

Claim Handling

Accident MT/1125858

Policy No.	5109123823-01	Vehicle No.	SLV5478P	GST Registration No.
Certificate No.	5109123823-01-000009			
Policyholder Name	JOURNEY MOTORS			Policyholder NRIC
Product Code	FLEET MASTER INSURANCE	Cover Type	Third Party	Loading
Contact No.(Mobile)	98575910	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	0	Private Hire
▼ Accident Details				
Report Date	26/03/2021 18:02	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	25/03/2021	Time of Accident hh:mm	09:55	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	Upper E Coast Rd, Singapore			
▼ Total Excess Applicable				
Excess Type	Per Accident	Windscreen Excess	0.00	
OD Standard Excess	0.00	TP Standard Excess	1,500.00	
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?
Additional Excess	0			
Total OD Excess Applicable	0.00	Total TP Excess Applicable	1,500.00	
▼ 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 603 #04-227	Address 2	HOUGANG AVENUE 4	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	04-227	Related Policy Number	5121546517	
▼ OI Driver Info				
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	JAMARI BIN MOHAMED	Driver NRIC	S1125075J	Driver DOB
Register Date of Driver License	30/09/2005	Driver Age	66	Driving Experience
Contact No.(Mobile)	91068211	Contact No.(Office)		Contact No.(Home)
Address 1	BLK 122 #04-45	Address 2	BISHAN STREET 12	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	04-45			
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	JOURNEY MOTORS	Insured NRIC
Contact No.(Mobile)		Contact No.(Home)		Contact No.(Office)
Email Address		OI Vehicle Number	SLV5478P	TP Vehicle Number
Claim Description	SLV5478P / SMT8447H ON 25 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	26/03/2021 18:04	Claim Close Date		Date Received
Report Taken By	SHAN HUI			
☒ Print AK letter				

Save

Submit

Attachment

3/26/2021

Claim Handling(accident reporting Claim Task)

Accident No.

MT/1125858

Claim No.

001

Last Doc. Received

☒ Yes

☐ No

Upload Date

26/03/2021 18:05

Path *

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Message Read

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Confidential

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Attachment List

Attachment

Uploaded By/Date

Category

Urgency

Description



NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 26 Mar 2021 18:05

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SAS 2021-3-26



NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 26 Mar 2021 18:05

NRIC/ Driving License

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NRIC/ Driving License 2021-



NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 26 Mar 2021 18:05

Photos

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Photos 2021-3-26



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NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 26 Mar 2021 18:04

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NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 26 Mar 2021 18:04

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Photos 2021-3-26

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