

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	023A
Vehicle No.:	FW463E
Vehicle to be Exported:	No
Intended Deregistration Date:	30 Sep 2024
Vehicle Make:	HONDA
Vehicle Model:	ADV 160
Primary Colour:	Black
Manufacturing Year:	2022
Engine No.:	KFB2E1005644
Chassis No.:	MH1KFB210NK005505
Maximum Power Output:	-
Open Market Value:	\$4,056.00
Original Registration Date:	23 Dec 2022
First Registration Date:	23 Dec 2022
Transfer Count:	1
Actual ARF Paid:	\$609.00

PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00

COE Expiry Date:	22 Dec 2032
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$11,589.00
COE Rebate Amount:	\$9,532.00
Total Rebate Amount:	\$9,532.00

You will not be eligible for any COE rebate from the current COE (including unused COE from any lay-up period/s), if you renew your COE.  
The information contained herein is correct as at 30 Sep 2024

OK



**SINGAPORE  
POLICE FORCE**



T/20240826/7012

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 4

Report No. T/20240826/7012

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/08/2024 10:12		Vide Report No.:		Station Diary No.:
<b>Informant's Particulars</b>				
Name of Informant: CHIA YONG SIANG		Address: 9 CANTONMENT CLOSE #29-85 SINGAPORE 080009		
ID Type / ID No.: NRIC NO / S7477023A		Contact No.: Home/Office: Mobile: 82020422		
Nationality: SINGAPORE CITIZEN		Email: CHIA2195@YAHOO.COM.SG		
Sex: Male	Age: 50	Date of Birth: 04/06/1974	Type of Informant: Rider	
Race: Chinese		Language: English		
Occupation: Food Panda Delivery		Driving Licence Information: Class: Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 24/08/2024 11:30	Type of Location: Straight Road
Location:  LORONG 4 TOA PAYOH				
Weather: Drizzling		Road Surface: Wet		
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FW463E	Motorcycle	HONDA	ADV 160	Black		0
SJW3386C	Motor car	VOLKSWAGON	TOURAN	Grey		1

<b>Details of Vehicle Insurance</b>				
Vehicle No.	Insurance Company	Insurance No.	Effective Date	Expiry Date
FW463E	NTUC Income Insurance Co-Operative Limited	5132937837-01	23/12/2023	22/12/2024



**SINGAPORE  
POLICE FORCE**



T/20240826/7012

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470600

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Report No. T/20240826/7012

## CONTINUATION OF REPORT

<b>Details of Person Involved:</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Rider:</b>			
Name	CHIA YONG SIANG	ID No.	S7477023A
Related Vehicle	FW463E (Motorcycle)	Contact No.	82020422
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave (MC)	NIL	Degree of Injury	NIL
<b>Rider:</b>			
Name	CHIA YONG SIANG	ID No.	S7477023A
Related Vehicle	FW463E (Motorcycle)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	25/08/2024	Date Discharge	25/08/2024
No. of Days granted Medical Leave (MC)	03	Degree of Injury	Slight
<b>Rider:</b>			
Name	CHIA YONG SIANG	ID No.	S7477023A
Related Vehicle	FW463E (Motorcycle)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave (MC)	NIL	Degree of Injury	Slight



**SINGAPORE  
POLICE FORCE**



T/20240826/7012

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408855  
Tel No: 65470000

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Report No. T/20240826/7012

CONTINUATION OF REPORT

<b>Driver</b>			
Name	CREONG WAI MUN		ID No. S7901456G
Related Vehicle	SJW3386C (Motor car)		Contact No. 98730349
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave (MC)	NIL	Degree of Injury	NIL

**Brief Details.**

On 24 August 2024 (Sat) at about 11.30am, I was riding my motorcycle bearing registration number plate: FW 463E along Lorong 4 Toa Payoh straight on the left lane out of two lanes.

Suddenly, one car bearing registration number plate: SJW 3386C cut into my lane without giving way to me from my right and hit my motorcycle and I fell down on the road. I had no time to react at all.

We exchanged particulars. The next day, I felt unwell and pain over my body and went to see a doctor at A Medical Clinic and was given 3 days mc.

