NATIONAL Assessment Centre Servi	ces 140 1 35 105 MNA41812875	
Date in 28 09 90 1234 Jeb de	scription Date &Time Completed	Done by
REFNAUDATORISTOTALY SAS	e-filing	
0.000	nil (within Shrs, AIC 2hrs)	
	tor Claim Form	
i-Mo	tor W/O (Within: OD 2hrz, TP 4hrz)	
OD / IP / Reporting Only	oto Uplonded	
TP Insurer: Asses	sment/Survey Report	
	Report by Fax / Hand to Owner/Wksp	
Preferred Wksp / INC Assign Wksp / QW: (Tel: Fax:	
TP Particulars: Veh No: SKR 7391	INC()/Non-INC()	
Owner / Driver: (Tel)
Policy No: () Period: () Cover Type: ()
Confirmed by : (Date: Time:	9
CONTROL OF CONTROL CON	Status (WO): N: 0-20%; P: 21-79%. F: 80-100%]	
Year of Registration: () Warranty:	SECTION AS CONTRACTOR OF THE SECTION AS CONTR	
	/\$2,000()	
General Remarks:-	PERSONAL STATE AGENT AND ADMINISTRATION OF	
() Walk-In Customer: Customer's information st		
() Total Loss Case : to e-mail Insurer URGE Drive-In () / Towed-In (); Invoice; YES (
Drive-In () / Towed-In (); Invoice: YES () / NO () ; Towing Co. (
Remarks:- (INC horline: 6788 6616)	Date&Time Completed	Done by
Apply for Transport Allowance () / Courtesy C	(ar ()	
2) QC Check / Post Repair Inspection	()	
3) Upload Resurvey Photo [Repair Cost > \$3000]		
Injury:		
Date/Time Actions		
E 1		
	2	
	- *	
207:01	The second of the second secon	Amt (\$) Amt (\$)
XAB606181	Invoice Preparation Checklist	lat Bill Add Bill
Claimant's Particulars :-	1) AR: Accident Reporting (\$30); 2) DA: Damage Assessment (\$100); INC (\$80)	
Driver/Owner	3) TF : Towing Fee \$40/\$45	
	4) FT : Follow-Through Survey \$120 5) FT : Follow-Through Survey (Resurvey) \$30	
Contact No:	For claiming against INC Only (wef 10 Jan 2005)	
Damaged Portion:	7) N1 : Idae DA + SMRT Survey \$160	
	8) NTUC Additional Services:-	
QC Checked by (Engr-In-Charge):	*N5: Courtesy Cer / Tpt Allowance \$5	
A ANTI-	*NG: Repair Co-ordination 510 *NT: Fost Repair Inspection 525	
Auditors' Comments :- at. 1.	*NS: DV / Collect Excess Coordination \$5 TP (N11): TP (N:n INC) against INC \$20	
200AC-974	9) N12: Idao Mobile 30	
at. 2 / 3:	Invoice dated Fee Charged	hear jak

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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 witholding 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

AS TO SAME WAS A SECONDARIES	ACCIDENT STATEMENT
Date Of Report	28/09/2018 12:34
Date Of Accident	27/09/2018 14:50
Exact Location Of Accident	KPE TUNNEL TOWARDS PIE
Country/State of Loss	SINGAPORE
Description of the state of the	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SMA2466S
Insured/Policyholder	
Name Of Registered Owner	WANG FAYIN
NRIC No	\$2644547G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90218446
Alternative Phone No	OTHERS-90218446
Vehicle Particulars	
Manufacturer	LAND ROVER
Model	DISCOVERY SPORT-2.0 D 7-SEATER (180PS) (A)
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE, LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800062548
Cover Note Number	
Driver	
Name of Driver	WANG FAYIN

 Name of Driver
 WANG FAYI

 NRIC No
 \$2644547G

 Date Of Birth
 23/01/1963

 Occupation
 INDOOR

 Date Of Driving Pass
 21/11/1996

Driving Experience 21 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90218446

Fax Number

Contact Number OTHERS-90218446

EMail Address NOEMAIL

Address

9 PASIR RIS RISE

#10-20

Postcode

518084

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured Vehicle Registration Number of Driver's Own

Vehicle

OWNER

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

CHAIN COLLISION

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

Was any body injured in the Accident?

