

Claim Handling

Accident MT/1125497

Policy No.	5119158972	Vehicle No.	SJT2916X	GST Registration No.	
Certificate No.					
Policyholder Name	KHOO SIEW CHIN			Policyholder NRIC	S68
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	96860623	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(%)	10	Private Hire	No

▼ Accident Details

Report Date	24/03/2021 11:40	Accident Report Within 24 hrs	Yes	Accident Type	Colli
Date of Accident	22/03/2021	Time of Accident hh:mm	18:50	Country of Accident	Sing
Reporting Centre		Orange Force		ICM No.	
Accident Location	Parsi 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	2500.00	YIED TP Excess	0.00	Driver is Covered?	Cove
Additional Excess	0				
Total OD Excess Applicable	3100.00	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 250 #07-364	Address 2	BANGKIT ROAD	Address 3	SIN
Address 4		Address Type	Singapore address	Post Code	670
Unit No.		Related Policy Number	5119158972		

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	ALAN POH CHENG FA	Driver NRIC	S9614471G	Driver DOB	27/0
Register Date of Driver License	22/09/2016	Driver Age	24	Driving Experience	4
Contact No.(Mobile)	96860623	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 250 #7-364	Address 2	BANGKIT ROAD	Address 3	SIN
Address 4		Address Type	Singapore address	Post Code	670
Unit No.	7-364				
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 checked="" type="radio"/> Yes <input type="radio"/> No
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Modification History

Modification History	
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Claim 001

New

Claim Type *	OD-MX	Insured Name	KHOO SIEW CHIN	Insured NRIC	S68
Contact No.(Mobile)	94239761	Contact No.(Home)	63676438	Contact No.(Office)	
Email Address		OI Vehicle Number	SJT2916X	TP Vehicle Number	PC1
Claim Description	SJT2916X / PC1882J ON 22 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	24/03/2021 11:43	Claim Close Date		Date Received	24/0
Report Taken By	SHAN HUI				

Print AK letter

Save Submit

Attachment

Accident No. Claim No.
 Last Doc. Received Yes No Upload Date

Path *	Category *	Confidential	Urgency *
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> <input type="text" value="Please Select"/> ▼	<input type="text" value="NO"/> ▼	<input type="text" value="Normal"/> ▼
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> <input type="text" value="Please Select"/> ▼	<input type="text" value="NO"/> ▼	<input type="text" value="Normal"/> ▼
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> <input type="text" value="Please Select"/> ▼	<input type="text" value="NO"/> ▼	<input type="text" value="Normal"/> ▼
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> <input type="text" value="Please Select"/> ▼	<input type="text" value="NO"/> ▼	<input type="text" value="Normal"/> ▼
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> <input type="text" value="Please Select"/> ▼	<input type="text" value="NO"/> ▼	<input type="text" value="Normal"/> ▼
<input type="button" value="Choose File"/> No file chosen	<input type="button" value="Clear"/> <input type="text" value="Please Select"/> ▼	<input type="text" value="NO"/> ▼	<input type="text" value="Normal"/> ▼
<input type="button" value="Message Read"/>			

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Description
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Mar 2021 11:44		NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2021-3-24
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Mar 2021 11:43		NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2021-3-24
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Mar 2021 11:43		SAS		Normal	SAS 2021-3-24
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Mar 2021 11:43		Photos		Normal	Photos 2021-3-24
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Mar 2021 11:43		Photos		Normal	Photos 2021-3-24
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Mar 2021 11:43		Photos		Normal	Photos 2021-3-24
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Mar 2021 11:43		Photos		Normal	Photos 2021-3-24
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 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Mar 2021 11:43		Photos		Normal	Photos 2021-3-24
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Mar 2021 11:43		Photos		Normal	Photos 2021-3-24
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Mar 2021 11:43		Photos		Normal	Photos 2021-3-24
 NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 24 Mar 2021 11:43		Photos		Normal	Photos 2021-3-24

Video List

Uploaded By/Date	Folder Date	File Name		Source
<input type="button" value="Display in New Window"/> <input type="button" value="Scan and uploading"/>				