1 4/1 11 1 NATIONAL Assessment Centre Services. [wel 1 Jan'03] Done by Date & Time Completed Date In: 02/11/18 Jeb description Res No: NA/A16/30/9945 SAS c-filling Veli No: 5275 4675 E-mail (within Shrs, AIC 2hrs) 1715 DOA: 28/10/18 i-Motor Claim Form i-Motor W/O (Within: OD 2hrs, TP 4hrs) OD / TP / Reporting Only I-Photo Uploaded Assessment/Survey Report TP Insurer: Ass't Report by Fax / Hand to Owner/Wksp Fav: Tol: Preferred Wksp / INC Assign Wksp / QW: (4P1714L INC ()/Non-INC (TP Particulars: Veh No: Tcl: Owner / Driver: (Cover Type: (Period: (Policy No: (Time: Confirmed by: (Date: %) [Note-Est. Status (WO): N: 0-20%; P: 21-79%. P: 30-100%] Insured/Driver Liability: (Warranty: YES ()/NO(Year of Registration: (Excess: (\$ Loading: \$1,000 ()/\$2,000 (General Remarks) 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 (; Towing Co: (Remarks:- (INC hothine: 6788 6616) 1) Apply for Transport Allowance () / Courtesy Car (2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > \$3000] Injury: Date/Time Actions Invoice Preparation Checklist 1) AR : Accident Reporting (530); Claimant's Particulars :-INC (\$80) 2) DA : Damage Assessment (5100); \$40/\$4 3) TF : Towing Fee Driver/Owner: \$120 4) FT : Follow-Through Survey \$30 5) FT : Follow-Through Survey (Resurvey) Contact No: For claiming against INC Only (wef 10 Jan 2005) \$75 6) TR : Re-inspection Damaged Portion: \$160 7) N1 : Idao DA + SMRT Survey 8) NTUC Additional Services:-55 QC Checked by (Engr-In-Charge): *NS: Courlesy Cor / Tpt Allowance *N6: Repair Co-ordination 510 \$25 *N7; Post Repair Inspection Auditors! Comments: 35 *N8: DV / Collect Excess Coordination TP (N11): TP (Non INC) against INC \$20 9) N12: Idao Mobile Fee Charged Involce dated

Involce dated

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.
- Information provided must be as <u>truthful and accurate</u> as possible, Any wilful misrepresentation or witholding 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.

建筑中间等的主义 的意思和1998年1998年1998年	ACCIDENT STATEMENT
Date Of Report	02/11/2018 14:05
Date Of Accident	28/10/2018 17:15
Exact Location Of Accident	INFRT OF 77 LORONG MARICAN
Country/State of Loss	SINGAPORE
(1) 中华中华中华中华中华中华中华中华中华中华中华中华中华中华中华中华中华中华中华	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLJ5467J
Insured/Policyholder	
Name Of Registered Owner	DR KHAIRUL BIN ABDUL RAHMAN
NRIC No	S1721750Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96644614
Alternative Phone No	OTHERS-96644614
Vehicle Particulars	
Manufacturer	JAGUAR
Model	F-PACE
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	2100496612-01
Cover Note Number	
Driver	
Name of Driver	DR KHAIRUL BIN ABDUL RAHMAN
NRIC No	S1721750Z
Date Of Birth	29/07/1965

 NRIC No
 \$1721750Z

 Date Of Birth
 29/07/1965

 Occupation
 INDOOR

 Date Of Driving Pass
 01/03/2001

Driving Experience 17 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96644614

Fax Number

Contact Number OTHERS-96644614

EMail Address NOEMAIL

Address 77 LORONG MARICAN

Postcode 417271

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident COLLIDED INTO PARKED VEHICLE

Weather Conditions RAINING Road Surface WET

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? NO Was any injured conveyed to hospital by NO

ambulance?

