

1401

19 MAY 1965 74

SHB 25805

() Walk-In Customer : Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case : to e-mail Insurer **URGENTLY.**

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co. ()

(INC hotline: 6788 6616)

Injury :

Date/Time	Actions
-----------	---------

NA1805205

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC. Checked by (Engr-In-Charge):

Auditors' Comments:-

Lat. 1:

Cal. 2 / 3:

Invoice Preparation Checklist

1) AR : Accident Reporting	(\$30);	
2) DA : Damage Assessment	(\$100);	INC (\$80)
3) TF : Towing Fee		\$40/\$45
4) FT : Follow-Through Survey		\$120
5) FT : Follow-Through Survey (Resurvey)		\$30
For claiming against INC Only (wef 10 Jan 2005)		
6) TR : Re-inspection		\$75
7) NI : Idao DA + SMRT Survey		\$160
8) NTUC Additional Services:-		
<u>ON*</u>		
*N5: Courtesy Car / Tpl Allowance		\$5
*N6: Repair Co-ordination		\$10
*N7: Post Repair Inspection		\$25
*N8: DV / Collect Excess Coordination		\$5
<u>TP (N11) : TP (Non INC) against INC</u>		\$20
9) N12: Idao Mobile		30
Invoice dated	Fee Charged	
	Fee Charged	

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 Authorised 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 ability.
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 Report	17/08/2018 14:22
Date Of Accident	16/08/2018 14:30
Exact Location Of Accident	ALONG JALAN AHMAD IBRAHIM TOWARDS TUAS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC2448Z
Insured/Policyholder	
Name Of Registered Owner	HIN HUP BUS SERVICE LLP
Co Reg No	T09LL0775D
Email Address	HINHUP@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-97153749
Alternative Phone No	OFFICE-97153749

Vehicle Particulars

Manufacturer	KING LONG
Model	XMQ6902K
Exact Purpose for which vehicle was being used at time of accident	WORKONG PURPOSES
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	BUS

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5071223647-03
Cover Note Number	

Driver

Name of Driver	ZHANG ZHIQUAN
Passport No/FIN	G6246392P
Date Of Birth	17/12/1969
Occupation	OUTDOOR
Date Of Driving Pass	22/05/2009
Driving Experience	9 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97153749
Fax Number	
Contact Number	OTHERS-97153749
EMail Address	HINHUP@SINGNET.COM.SG

Address	1 QUEENSWAY #05-63 QUEENSWAY SHOPPING CEBTRE
Postcode	149053
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB2580S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	THARM KOK PENG
NRIC/Passport Number	S1794839C
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SDY421P
-----------------------------	---------

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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 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. 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 lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:



ZHANG ZHIQUAN

Driver's Signature
(If driver is not the policyholder)
Date & Time:

17/02/2018
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

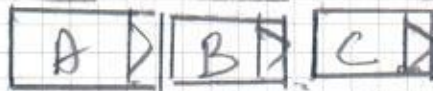
SKETCH PLAN

Along Jalan Ahmad Ibrahim towards MAS

A) PC 24482

B) SHB 35805

C) SDY 421P



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 16/08/2018 AT ABOUT 14:30HRS I WAS TRAVELLING ALONG JALAN AHMAD IBRAHIM TOWARDS MAS WHEN I SAW THE INFORMANT OF MR SHD2580P BRAKE & I ALSO BRAKE BUT INSTEAD OF STOPPING THE BRAKE MY LEFT FOOT PRESS THE ACCELERATOR & MY BUS HIT THE REAR OF THE TAXI SHB 2580S BUT I DID NOT NOTICE WHETHER THE TAXI DID OR DID NOT HIT THE CAR SDY421P INFORMANT OF HIM THAT ALL.

