		

OI Driver Info

Driver Name	LEE CHIN CHIAT	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S7035641D	Driver DOB	22/10/1970
Register Date of Driver License	14/04/2001	Driver Age	50	Driving Experience	19
Contact No.(Mobile)	97939121	Contact No.(Office)		Contact No.(Home)	
Address 1	86 JELLICOE ROAD	Address 2	#14-20 CITYLIGHTS	Address 3	SINGAPORE 208745
Address 4		Address Type	Singapore address	Post Code	208745
Unit No.					
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
Modification History			

Investigation

Claim 002 OD-MD

Claim Case Officer Yap Chee Ling

Claim Type	OD-MD	Insured Name	LEE CHIN CHIAT (LI QINJIE)	Insured NRIC	S7035641
Contact No.(Mobile)	97939121	Contact No. (Home)	68849646	Contact No. (Office)	
Email Address	CHIN_CHIAT.LEE@LINXENS.CO	OI Vehicle Number	SFU4168S	TP Vehicle Number	SHA7929A
Claim Description	SFU4168S / SHA7929A ON 12 Mar 2021			Name of Preferred Workshop	
Preferred Workshop Contact No. / Require Finalisation: Yes	Preferred Repair Option / income to assign workshop	Insured CIA report / Liability at Fault / Resolved			
Date Registered	16/03/2021 10:22	Claim Close Date		Date Received	16/03/202
Report Taken By	SHAN HUI	Workshop Repairer		Total Loss but Repaired	
[x] Print AK letter				OD Excess Collected by Workshop	
Modification History					

Special Claim Creation Approval

Approval		Reason	
Remarks			

damage assessment | Attachment

Vehicle Info

Vehicle Make	CHEVROLET	Vehicle Model	ORLANDO	Engine Capcity	
Date of Registration	28/11/2014	Classis No.	KL1YA7589FK011235		
Towing Required *	(•) Yes ( ) No	Vehicle in IDAC *	(•) Yes ( ) No	Parallel Import *	( ) Yes (•) No
Type of Tender *	Own Damage	Assessor Name *	SIMON	Survey Current Status	
IDAC/Workshop Name	NATIONAL ASSESSMENT CENTR	IDAC/Workshop Location	51 UBI AVENUE 1 #01-25 PAYA		
Windscreen Parts & Labour Cost		Total Loss *	(•) Yes ( ) No		
Market Value($) *	40000.00	Scrape Value($) *	36781.00	Economical Repair Value($) *	
Remark *	RECOMMEND TOTAL LOSS DUE TO NOT ECONOMICAL TO REPAIR.				
Remark for Supplementary					

Damage Listing

NUM

- LOWER SPOILER
- LUGGAGE
- MAIN STAND
- MASTER PUMP
- METER (M/C)
- MIRROR
- MONOKEY BOX (M/C)
- MUDFLAP
- MUFFLE (M/C)
- NOSE PANEL
- NUMBER PLATE
  - NUMBER PLATE
    - NUMBER PLATE (FRONT)
    - NUMBER PLATE (REAR)
  - NUMBER PLATE BASE
  - NUMBER PLATE BRACKET
  - NUMBER PLATE CENTRE PAD
  - NUMBER PLATE GARNISH
  - NUMBER PLATE LAMP
  - NUMBER PLATE LAMP BRACKET
- OIL COOLER

No.	Part No.	Description	Qty *	Repair Coc
1	32200101	NUMBER PLATE (FRONT)	1	Unconfirm

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