Was any other material or property damaged? YES I have been approached by unknown person(s) NO soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name KAMPONG KEMBANGAN NEIGHBOURHOOD POLICE POST

0

ROAD: BLK 112 LENGKONG TIGA #01-215, POSTCODE: 410112. Police Station Address

COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-7489999 - FAX NO: 67454676

NO

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE POLICE REPORT:T/20181031/2117

Attachment(s)

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

Remarks/ Reasons: WITH WORKSHOP

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number YP1714L

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 18

SKETCH PLAN

IMPORTANT NOTICE

- 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.
- 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.
- 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:
 - 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:

Reportune Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN





1 of 3

Report No. T/20181031/2117

Police Station Of Origin: Kampong Kembangan NPP 112 Lengkong Tiga #01-215 SINGAPORE 410112

Tel No: 1800-7489999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 31/10/2018 18:42			Vide Report No.:	Station Diary No.: 10	
Informat	nt's Particl	dars		CONTRACTOR OF THE STATE OF THE	
	Informant: L BIN ABD	UL RAHMAN	Address: 77 LORONG MARICAN SING	SAPORE 417271	
ID Type / ID No.: NRIC NO / S1721750Z			Contact No.: Home/Office:	Mobile: 96644614	
National SINGAP	ity: ORE CITIZ	EN	Email:		
Sex: Age: Date of Birth: Male 53 29/07/1965			Type of Informant: Driver		
Race: Malay			Language: English	Institution / School Name:	
Occupation: Doctor			Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 28/10/2018 23:00	Type of Location: Straight Road
Location: Along Road 1 LORONG MA Infront of 77 Weather:		Road Surface:		Road Speed Limit:
Raining Wet		9500 TO 1		
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collis	sion: cle Against - Parked V	ehicle	1	Anyone conveyed by ambulance:

Vehicle No.	Type		A Wedel	Color	Condition	No of Passenge
SLJ5467J	Car	JAGUAR	F-PACE S 3.0 V6 SC SR	Red	Seriously Damaged	0
YP1714L	Lorry					0

Volucie No.	Insurance Company	Insurance No.	Effective	Expiry Date
SLJ5467J	AIG ASIA PACIFIC INSURANCE PTE.	2100496612-01	15/12/2017	14/12/2018





2 of 3

Report No. T/20181031/2117

Police Station Of Origin; Kampong Kembangan NPP 112 Lengkong Tiga #01-215 SINGAPORE 410112

Tel No: 1800-7489999

CONTINUATION OF REPORT

No. of Pedestria	ns Injured: NIL		Use of Pe	destria	n Cross	sing: NA
Name	KHAIRUL BIN ABO	UL RAHMAI	N	ID No).	S1721750Z
Related Vehicle	NIL			Conta	act No.	96644614
Hospital/Clinic	NIL			Class Drivin Licend Expin	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL Date Di				Dute	

Brief Details.

On 28/10/2018 at about 0800hrs, I parked my red in color Jaguar F-Pace with bearing plate number SLJ5467J outside my residing address located at 77 Lorong Marican. Everything was intact and in order before I headed back home.

On the same day at about 2300hrs, I discovered my right hand side, side mirror (driver side) was cracked and driver's door was scratched. I then quickly retrieved my front and back in-car camera to view and discovered on the same day at about 1713hrs, there was a white in color Isuzu lorry (AAK Logistic) with bearing plate number YP1714L was reversing out along Lorong Marican and subsequently collided onto my vehicle. The camera shown the driver was aware of the collision however he ignored and continue to reverse out and drove off.

I am lodging this report for a case of hit and run.





