Claim Handling

Accident MT/1125607

Policy No.	5121110857	Vehicle No.	SLH9863H	GST Registration No.	
Certificate No.					
Policyholder Name	CAI WENCHUAN			Policyholder NRIC	
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	
Contact No.(Mobile)	91715285	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFK	● No ○ Yes	TCA	● No ○ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	10	Private Hire	

▽ **Accident Details**

Report Date	25/03/2021 09:12	Accident Report Within 24 hrs	Yes	Accident Type	
Date of Accident	20/03/2021	Time of Accident hh:mm	12:40	Country of Accident	
Reporting Centre		Orange Force		ICM No.	
Accident Location	Yishun Ave 1, Singapore 769130				

▽ **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**

Coverage		Sum Insured	
Accessory		2000	

▽ **GST Registered Information**

GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified		Yes	
Modification History					

▽ **Policyholder Mailing Address**

Address 1	BLK 107A #04-577	Address 2	CANBERRA STREET	Address 3	
Address 4	SINGAPORE 751107	Address Type	Singapore address	Post Code	
Unit No.	04-577	Related Policy Number	5121110857		

▽ **OI Driver Info**

Driver Name	CAI WENCHUAN	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S8623973F	Driver DOB	
Register Date of Driver License	06/09/2007	Driver Age	34	Driving Experience	
Contact No.(Mobile)	91715285	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 107A #04-577	Address 2	CANBERRA STREET	Address 3	
Address 4	SINGAPORE 751107	Address Type	Singapore address	Post Code	
Unit No.	04-577				
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	CAI WENCHUAN	Insured NRIC	
Contact No.(Mobile)	91715285	Contact No.(Home)		Contact No.(Office)	
Email Address		OI Vehicle Number	SLH9863H	TP Vehicle Number	
Claim Description	SLH9863H / JPQ844 ON 20 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	
Date Registered	25/03/2021 09:14	Claim Close Date		Date Received	
Report Taken By	SHAN HUI				

☑ Print AK letter

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Attachment

Accident No.	MT/1125607	
Last Doc. Received	◉ Yes ○ No	

Claim No.	001
Upload Date	25/03/2021 09:15

Path *   **Category ***   **Confidential**   **Urgen**

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Message Read

▽ **Attachment List**

Attachment	Uploaded By/Date	Category	🔑	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Mar 2021 09:15	Photos		Normal	Photos 2021-3-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Mar 2021 09:15	Photos		Normal	Photos 2021-3-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Mar 2021 09:15	Photos		Normal	Photos 2021-3-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Mar 2021 09:15	Photos		Normal	Photos 2021-3-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Mar 2021 09:15	Photos		Normal	Photos 2021-3-25
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 25 Mar 2021 09:15	Photos		Normal	Photos 2021-3-25

▽ **Video List**

Uploaded By/Date	Folder Date	File Name	🔑	Sou

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