eFNOL Lodge Claim (Motor)

Description

Thank you for using QBE Motor Insurance. This process shows how you can lodge or register your claim on eFNOL and helps you prepare required information/documents to expedite this claim process.

How do I do it?

Step 1: Register claim by authenticating the policyholder

Logging into eFNOL

- 1. Enter the policy number
- 2. Enter the Date of Damage/Accident within the policy period
- 3. Click Start
- User can scroll down to watch a short video on how to file a insurance claim where necessary.
- Click on the claim types under "Documents to prepare" to view a list of supporting documents required for submission.





Get Started

As a reference point, a list of what you need to do is listed on the left of the screen.

- 6. In Policy Authentication you need to key in the Policyholder's Full Name and Vehicle Registration Number.
- 7. Click Next.

Note: Policyholder full name and Vehicle Registration Number should match with the information as shown in policy schedule.

Confirm Vehicle Details

- Review vehicle details pre-populated by the system based on Policy information and edit where updates are required.
- 9. Ensure that all mandatory fields with asterisk are populated.

10. Click Next.

Note: Policyholder full name and Vehicle Registration Number will be pre-populated and not editable.

Velcome Notor Insurance Policy V0100007	Authentication	
Get Started	Full name of the policyholder and Vehicle Registration Number for verification	i i i i i i i i i i i i i i i i i i i
Confirm Vehicle Details	Policyholder full name*	
) Claim details		
Payment & Contact	Vehicle Registration Number*	
🛞 Review & Submit		
		NEXC 7
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COMPANY CHAN MA LTD.	Confirm Vehicle Details	
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Step 2: Provide information by selecting the relevant claim type

Claims Details	& QBE			
 Click on the claim type. On the left column is a list of details to guide you through the process. Click Next. 	Welcome VAN MAX (HAN MA LTD. Motor Insurance Policy V0100007 Get Started Confirm Vehicle Details Calim details Payment & Contact Review & Submit	C Back	Motor Accident/Damage	Theft/Attempted Theft
Note: eFNOL will only show the applicable claim type subject to your policy coverage.		Save for Later		Next⇒
Example here: <i>Motor</i>	⊗ QBE	_		
type:	Welcome VAN MAX (HAN MA LTD.	t Back		
Details of the	Get Started	Tell us what happened Accident/Incident Details		
Damage/Accident	Confirm Vehicle Details	Date of accident/incident*		
13. Verify the Date of	Motor Accident/Damage Accident/Incident Details	01/02/2020	e	
Damage/Accident	Driver Details Details of the Damage to	Country where accident/incident hap	pened?*	
populated by the system	Third Party Loss Details	Place where accident/incident happen	ed?*	
based on user input on	Supporting documents	Use my current location		
 14. Provide additional details by filling in all mandatory fields with asterisks. 15. Click Next. 	(5) Contact (5) Review & Submit	Provention that was a series of the series o	organia ADR ADR HODAN HODAN ARR Day ARR Day ARR Day	
		Google ^{ther}	fees 2022 Terms of Use maged?*	
		Yes No)	
		Purpose of use at the time of accident/	incident	
		Please select	× .	



Details of driver

- 16. Select name of the driver from the dropdown list. If not in drop down, select Others and enter the name, age and contact number for the unnamed Driver manually.
- 17. Provide additional details by filling in all mandatory fields with asterisks.
- 18. Click Next.

Supporting documents

Is there any m bottom, etc.?"

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No

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🛞 Review & Submit



Details of repair

- 19. If you claim the repair cost for your vehicle, click Yes.
- 20. If you do not, click No.
- 21. If Yes, Select the area where the vehicle has been damaged;
- 22. You will also need to Provide additional details by filling in all mandatory fields with asterisks



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Panel motor repairing service

- 23. If you repair your vehicle in one of the repairer in the QBE panel motor repairing service, select the applicable repairer in the drop down menu.
- 24. If you repair your vehicle in other repairer, select **Choose my own repairer in the** drop down menu and enter **name** and **address** for the repairer.
- 25. You will also see the list of Panel Repairer Details by click on **Click here** under the **Select Repairer** box.
- 26. Select a district in the drop down menu to filter the repairer by location.