Police Station Of Origin: Kampong Kembangan NPP 112 Lengkong Tiga #01-215 SINGAPORE 410112 Tel No: 1800-7489999 3 of 3 Report No. T/20181031/2117

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording G / Sr Staff Sgt GOH QI FAN	The Report:	Signature Of Informant:		
Signature Of Interpreter: Not applicable		Date/Time 31/10/201	To be a second and	
Officer In Charge Of Case: TP / HRT /	*	Classificat	tion Of Case:	
SI KALESWARI PALANI Contact No.: 65476902	SINGAPORE POLICE FORCE	1		
Authentication Stamp NP168		7		
	SIGN	NATURE		

SINGAPORE ACCIDENT STATEMENT			
ACC	CIDENT STATEMENT		
Date Of Accident	• 28 10 18 Time 1213 Hrs		
Exact Location Of Accident	· 77 LOILONG MARICAN SC4172H		
	OWN VEHICLE (VEHICLE A)		
Vehicle Registration Number	· SLT 5467 J		
insuration directions.	CONTROL OF THE SAME OF THE SAM		
Name of Registered Owner	· KHAMENL BIN ARPYL PRATMAN		
NRIC/FIN/Passport Number	· [517217-502		
Mahighar anteniars	Section 19 Control of the Control of		
Manufacturer	3 Ahvar		
Model	PROME F-PAIL		
Exact Purpose for which vehicle was being	L Interest I I I I I I I I I I I I I I I I I I I		
used at time of accident	* Private use Commercial use Hire & reward Others - please specify		
Are you claiming under your own insuran	ce		
policy for repair to your vehicle?	* Yes No Others		
If No, please state action to be taken	* Third Party Claim Reporting Only		
Vehicle Category	* Private Commercial Motorcycle		
Husinging geral managers			
Name of Insurance Company	· Mu		
Type of Coverage			
Fleet Policy	Yes No .		
Fleet Policy Policy Number	Yes No 2 * 2400496612-01		
Fleet Policy Policy Number Cover Note Number			
Fleet Policy Policy Number Cover Note Number Drivers	* 400496612-01		
Fleet Policy Policy Number Cover Note Number Divers 1	* 2400496612-01 * KHAMPUL BIN ARBUL RAYMAN.		
Fleet Policy Policy Number Cover Note Number Driver Name of Driver NRIC/FIN/Passport Number	* KHAMPUL BIN ABBUL RATMAN		
Fleet Policy Policy Number Cover Note Number Divers 1	* KHAMPUL BIN ABBUL RATIONAN . * C17217502 * 29 07 1965		
Fleet Policy Policy Number Cover Note Number Drivers Name of Driver NRIC/FIN/Passport Number Date of Birth Occupation	* KHAMPUL BIN ABBUL RATMAN		
Fleet Policy Policy Number Cover Note Number Diffet Name of Driver NRIC/FIN/Passport Number Date of Birth	* 2400496612-01 * KHAMPUL BIN ABBUL RATMAN. • S17717502 • 26 07 1965 • DOZTOZ. • 113 7001		
Fleet Policy Policy Number Cover Note Number Drivers Name of Driver NRIC/FIN/Passport Number Date of Birth Occupation	* Z400496612-01 * KHMPUL BIN MBDUL PLATMAN. * C17217502 * 20107-1965 * D02-702 * Male Female		
Fleet Policy Policy Number Cover Note Number Driver Name of Driver NRIC/FIN/Passport Number Date of Birth Occupation Date of Driving Pass	* 2400496612-01 * KHAMPUL BIN ABBUL RATMAN. • S17717502 • 26 07 1965 • DOZTOZ. • 113 7001		
Fleet Policy Policy Number Cover Note Number Divers Name of Driver NRIC/FIN/Passport Number Date of Birth Occupation Date of Driving Pass Gender	* 2400496612-01 * KHAMPUC BIN ABBUC RATMAN. * S17217502 * 201 07 1965 * D02 T02 * 113 7001 * Male Female G6644614 77 WRONG MAYLLAN		
Fleet Policy Policy Number Cover Note Number Driver Name of Driver NRIC/FIN/Passport Number Date of Birth Occupation Date of Driving Pass Gender Mobile Number	* KHAMPUL BIN ARBUL RAMMAN. * SIA-217502 * DOZ-TOZ * 113 7001 * Male Female [] G6644614 77 WRONG MAYLLAN SIMBARINE 417271.		
Policy Number Cover Note Number Divers Name of Driver NRIC/FIN/Passport Number Date of Birth Occupation Date of Driving Pass Gender Mobile Number Address Email Address Was driver an employee of the Insured's	* KHAMPUC BIN ARBUC RAMMAN. * SIZZIZSOZ * DOZTOZ * 113 7001 * Male Female [] G6644614 77 LONDING MAYZICAN SIMAPUNE 412271. di Vagnaj (a igalowi Curziss)		
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Vehicle Registration Number of Driver's Own Vehicle (if applicable) Insurance Company of Driver's Own Vehicle (if applicable) Seneral information obthe Accident Type of Accident Weather Conditions Road Surface Others Road Surface Others Was any body injured in the Accident? Was any other material or property damaged? Details of injured Information Was of injured Information Name Address Address Address Approximate Age Injuries Sustained If vehicle Occupants, state in which vehicle? Was injured conveyed to hospital by ambulance? Yes No Petalls of Clear Was any of Others Yes No Was injured conveyed to the Police? Yes No Petalls of Dile Registration Was notice of intended Prosecution given? If Yes, please state which Police Station Was notice of intended Prosecution given? If Yes, please state which Police Registration Number Vehicle Make / Model / Colour Dotail Of Properties Name of Driver NRIC/Passport Number Email Address Address Insurance Company Name Name Name	promise the second seco	
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Vehicle Registration Number Vehicle Make / Model / Colour Detail Of Properties Name of Driver NRIC/Passport Number Contact Number Email Address Address Insurance Company Name Nature of Damage Details Of Witness	If Yes, against whom?	
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Email Address	Email Address	