YES

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)

2

Passenger 1

NAME:

: TANG QIANG

GENDER:

MALE

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

SKR7392Y

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

TOKIO MARINE INSURANCE SINGAPORE LTD

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 15

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SJS7918M

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)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number

SLE4045B

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)

DETAILS OF INJURED PERSON 1

Name

WANG FAYIN

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

SMA2466S

Were seat belts worn?

YES

Was this injured conveyed to hospital by

NO

ambulance?

Address Postcode

DETAILS OF INJURED PERSON 2

Name

TANG QIANG

Approximate Age

Injuries Sustain

SLIGHT INJURY

Injured person in which vehicle?

SMA2466S

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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)

Lunderstand, 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:
 - 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:
 - 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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Beporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Kn	R) SMA 24665
(Tunnel)	B) SKR 7392,7
IA Tonarts	© 573 7918M
B / P/E	(B) 5LE 4045B

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DESCRIBE CIRCUIVISTANCES OF THE ACCIDENT
On 27-09-2018 at about 14:48 his, I was truelling along
KPF Tunnel Tongras ME. The traffic was on modulate more. Misac
of me. Here's a vehicle slim dim & stop, I bellow buit. All of a sudo
I felt an hard injust from the near then I realized a reticle
SKR 73924 had collided onto my rear. he to the hard injust, my
rehicle had moved forward & collide with SLE 4049B. Total 4
whiches involve in these accident.

DECLARATION

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

3/2/30

Policyholder's Signature Date & Time: Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