My motorcycle: FW 463E

The other party car: SJW 3386C



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20240826/7012

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Report No. T/20240826/7012

CONTINUATION OF REPORT

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 26/08/2024 10:12
Officer In Charge Of Case: TP / AEIT / PHNG KAR SOON Contact No.: 65476439	Classification Of Case:

NP168

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Actual Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

### ACCIDENT STATEMENT

Date of First Submission	26/08/2024 10:46 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	24/08/2024 11:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	LORONG 4 TOA PAYOH
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FW463E
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHIA YONG SIANG
NRIC No	S7477023A
Email Address	CHIA2195@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-82020422
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Honda
Model	ADV 160
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Motorcycle
Transmission	Manual
CC	157
Vehicle Fuel	Petrol
First Registration Date	23/12/2022
Chassis no	MH1KFB210NK005505
Effective Date/Time of Ownership	24/12/2022 11:12 (SGT)

#### INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	-

#### DRIVER

Name of Driver	CHIA YONG SIANG
NRIC No	S7477023A
Date Of Birth	04/06/1974
Occupation	Indoor
Driving Pass Date	13/11/1996
Driving License Pass Class	2B
Driving License Validity	Valid
Driving experience	27 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82020422
Alt. Phone Number	-
Email Address	CHIA2195@YAHOO.COM.SG
Address	BLK 9 CANTONMENT CLOSE 29-85 SINGAPORE 080009
Address complement	-
Postcode	-
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

#### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Major/Minor Rd
Weather Conditions	Raining
Road Surface	Wet

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO THE SKETCH PLAN

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

## DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJW3386C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person	CHIA YONG SIANG
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FW463E
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	No



**SKETCH PLAN**

**IMPORTANT NOTICE**

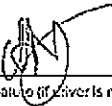
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Actual Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

**3. Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

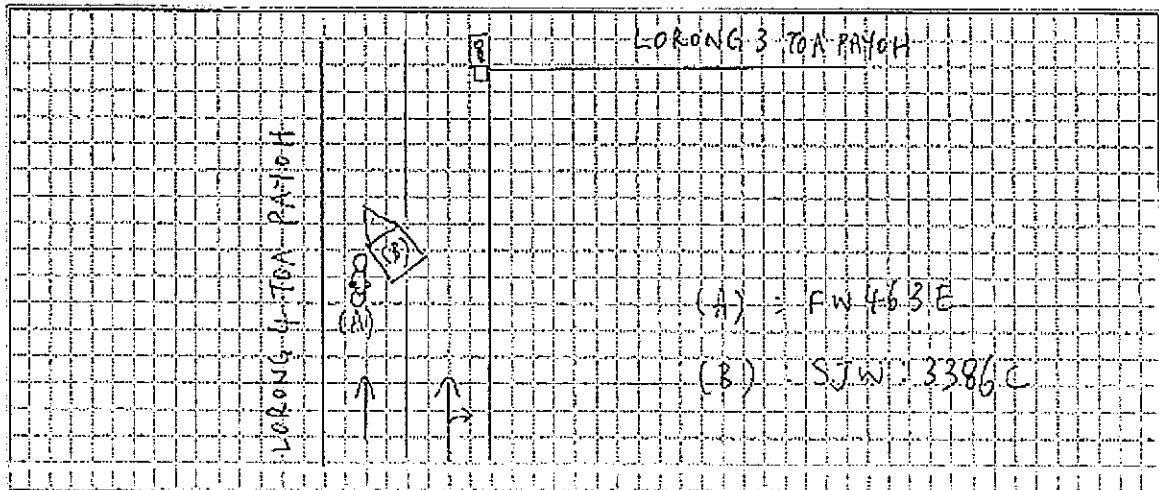
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
 (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

  
Policyholder's Signature / Date & Time

  
Driver's Signature (if Driver is not the policyholder) / Date & Time

  
Witnessed by  (Name as in NRIC/ID card)

**Sketch Plan**





Describe Circumstance of the Accident	
VEHICLE NO: FW 463E	ACCIDENT DATE & TIME: 24 AUGUST 2024 11:30am
CONTACT NUMBER: 82020422	E-MAIL: CHIA2195@yahoo.com.sg
LOCATION: LORONG 4 TOA PAYOH	
OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION.	
PLEASE STATE: <input type="checkbox"/> CLAIM OWN POLICY <input type="checkbox"/> CLAIM THIRD PARTY <input type="checkbox"/> CLAIM ODTP AT OTHER WORKSHOP <input type="checkbox"/> REPORTING ONLY	

**Declaration**

I/We declare the foregoing particulars are true in every respect.

