

Claim Handling

Accident MT/1125312

Policy No.	5119955524	Vehicle No.	SLT8410A	GST Registration No.	
Certificate No.					
Policyholder Name	SHIRLEY SOH			Policyholder NRIC	
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	
Contact No.(Mobile)	97955625	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	40	Private Hire	
▼ Accident Details					
Report Date	23/03/2021 09:42	Accident Report Within 24 hrs	Yes	Accident Type	
Date of Accident	20/03/2021	Time of Accident hh:mm	16:55	Country of Accident	
Reporting Centre		Orange Force		ICM No.	
Accident Location	Airport 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 126 #17-896	Address 2	RIVERVALE STREET	Address 3	
Address 4		Address Type	Singapore address	Post Code	
Unit No.		Related Policy Number	5119955524		
▼ OI Driver Info					
Driver Name	SOH SHIRLEY (SU SHIRLEY)	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S7521726I	Driver DOB	
Register Date of Driver License	09/01/2007	Driver Age	45	Driving Experience	
Contact No.(Mobile)	97955625	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 126 #17-896	Address 2	RIVERVALE STREET	Address 3	
Address 4		Address Type	Singapore address	Post Code	
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					

Claim 001

New

Claim Type *	OD-MX	Insured Name	SHIRLEY SOH	Insured NRIC	
Contact No.(Mobile)	97955625	Contact No.(Home)	NIL	Contact No.(Office)	
Email Address		OI Vehicle Number	SLT8410A	TP Vehicle Number	
Claim Description	SLT8410A / GBJ2070H ON 20 Mar 2021				Name of Preferred Workshop
Preferred Workshop Contact No.		Insured Liability *	Not at Fault		
Require Finalisation	Yes	Preferered Repair Option	Preferred Workshop, Name unknown	GIA report	
Date Registered	23/03/2021 09:44	Claim Close Date		Date Received	
Report Taken By	SHAN HUI				
☒ Print AK letter					

Save

Submit

Attachment

3/23/2021

Claim Handling(accident reporting Claim Task)

Accident No.

MT/1125312

Claim No.

001

Last Doc. Received

Yes

No

Upload Date

23/03/2021 09:49

Path *

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Attachment List

Attachment

Uploaded By/Date

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Urgency

Description

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SAS 2021-3-23

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 23 Mar 2021 09:49

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NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 23 Mar 2021 09:49

Photos

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Video List

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