SINGAPORE ACCIDENT STATEMENT

LOCATION KIE TUNNOL TOWARDS PIE	(hh:mm) 24 hrs Format
LOCATION GE WINNE COMMISS IE	7.1
VEHICLE NUMBER SMA 2466 S	
INSURED NAME WANG FORIN	
NRIC/FIN \$26,445476 CONTA	ACT: 901 9446
MAKE LANGVOVER DISCOVERY MODEL SPOID 2-0 PS	
Are you claiming under your own insurance policy for repair to your veh	
() Yes, If No, Pls Select : (\ /) Third Party () Reporting Or	
INSURANCE COMPANY ALG	
TYPE OF POLICY (✓) COMPREHENSIVE () THIRD PART	TY () TPFT
POLICY NUMBER: 1800062548	7.70.70.70
102101100111	4
NAME DRIVER:	() SAME AS INSURED
	- S
NRIC/FIN \$26446476 CONT.	ACT:
DATE OF BIRTH: 23-01-1963	
DRIVING PASS DATE: 21-11-1996	
OCCUPATION: () INDOOR () OUTDOOR	
GENDER: (V) MALE () FEMALE	
EMAIL ADDRESS:	() NO EMAIL
ADDRESS OF DRIVER: 9 PASIT RIS RIX \$10-20 5(5)	8044)
Number Of Passenger Include Driver: Jax Malorde du	ver
Was driver an employee of the Insured's Company? () YES () NO
) NO
If No, Relationship Of The Driver With The Insured (Owner () Spouse () Friend () Relative () Children	en () Sibling () Others
	en () Sibling () Others
Does The Driver Own Any Other Vehicle? : () YES (NO	
If Yes, Vehicle Registration Number Of Driver's Own Vehicle:	
Insurance Company Of Driver's Own Vehicle	or ()Othorn
Weather Conditions: () Clear () Raining () Drizzli	ng () Others
Weather Conditions: () Clear () Raining () Drizzlii Road Surface : () Dry () Wet () Others	VI 10000000
Weather Conditions: () Clear () Raining () Drizzling Road Surface : () Dry () Wet () Others Was Any Foreign Vehicle Involved In This Accident? () YES	() NO
Weather Conditions: () Clear () Raining () Drizzling Road Surface : () Dry () Wet () Others Was Any Foreign Vehicle Involved In This Accident? () YES Was Anybody Injured In The Accident? () YES () N	() NO
Weather Conditions: () Clear () Raining () Drizzling Road Surface : () Dry () Wet () Others Was Any Foreign Vehicle Involved In This Accident? () YES Was Anybody Injured In The Accident? () YES () No If YES, Injured details : () Way \(\)	() NO
Weather Conditions: () Clear () Raining () Drizzling Road Surface : () Dry () Wet () Others Was Any Foreign Vehicle Involved In This Accident? () YES Was Anybody Injured In The Accident? () YES () NITYES, Injured details : () WAY & ANY ON THE ACCIDENT OF THE A	() NO
Weather Conditions: () Clear () Raining () Drizzling Road Surface : () Dry () Wet () Others Was Any Foreign Vehicle Involved In This Accident? () YES Was Anybody Injured In The Accident? () YES () No If YES, Injured details: () Way & Convey By Ambulance: () YES () NO	() NO
Weather Conditions: () Clear () Raining () Drizzling Road Surface : () Dry () Wet () Others Was Any Foreign Vehicle Involved In This Accident? () YES Was Anybody Injured In The Accident? () YES () No If YES, Injured details : () Way () Convey By Ambulance: () YES () NO Was There Any Video Capture By Car Camera? () YES () 1	() NO NO
Weather Conditions: () Clear () Raining () Drizzling Road Surface : () Dry () Wet () Others Was Any Foreign Vehicle Involved In This Accident? () YES () No If YES, Injured details : () Way () Convey By Ambulance: () YES () NO Was There Any Video Capture By Car Camera? () YES () Y	() NO
Weather Conditions: () Clear () Raining () Drizzling Road Surface : () Dry () Wet () Others Was Any Foreign Vehicle Involved In This Accident? () YES Was Anybody Injured In The Accident? () YES () No If YES, Injured details : () Way () Convey By Ambulance: () YES () NO Was There Any Video Capture By Car Camera? () YES () NO Was There Accident Reported To The Police? () YES () Police Report Number (if any)	() NO O NO NO NO If Yes Attach Police Report
Weather Conditions: () Clear () Raining () Drizzling Road Surface : () Dry () Wet () Others Was Any Foreign Vehicle Involved In This Accident? () YES Was Anybody Injured In The Accident? () YES () No If YES, Injured details : () Way () YES () No Was There Any Video Capture By Car Camera? () YES (() NO NO
Weather Conditions: () Clear () Raining () Drizzling Road Surface : () Dry () Wet () Others Was Any Foreign Vehicle Involved In This Accident? () YES Was Anybody Injured In The Accident? () YES () No If YES, Injured details : () Way () Way () Way () Was There Any Video Capture By Car Camera? () YES () No Was There Accident Reported To The Police? () YES () No Police Report Number (if any) Details Of 3rd Party Name / NRIC Veh B () Clear () Raining () Drizzling Reported To The Police? () YES () No Name / NRIC	() NO O NO NO NO If Yes Attach Police Report
Weather Conditions: () Clear () Raining () Drizzling Road Surface : () Dry () Wet () Others Was Any Foreign Vehicle Involved In This Accident? () YES () No If YES, Injured details : () Way () YES () No Was There Any Video Capture By Car Camera? () YES () No Was There Accident Reported To The Police? () YES () No Police Report Number (if any) Details Of 3rd Party Name / NRIC Veh B () Name / NRIC () YES	() NO O NO NO NO If Yes Attach Police Report
Weather Conditions: () Clear () Raining () Drizzling Road Surface : () Dry () Wet () Others Was Any Foreign Vehicle Involved In This Accident? () YES () YES () No If YES, Injured details : () Way () YES () No Was There Any Video Capture By Car Camera? () YES () YE	() NO O NO NO NO If Yes Attach Police Report
Weather Conditions: () Clear () Raining () Drizzling Road Surface : () Dry () Wet () Others Was Any Foreign Vehicle Involved In This Accident? () YES Was Anybody Injured In The Accident? () YES () No If YES, Injured details: () Waylot Convey By Ambulance: () YES () No Was There Any Video Capture By Car Camera? () YES () No Was There Accident Reported To The Police? () YES () No Police Report Number (if any) Details Of 3rd Party Name / NRIC Veh B SKR 7392 Name / NRIC Veh C SJS 7918 Name / NRIC Veh D SLE 4045 B Veh E	() NO O NO NO NO If Yes Attach Police Report
Weather Conditions: () Clear () Raining () Drizzling Road Surface : () Dry () Wet () Others Was Any Foreign Vehicle Involved In This Accident? () YES () YES () No If YES, Injured details : () Way () YES () No Was There Any Video Capture By Car Camera? () YES () YE	() NO O NO NO NO If Yes Attach Police Report



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$2644547G



WANG FAYIN







CHINESE

23-01-1953

CHINA

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

EFFECTIVE DATE

Class 3

Motor cars with unladen weight << 3000kg with << 7 passengers, exclusive of driver; and other motor vehicles with unladen weight == 2500kg



S2644547G

Determination 22-05-2011

9 PASIR RIS RISE #10-20 SINGAPORE 518084 NRIC NO S26645476

Date: 15/01/2017

NP 428A



S PASS

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

Employer HUA TAI ENGINEERING PTE. LTD.