DECLARATION

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

Policyholder's Signature
Date & Time:

ZHANG ZHIQUAN

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Claim Handling

Accident MT/1007672

Policy No.	5071223647-03	Vehicle No.	PC2448Z	GST Registration No.	
Certificate No.					
Policyholder Name	HIN HUP BUS SERVICE LLP			Policyholder NRIC	T09LL0775D
Product Code	BUS INSURANCE	Cover Type	Comprehensive	Loading	0
Contact No.(Mobile)	97153749	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	No
Accident Details					
Report Date	17/08/2018 15:29	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	16/08/2018	Time of Accident hh:mm	14:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG JALAN AHMAD IBRAHIM TOWARDS TUAS				
Benefits					
Excess					
Own damage Excess	3,000.00	Additional Excess		Windscreen Excess	500.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	1,500.00	Outside Singapore TP Excess			
GST Registered Information					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified	No		
Modification History					
Policyholder Mailing Address					
Address 1	1 QUEENSWAY	Address 2	#05-63 QUEENSWAY SHOPPING	Address 3	SINGAPORE 149053
Address 4		Address Type	Singapore address	Post Code	149053
Unit No.	05-63	Related Policy Number	5052896344-06		
OI Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	17/12/1969
Unnamed driver Name	ZHANG ZHIQUAN	Driver NRIC	G6246392P	Driving Experience	9
Register Date of Driver License	22/03/2009	Driver Age	48	Contact No.(Home)	
Contact No.(Mobile)	97153749	Contact No.(Office)		Contact No.(Home)	
Address 1	1 QUEENSWAY	Address 2	#05-63 QUEENSWAY SHOPPING	Address 3	SINGAPORE 149053
Address 4		Address Type	Foreign address	Post Code	149053
Unit No.	05-63				
Does he own a Singapore Registered car?	Yes + No	Driver Vehicle No.	PC3448Z	Driver Insurer Company	NTUC
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes + No		

Modification History

Claim 001 New

Claim Type *	DD-MX	Insured Name	HIN HUP BUS SERVICE LLP	Insured NRIC	T09LL0775D
Contact No.(Mobile)		Contact No. (Home)		Contact No. (Office)	67582
Email Address		Vehicle Number	PC2448Z	TP Vehicle Number	SHB25
Claim Description	PC2448Z / SHB25ROS ON 16 Aug 2018				
Preferred Workshop		Insured Liability	Fully at Fault		
Repair No.	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	17/08/2018 15:33	Claim Close Date		Date Received	17/08/2018
Report Taken By	ROSLI WAHAB				
Print AK letter					
Save Submit					

Attachment

Accident No.	MT/1007672	Claim No.	001
Last Doc. Received	Yes No	Upload Date	17/08/2018 15:34
Path *			
Choose File	No file chosen	Category *	Confidential
Choose File	No file chosen	Urgency *	Normal
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Message Read			
Attachment List			
Attachment	Uploaded By/Date	Category	Urgency
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Aug 2018 15:34		Photos	Normal
		Description	Photos 2018-8-17



NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Aug 2018 15:34	Photos	Normal	Photos 2018-8-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Aug 2018 15:34	Photos	Normal	Photos 2018-8-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Aug 2018 15:34	Photos	Normal	Photos 2018-8-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Aug 2018 15:34	Photos	Normal	Photos 2018-8-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Aug 2018 15:33	Photos	Normal	Photos 2018-8-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Aug 2018 15:33	Photos	Normal	Photos 2018-8-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Aug 2018 15:33	Photos	Normal	Photos 2018-8-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Aug 2018 15:33	Photos	Normal	Photos 2018-8-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Aug 2018 15:33	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-8-17
NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 Aug 2018 15:33	SAS	Normal	SAS 2018-8-17

Video List

Uploaded By/Date	Folder Date	File Name	Source
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Display in New Window

Scan and uploading

ACCIDENT STATEMENT

ACCIDENT DATE: 16.08.2018 (DD/MM/YYYY), TIME: 14:30 (HH:MM)

LOCATION: Jalan Ahmad Ibrahim towards MAS

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: PC 2448 Z
 b) INSURANCE COMPANY: NTUC
 c) POLICY NUMBER: SM1223647-03
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: KING (KING) XMR
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS) BUS
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: WORKING
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: HIM HUP BUS SERVICE WP (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 7012015D CONTACT: _____
 c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: ZHONG ZHI QIAN (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: 97153749
 c) ADDRESS: _____

* d) DATE OF BIRTH: 17/12/1969 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)
 f) DATE OF DRIVING PASS: 22/05/2009

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) _____
 b) ROAD SURFACE: (DRY / WET / OTHERS) _____
 6. WAS ANYBODY INJURED (YES / NO)
 7. a) REPORTED TO POLICE (YES / NO)
 IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SHB 2580 S MODEL: _____
 b) DRIVER'S NAME: THAM KOK PAU
 c) NRIC/FIN/PASSPORT: S1794839C CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: SDY 421P MODEL: _____
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

