

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Singapore NRIC  
Owner ID: 417Z

### Vehicle Details

Vehicle No.: SNF5236G  
Vehicle to be Exported: No  
Intended Deregistration Date: 31 Jul 2024  
Vehicle Make: TESLA  
Vehicle Model: MODEL 3 RWD  
Primary Colour: White  
Manufacturing Year: 2022  
Engine No.: -  
Chassis No.: LRW3F7FS8NC571820  
Maximum Power Output: 208.0 kW (278 bhp)  
Open Market Value: \$59,404.00  
Original Registration Date: 31 May 2022  
First Registration Date: 31 May 2022  
Transfer Count: 0  
Actual ARF Paid: \$33,928.00

### Intended PARF Rebate Details

PARF Eligibility: Yes  
PARF Eligibility Expiry Date: 30 May 2032  
PARF Rebate Amount: \$25,446.00

### Intended COE Rebate Details

COE Expiry Date: 30 May 2032  
COE Category: B - Car-Details at OneMotoring  
COE Period(Years): 10  
QP Paid: \$95,889.00  
COE Rebate Amount: \$75,087.00  
Total Rebate Amount: \$100,533.00

### Message

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 Jul 2024

OK

Date: 30/07/2024  
Vehicle No: SNF5236G  
Model: TESLA MODEL 3 RWD  
Chassis: LRW3F7FS8NC571820-2022  
Reg.Year: 2022

Third Party Insurer: MSIG  
Third Party Veh No: FBT2116H  
Date of Accident: 30/07/2024  
Estimator: TING AN  
Surveyor:

## ESTIMATE

NO.	DESCRIPTION	QTY	UNIT S\$	AMOUNT S\$
1	FRONT WINDSCREEN GLASS / BR	1		\$658.88
2	FRONT BUMPER / BR	1		\$766.00
3	FRONT BUMPER SIDE BRACKET RH	1		\$9.34
4	FRONT BUMPER FOG LAMP COVER RH	1		\$6.54
5	FRONT BUMPER PARKING SENSOR	1		\$163.55
6	FRONT BUMPER PARKING SENSOR BRACKET / MR	1		\$4.67
7	FRONT HEADLAMP RH	1		\$1,741.00
8	FRONT FENDER RH / DD	1		\$448.59
9	FRONT FENDER INNER SHIELD RH / TH	1		\$116.82
10	FRONT RIM RH / Chipped	1		\$505.00
11	FRONT ABSORBER RH	1		\$429.90
12	FRONT LOWER ARM RH	1		\$242.99
13	FRONT LOWER LATERAL ARM RH	1		\$224.29
14	FRONT KNUCKLE ARM RH	1		\$420.56
15	FRONT WHEEL BEARING RH	1		\$233.64
SUB TOTAL				\$5,971.77
LESS 10%				-\$597.18
PARTS TOTAL				\$5,374.59

NO.	SPECIAL NETT	QTY	UNIT S\$	AMOUNT S\$
1	FRONT WINDSCREEN SEALANT / MR	1		50 \$100.00
2	FRONT IU STICKER / MR	1		25 \$40.00
3	FRONT BUMPER CLIPS / MR	1		30 \$50.00
4	FRONT FENDER INNER SHIELD CLIPS RH / MR	1		20 \$40.00
S/N TOTAL				\$230.00

### Head office

6 Kung Chong Road Singapore 159143  
Tel: (+65) 6472 1313 | Fax: (+65) 6472 2112

### Branch

9A Serangoon North Ave 5 Singapore 554500  
Tel: (+65) 6484 9919 | Fax: (+65) 6481 1993

### Branch (Motor Insurance Claims)

Blk 10 Ang Mo Kio Ind. Park 2A #01-05 Singapore 568047  
Tel: (+65) 6481 1522 | Fax: (+65) 6481 1011





Date: 30/07/2024  
Vehicle No: SNF5236G  
Model: TESLA MODEL 3 RWD  
Chassis: LRW3F7FS8NC571820-2022  
Reg.Year: 2022

Third Party Insurer: MSIG  
Third Party Veh No: FBT2116H  
Date of Accident: 30/07/2024  
Estimator: TING AN  
Surveyor:

## LABOUR CHARGES:

LABOUR CHARGES TO REMOVE, REPLACE, REFIX, REPAIR & READJUST FRONT ACCIDENT AREAS & ETC.	400	\$500.00
LABOUR CHARGES FOR PAINTING & TO SUPPLY PAINT & FURNISHING MATERIALS AT FRONT BUMPER, FRONT FENDER RH & ETC.	450 <del>400</del>	\$500.00
LABOUR CHARGES TO REMOVE & REPLACE FRONT WINDSCREEN GLASS, FRONT WINDSCREEN SEALANT & ETC.	120	\$150.00
LABOUR CHARGES TO REMOVE & REPLACE FRONT RIM RH, FRONT ABSORBER RH, FRONT LOWER ARM RH, FRONT KNUCKLE ARM, FRONT WHEEL BEARING RH & ETC.	?	\$400.00
LABOUR CHARGES TO REMOVE & REPLACE FRONT BUMPER PARKING SENSOR & ETC.	30	\$120.00
TO WHEEL ALIGNMENT & BALANCING.	80	\$100.00
TO DIAGNOSIS FAULT CODE & RESET MEMORY.	100	\$200.00
TO CHECK WIRING & ELECTRICAL SYSTEM.	30	\$120.00

LABOUR TOTAL \$2,090.00

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TOTAL

\$7,694.59

Stew (LKK)