Step 3 : Fill up the general informations and upload the supporting document(s)

Third party loss details

- 27. If you have involved third party claim in the motor accident, click **Yes.**
- 28. If you do not, click **No**.29. Provide additional details
- by filling in all mandatory fields with asterisks;
- 30. Click Next.

Note: you are unable to submit a "Motor Accident/ Damage" claim if you select "No" for both questions "Are you claiming the repair cost of your vehicle" and "Did the accident involve another Vehicle(s)/ Person(s)/ Property?" (Number 19 & 27)

Police report

31. If you have reported to the police for the incident, click **Yes.**

32. If you do not, click No.

- Provide additional details by filling in all mandatory fields with asterisks;
- 34. Click Next.







Supporting Documents

- 35. Upload supporting documents for this particular claim type as listed below.
- If there are additional documents, click on Upload here and add more documents.

37. Click Next.

QBE

🛞 Review & Submit



+ Add another file
Police statement

Drag and Drop file here or Choose

file(s)

Screening breath test result form, if any to Drag and Drop file here or Choose file(s)

+ Add another file Photos showing the accident scene and involved vehicles, if available

2 Drag and Drop file here or Choose file(s)

+ Add another file Car camera record, if any

Drag and Drop file here or Choose file(s)

+ Add another file Repair quotation, if available

 $\ensuremath{\pounds}$ Drag and Drop file here or Choose file(s)

+ Add another file Any third party correspondences

1 Drag and Drop file here or Choose file(s)

+ Add another file If you have more documents that will help us process your claim. Upload

Please retain the original copy of the submitted documents for 3 months.

Save for Later



Another Insurance

- 38. If you have another insurance covering this claim, click **Yes.**
- 39. If you do not, click No.
- If Yes, provide the name of insurance company and the policy number;
- 41. You will also need to update if the claimant is going to submit a claim to the other policy.
- 42. If No, click Next.



Contact information

43. Fill in Name, Mobile number and Email address for further updates. Select if you would like your agent or broker to be cc'ed in all email notifications.

44. Clik Next

Welcome VAN MAX (HAN MA LTD.	 ← Back
	Contact information
Get Started	We may contact you for any update of the claim
Confirm Vehicle Details	Name*
Motor Accident/Damage	VAN MAX (HAN MA LTD.
Accident/Incident Details	Mobile Number*
Driver Details	
Details of the Damage to Insured Vehicle	
Third Party Loss Details	Email Address*
Police Report	
Supporting documents	Confirm Email Address*
Contact	
🛞 Review & Submit	Would you like us to send a copy of all email notifications to your agent / broker on this claim?*
	Yes No

Save for Late



Summary of the claim submission.

- 45. Review the information in summary of claim submission.
- 46. Scroll down to review Payment and Contact information to ensure accuracy.
- 47. Click on the links to read **Declaration** and **Personal Information** Collection Statement.
- 48. Check the boxe under Terms and Conditions to indicate acceptance.
- 49. If all information is in order, click Submit.

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- 50. A claim submitted notification and a case number will appear.
- 51. Retain this information for future reference to follow up on the claim.
- 52. Click Save to download PDF of the summary claim submission document for your future reference.
- 53. Please close this claim submission.

End of Process

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Add-on Function: Save later

IF YOU WOULD LIKE TO SAVE FOR LATER

- 54. At any point you need to stop, click **Save for later**.
- 55. Key in your email address.
- 56. Click Next. An email will be sent to you with a link that you click on later to resume your claim registration, at a time convenient to you.
- 57. If you want to continue, simply click the "X" to close this window and continue with your claim submission.

Note: The link embedded in the email is **only valid for 7 days**. Within 7 days, user can click and be re-directed to the authentication screen. Once authenticated, user will be able to see saved data.



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