

Claim Handling

Accident MT/1126510

Policy No.	5112974558-01	Vehicle No.	SJM7193T	GST Registration No.	
Certificate No.	5112974558-01-000022				
Policyholder Name	MUNCHI LEASING PTE. LTD.			Policyholder NRIC	201832996K
Product Code	FLEET MASTER INSURANCE	Cover Type	Third Party	Loading	0
Contact No.(Mobile)	NA	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(%)	0	Private Hire	Not available

▼ Accident Details

Report Date	31/03/2021 17:12	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	30/03/2021	Time of Accident hh:mm	07:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	Victoria Ln				

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess			
OD Standard Excess		TP Standard Excess	1,500.00		
YIED OD Excess		YIED TP Excess		Driver is Covered?	Not Applicable
Additional Excess	0.00				
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	80 PLAYFAIR ROAD	Address 2	#02-15 KAPO FACTORY BUILDI	Address 3	SINGAPORE 367998
Address 4		Address Type	Singapore address	Post Code	367998
Unit No.	01-20	Related Policy Number	5112974558-01		

▼ OI Driver Info

Driver Name		Driver Type			
Unnamed driver Name		Driver NRIC		Driver DOB	
Register Date of Driver License		Driver Age		Driving Experience	
Contact No.(Mobile)		Contact No.(Office)		Contact No.(Home)	
Address 1		Address 2		Address 3	
Address 4		Address Type	Foreign address	Post Code	
Unit No.					
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.		Driver Insurer Company	
Modification History					

Claim 002 OD-MX

New

Claim Type *	OD-MX ▾	Insured Name	MUNCHI LEASING PTE. LTD.	Insured NRIC	201832996K
Contact No.(Mobile)	93639889	Contact No.(Home)		Contact No.(Office)	+
Email Address	CARENTING101@GMAIL.COM	OI Vehicle Number	SJM7193T	TP Vehicle Number	SMA739T
Claim Description	SJM7193T / SMA739T ON 30 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	Received ▾
Date Registered	31/03/2021 17:28	Claim Close Date		Date Received	31/03/2021 00:00
Report Taken By	ROSLINDA	Workshop Repairer		Total Loss but Repaired	

☒ Print AK letter

Save Submit

Attachment

▼

Accident No.	MT/1126510	Claim No.	002
Last Doc. Received	☒ Yes ☐ No	Upload Date	31/03/2021 00:00

Path *

Choose File No file chosen

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Message Read

Category *

Confidential

Urgency *

Description

Clear	Please Select ▾	NO ▾	Normal ▾	
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☐ Send Mes

▼ Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)
NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2021-3-31	
CES) on 31 Mar 2021 17:28					

	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 31 Mar 2021 17:28	SAS	Normal	SAS 2021-3-31
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 31 Mar 2021 17:28	Photos	Normal	Photos 2021-3-31
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 31 Mar 2021 17:28	Photos	Normal	Photos 2021-3-31
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 31 Mar 2021 17:28	Photos	Normal	Photos 2021-3-31
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 31 Mar 2021 17:28	Photos	Normal	Photos 2021-3-31
Video List				
Uploaded By/Date		Folder Date	File Name	Source
			Display in New Window	Scan and uploading