  
 Policyholder's Signature / Date & Time

  
 Driver's Signature (if driver is not the policyholder) / Date & Time

  
 Witnessed by Reporting Centre Personnel  
 (Name as in NRIC card)

## Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960  
ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)  
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

**Certificate Number** : 5132937837-01

**Cover** : Third Party, Fire & Theft

- |  |                     |
|--|---------------------|
| 1. Index mark and Registration Number of Vehicle | : <b>FW463E</b>     |
| Chassis Number                                   | : MH1KFB210NK005505 |
| 2. Name of Policyholder                          | : CHIA YONG SIANG   |
| 3. Effective Date of Insurance                   | : 23 Dec 2023       |
| 4. Expiry Date of Insurance                      | : 22 Dec 2024       |

5. Persons or Classes of Persons entitled to drive#

(a) Named Driver(s) Only.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use#

- (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.  
(b) Use for food/parcel/other delivery services.

This Policy does not cover

- (a) Use for hire or reward.  
(b) Use for racing, pace-making, reliability trial or speed-testing.  
(c) Use for the carriage of goods (other than samples) in connection with any trade or business.  
(d) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
EXCESS (THEFT OUTSIDE SINGAPORE)	: PLEASE REFER OVERLEAF
INSURE WITH COE	: YES
NAMED DRIVER (1)	: CHIA YONG SIANG (XIE YONGXIANG)
NAMED DRIVER (2)	: CHIA YONG HENG (XIE YONGXING)
HIRE PURCHASE COMPANY	: SOUTHERN WIND MOTOR CREDIT & TRADING PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

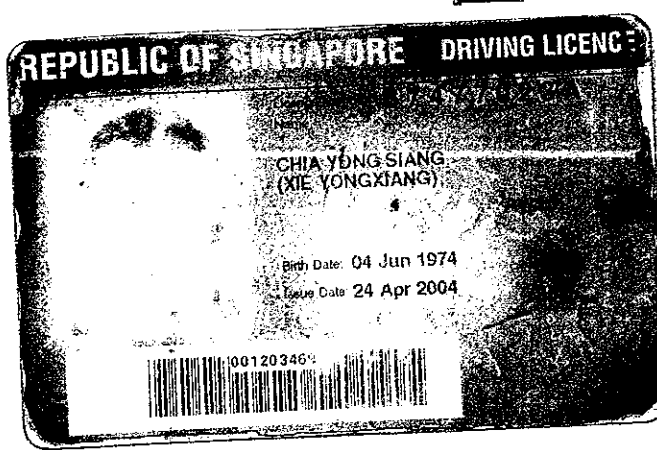
I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : ASSURE PTE. LTD. (00000572842)  
Date of Issue : 12 Dec 2023 09:43 hrs

For INCOME INSURANCE LIMITED



Chief Executive



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7477023A



Name

CHIA YONG SIANG  
(XIE YONGXIANG)

謝永祥

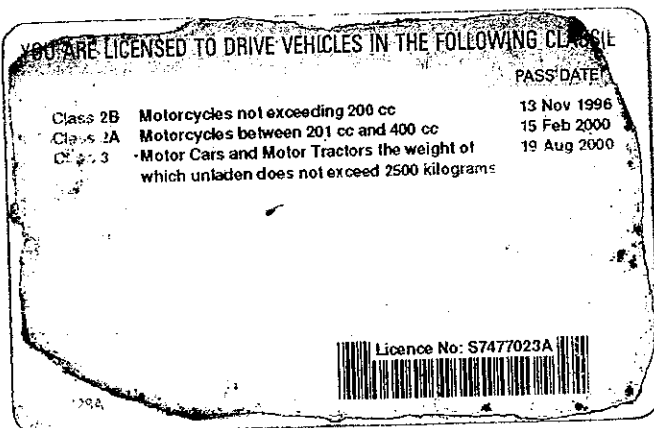
Race  
CHINESE

Date of birth  
04-06-1974

Sex  
M

Country of birth  
MALAYSIA

477023A



3533375

NRIC No. S7477023A



Date of issue  
24-04-2004

Address

APT BLK 9 CANTONMENT CLOSE  
#29-85  
SINGAPORE 080009