31/7/24, 11.40 am

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4 djs

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

### Branch

9A Serangoon North Ave 5 Singapore 554600  
Tel: (+65) 6484 9919 | Fax: (+65) 6481 1093

### Branch (Motor Insurance Claims)

Blk 10 Ang Mo Kio Ind. Park 2A #01-05 Singapore 568047  
Tel: (+65) 6481 1522 | Fax: (+65) 6481 1011



# 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  
Reported by  
Date of Accident  
Exact Location of Accident  
Additional Location Information  
Country/State of Loss

30/07/2024 16:05 (SGT)  
Both Policyholder and Actual Driver  
30/07/2024 10:30 (SGT)  
Jln Besar, Singapore  
LAVENDER ST TOWARDS JALAN BESAR, SINGAPORE  
Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number

SNF5236G

## INSURED/POLICYHOLDER

Is company?  
Name Of Registered Owner  
NRIC No  
Email Address  
Mobile Phone No  
Alternative Phone No

No  
ANKUR CHAWLA  
SXXXX417Z  
ANKUR.CHAWLA78@GMAIL.COM  
(Phone) +65-91383755  
-

## VEHICLE PARTICULARS

Manufacturer  
Model  
Variant  
Exact purpose for which vehicle was being used at time of accident  
Are you claiming under your own insurance policy for repair to your vehicle?  
Vehicle Category  
Transmission  
CC

Tesla  
MODEL 3  
-  
-  
No - Claiming third party  
Private car  
Auto  
1999

## INSURANCE COMPANY

Name of Insurance Company  
Policy Number / Cover Note Number

Allianz Insurance Singapore Pte. Ltd.  
SP2001931844-01

## DRIVER

Name of Driver  
NRIC No  
Date Of Birth  
Occupation

ANKUR CHAWLA  
SXXXX417Z  
10/06/1978  
Indoor



Driving Pass Date	18/12/2010
Driving experience	13 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91383755
Alt. Phone Number	-
Email Address	ANKUR.CHAWLA78@GMAIL.COM
Address	83 YISHUN STREET 81
Address complement	#04-04
Postcode	S768446
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 - Change/cross lane
Weather Conditions	Clear
Road Surface	Dry

#### 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?	Yes
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 POLICE REPORT NO : T/20240730/7050

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBT2116H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	UNKNOWN
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	UNKNOWN RIDER
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBT2116H
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

# 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 Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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. The 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.
8. **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.

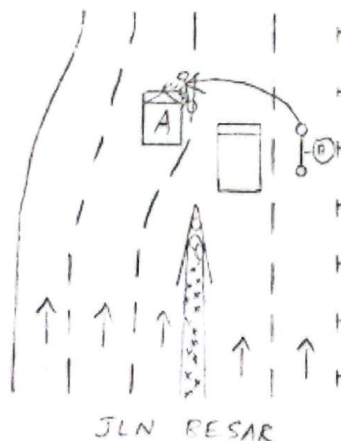
*[Signature]*

Policyholder's Signature / Date & Time

*[Signature]*  
NATIONAL FIRE INSURANCE CO. LTD.

Witnessed by Reporting Centre Personnel

## Sketch Plan



① → SNF 5236 G

② → FBT 2116 H



Describe Circumstances of the Accident

Refer to police Report No: T/20240720/7050

KINDLY TAKE NOTE THAT YOU HAVE 14 DAYS FROM DATE OF ACCIDENT TO CONVERT TO OWN DAMAGE CLAIM

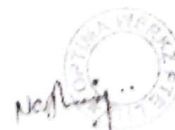
Declaration

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





# SINGAPORE POLICE FORCE



T/20240730/7050

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

1 of 3

Report No. T/20240730/7050

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/07/2024 13:21		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: ANKUR CHAWLA			Address: 83 83 yishun street 81 #04-04 Orchid park condominium SINGAPORE 768446		
ID Type / ID No.: NRIC NO / S7861417Z			Contact No.: Home/Office: Mobile: 91383755		
Nationality: INDIAN			Email: ankur.chawla78@gmail.com		
Sex: Male	Age: 46	Date of Birth: 10/06/1978	Type of Informant: Driver		
Race: Indian			Language: English		
Occupation: Commodities trader (excluding oil and bunker)			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 30/07/2024 10:30	Type of Location: Straight Road
Location:  JALAN BESAR				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBT2116H	Motorcycle					0
SNF5236G	Motor car	TESLA	MODEL 3 RWD	White		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SNF5236G	ALLIANZ INSURANCE SINGAPORE PTE. LTD.	SP2001931844	31/05/2022	30/05/2025



**SINGAPORE  
POLICE FORCE**



T/20240730/7050

2 of 3

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

Report No. T/20240730/7050

**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	Unknown Rider	ID No.	NIL
Related Vehicle	FBT2116H (Motorcycle)	Contact No.	NIL
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	Slight
<b>Driver</b>			
Name	ANKUR CHAWLA	ID No.	S7861417Z
Related Vehicle	SNF5236G (Motor car)	Contact No.	91383755
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

**Brief Details.**

1. I was driving on the lane after the right turn from Lavender St traffic light along the Jalan Besar.
2. While driving a motorcyclist came from my right side change lane suddenly and hit on the right side of my car.
3. Yes I have video which TP has taken.





**SINGAPORE  
POLICE FORCE**



T/20240730/7050

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

3 of 3

Report No. T/20240730/7050

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:

Signature Of Informant:  
The identity of the person making this report has been  
authenticated by Singpass. No signature is required.

Date/Time:  
30/07/2024 13:21

Classification Of Case:

NP168