* No of passenger
 (including driver)
(1)

* No of passenger
 (including driver)
()

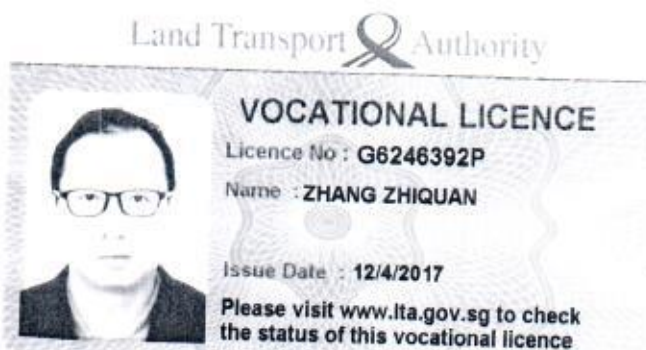
* No of passenger
 (including driver)
()

Email = HimHup@Singnet.com.sg

VIDEO =

S PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer
HIN HUP BUS SERVICE LLP



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 2B Motorcycles =< 200 cc	28 Jan 2009
Class 3 Motor Cars =< 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	28 Jan 2009
Class 4 *Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg *Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg	22 May 2009

NP 423A



This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
03	BUS VL	09/03/2009



REPUBLIC OF SINGAPORE DRIVING LICENCE

6248392P



ZHANG ZHIQUAN



BUL

REPUBLIC OF SINGAPORE DRIVING LICENCE

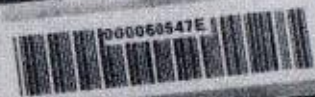
S1794839C



THARM KOK PENG

Birth Date: 30 Dec 1967

Issue Date: 24 Dec 2002



TAXI

Transport Authority

VOCATIONAL LICENCE

Licence No: S1794839C

Name: THARM KOK PENG

Issue Date: 11/1/2006

Please visit www.ita.gov.sg to check the status of this vocational licence

TAXI

S PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer
HIN HUP BUS SERVICE LLP



Name
ZHANG ZHIQUAN

IC Pass No.
O 73173116

IC Pass
SERVICE



K0633190

BUL

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class	Vehicle Description	Effective Date
Class 2B	Motorcycles <= 200 cc	28 Jan 2009
Class 3	Motor Cars <= 3000kg with <= 9 passengers, exclusive of the driver, and other motor vehicles <= 2500kg	28 Jan 2009
Class 4	Motor vehicles which are constructed to carry load or passengers and the total weight > 2500kg	22 May 2009
	Motor vehicles which are constructed to carry food and the total weight > 2500kg	

NP 428A

Handwritten: 1

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class	Vehicle Description	Pass Date
Class 3	Motor Cars and Motor Tractors the weight of which (without driver) does not exceed 2500 kilograms	29 Sep 1992

NP 420A

Handwritten: PAY 1

Licence No: N1794219C

This card is the property of the Land Transport Authority and is to be surrendered to the LTA on request. If found, please return to the LTA, Singapore 575701.

Type: 02

Issue Date: 05/12/1998

Handwritten: BUS

VISIT PASS
Immigration Regulations

NAME: ZHANG ZHIQUAN

Pass No: 66-2463929

Date of Birth: 17-12-1969

Sex: M

Nationality: CHINESE

Handwritten: BUS

Download SGWinkPass App to check status

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WITHIN 15 DAYS OF EXPIRY OR WHEN A NEW CARD IS ISSUED TO YOU.

THE SCHEDULE

Private Bus Insurance Policy

This Policy sets out the terms of a contract between NTUC Income Insurance Co-operative Limited (INCOME) and you (the Insured named in the schedule to this Policy).

The statements, information and declaration provided by you at the time of proposal shall form the basis of this contract. We (INCOME) will provide the insurance set out in this Policy in respect of events occurring during the Period of Insurance shown in the Schedule and any further period for which we may accept a renewal premium.

The provision of this insurance is subject to:

1. any Endorsement specified as operative in the Schedule
2. the Conditions and General Exclusions of this Policy, and
3. the payment of the premium specified in the Schedule.