CIVIL DRAFTEMAN

5 Pass No. 0 77686037

Date of Application 12-09-2017

Date of resus 12-12-2017 Date of Expiry 12-12-2018



VISIT PASS Immigration Regulations

TANG GIANG



Date of Errin Sex 25-04-1996 M

Nationally CHINESE G341900BP 12-12-2017 12-12-2018

MULTIPLE JOURNEY VISA ISSUED





COVER NOTE

WEARNES AUTO PROTECTOR (LAND ROVER) PRIVATE VEHICLE

The following risk described on this Cover Note is hereby HELD COVERED on the terms and conditions of the policy issued to the Policyholder.

Name of Policyholder

: WANG FAYIN

Vehicle No.

: 1800062548

Period of Insurance

: 28 May 2018 to 27 May 2020

Cover Note No. Endorsement No.

Engine No. Chasis No.

: 180105Y0415PT204 : SALCA2AX4JH751230

Issued Date

: 28 May 2018

ABOUT THE COVER

Make/Model

: LANDROVER Discovery Sport 2.0P SE (5/7 seater)

Engine Capacity/Tonnage : 1,997.00 CC

Sum Insured Market Value

First Year of Registration | 2018

Driver Restriction

- NA

Off Peak Car No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*

a) The Policyholder b) Any other person who is driving on the Policyholder's order or with residen permission. This Policy will indemnify the Policyholder or airy authorised driver only if heisha meats the specified age condition.

You have to pay an addooral sum of \$3,000 as "Young and/or trespended Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving expensed.

Age Condition

: All Age Condition

Limitation as to use*

Use only for social, damestic and pleasure purposes and for the Policyholder's business.

This Palicy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carnage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 2000cc

* Limitations rendered Proparative by Section B of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 185) and Section 95 of the Rizad Transport Act, 1987 (Malaysia), are not to be: included under these headings.

EXCESS

Fire - \$0 Own Damage - \$900 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - 50

Windscreen: \$100

Named Driver and Excess (where applicable)

WANG FAYIN - \$900 (Own Damage)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1 Weames Automotive Pta Ltd. Add. 45 Leng Kee Road. Singapore 159103 63785333

For other Approved Reporting Centres/AIG Authorised Repaires, stesses contact our 24-hour accident emergency hothre at +65 6338 6200. Alternatively, you may refer to AIG website www.a-g.com.ag. or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: OVERSEA-CHINESE BANKING CORPN LTD

If you do not receive your Certificate of Insurance and policy documents within 30 days from the inception date stated on this cover note, please contact AIG immediately.

If We hereby certify that this Cover Note is issued in accordance with the provisions of the Motor Vahicles (Third Party Risks and Compensation). Act (Cap. 189). Part IV of the Road Transport Act, 1987.

(Malastya) and Motor Vehicles (Third Party Risks). Pules, 1959 (Malaysia). For Corporate Policies, this Cover Note is valid for 80 days from the commencement date of the period of insurance.

WEARNES AUTOMOTIVE - CMT (JLR)

45 LENG KEE ROAD

SINGAPORE 159103

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

AID Asia

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

	CONTRACTOR LOS CONTRA
wner ID Type:	Singapore NRIC
wner ID:	4547G
ehicle Details	Washkirontel/Bourgers
ehicle No.:	SMA2466S
ehicle to be Exported:	No
tended Deregistration Date:	30 Sep 2018
ehicle Make:	LAND ROVER
ehicle Model:	DISCOVERY SPORT 2.0P 7 SEATER
rimary Colour:	White
lanufacturing Year:	2018
ngine No.:	180105Y0415PT204
hassis No.:	SALCA2AX4JH751230
laximum Power Output:	177.0 kW (237 bhp)
pen Market Value:	\$46,548.00
riginal Registration Date:	28 May 2018
irst Registration Date:	28 May 2018
ransfer Count:	0
ctual ARF Paid:	\$57,168.00
ntended PARF Rebate Details	
ARF Eligibility:	Yes
ARF Eligibility Expiry Date:	27 May 2028
ARF Rebate Amount:	\$42,876.00
ntended COE Rebate Details	
OE Expiry Date:	27 May 2028
OE Category:	E - Open - all except motorcycle
OE Period(Years):	10
QP Paid:	\$38,389.00
OE Rebate Amount:	\$36,045.00
otal Rebate Amount:	\$78,921.00

The information contained herein is correct as at 28 Sep 2018

OK