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

GST Reg No. M4-0003030-8

Policy Number	: 5071223647-03		
The Policyholder	: HIN HUP BUS SERVICE LLP 1 QUEENSWAY #05-63 QUEENSWAY SHOPPING CENTRE/QUEENSWAY TOWER SINGAPORE 149053		
Period of Insurance	: 24 May 2018 To 23 May 2019		
Sum Insured	: Market Value of Insured Vehicle less Residual COE/PARF Value at Time of Loss		
Premium (inclusive GST)	: S\$2,134.96		
Interest Insured			
Cover Type	: Comprehensive		
Make/Model	: KING LONG/OTHERS		
Capacity	: 3.44 ton(s)	Number of Seater	: 39
Registration Number	: PC2448Z	Registration Date	: 24 May 2014
Chassis Number	: LA6R1DSC6EB101726	Insure with COE	: No
Excess (Section I)	: S\$3,000	NCD Entitlement	: 0%
Excess (Section II)	: S\$1,500	Loyalty Discount	: 5%
Windscreen Excess	: S\$500		
Geographical Limit	: WITHIN THE REPUBLIC OF SINGAPORE ONLY		
Hire Purchase Company	: OCBC BANK LTD		

Memo A : NCD is not applicable.

MAKE/MODEL: KING LONG XMQ6902K DIESEL MANUAL

Endorsement Operative : M3

Agency	: NLE INSURANCE AGENCIES PTE LTD (00000614580)
Date of Issue	: 17 Apr 2018 16:05 hrs

DUTY OF DISCLOSURE

We would remind you that you must disclose to us, fully and faithfully, the facts you know or ought to know, otherwise you may not receive any benefit from your Policy.

Signed in Singapore by order of the Board of Directors



Chief Executive

Text size + -

Enquire Vehicle Registration Details**Owner Particulars**

NRIC/Passport/Company
Cert No.: T09LL0775D

Owner ID Type: Limited Liability Partnership

Owner Name: HIN HUP BUS SERVICE LLP

Registered Address: 1 QUEENSWAY #05-63 QUEENSWAY SHOPPING CENTRE SINGAPORE 149053

Mailing Address: -

Birth Date: -

Vehicle Particulars

Vehicle No.: PC2448Z

Previous Vehicle No.: -

Effective Date of
Ownership: 24 May 2014

Original Regn Date: 24 May 2014

Registration Date: 24 May 2014

Year of Manufacture: 2014

Vehicle Type: Private Hire (Chauffeur) Bus/Coach/Minibus

Vehicle Scheme: Public Service Vehicle (Others)

Vehicle Attachment 1: Air-Conditioned

Vehicle Attachment 2: -

Vehicle Attachment 3: -

Vehicle Make: KING LONG

Vehicle Model: XMQ6902K DIESEL MANUAL

Primary Colour: Multi-Colored

Secondary Colour: -

Passenger Capacity: 39

Chassis No.: LA6R1DSC6EB101726

Engine No.: ISB67E522522109935

Engine Capacity/Power
Rating: 6690 cc / -

Maximum Power Output: -

Propellant: Diesel

Max Unladen Weight: 9060 kg

Maximum Laden Weight: 12500 kg

Open Market Value: \$107,529.00

PARF Eligibility: No

PARF Eligibility Expiry
Date: -

Minimum PARF Benefit: -

No. of Transfers: 0

IU Label No.: 2050097475

COE No.: 2014060105000259M

COE Expiry Date: 23 May 2024
COE Category: C - Goods Vehicle & Bus
COE Registration Category: C - Goods Vehicle & Bus
Quota Premium (QP) / Prevailing Quota Premium: \$36,301.00 / -
Actual QP Paid: \$36,301.00
QP (Regn Cat): \$36,301.00
OPC Cash Rebate Eligibility: No
QP during COE Bidding Exercise: \$36,301.00
Additional Registration Fee Rate: 5.00 %
Actual ARF Paid: \$5,377.00
Vehicle Lifespan Expiry Date: 23 May 2034
CO2 Emission: -

Message: To renew the COE, the Prevailing Quota Premium payable is that of Category C. This is a public service vehicle.



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Please do not use the **Back** or **Forward** buttons on your browser as this may alter the results of the transactions.
Best viewed with IE 6.0 SP3 and above, 1024 X 768 resolution
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