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1721750Z





Name

KHAIRUL BIN ABDUL RAHMAN

خيرول بن عبدالرحمن Race MALAY Date of birth

29-07-1965 Country/Place of birth SINGAPORE



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24-02-2015

77 LORONG MARICAN SINGAPORE 417271 PASS DATE

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CERTIFICATE OF INSURANCE

WEARNES AUTO PROTECTOR (JAGUAR) PRIVATE VEHICLE

Name of Policyholder

: DR KHAIRUL BIN ABDUL RAHMAN

Period of Insurance

: 15 Dec 2017 To 14 Dec 2018

Engine No.

: 16081803484306PS

Chassis No.

: SADCA2AV5HA079403

Vehicle No. Policy No.

: SLJ5467J : 2100496612-01

Endorsement No.

Issued Date

: 31 Oct 2017

ABOUT THE COVER

Make/Model

: JAGUAR F-pace 3.0 S V6 S/C

Engine Capacity/Tonnage : 2,995.00 CC

Sum Insured : Market Value

First Year of Registration : 2016

Driver Restriction

: NA

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*:

b) Any other person who is driving on the Policyholder's order or with his/her permission.

This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less

Age Condition

: All Age Condition

Limitation as to use* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage 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 inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road 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 - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

DR KHAIRUL BIN ABDUL RAHMAN - \$900 (Own Damage)

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

Wearnes Automotive Pte Ltd Add: 45 Leng Kee Road Singapore 159103 63789333

For other: Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from ITunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

WWe hereby cartify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503486609

WEARNES AUTOMOTIVE - DJW (B)

45 LENG KEE ROAD

SINGAPORE 159103

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE

78 Shenton Way #07-16 AIG Building S079120 | T:+65 6419 3000 | F:+65 6415 3723 | www.aig.com.sg

Enquire Vehicle Registration Details Owner Particulars NRIC/Passport/Company Cert No.: S1721750Z Owner ID Type: Singapore NRIC Owner Name: KHAIRUL BIN ABDUL RAHMAN Registered Address: 77 LORONG MARICAN SINGAPORE 417271 Mailing Address: Birth Date: 29 Jul 1965 Vehicle Particulars Vehicle No.: SI 154671 Previous Vehicle No.: Effective Date of Ownership: 15 Dec 2016 Original Regn Date: 15 Dec 2016 Registration Date: 15 Dec 2016 Year of Manufacture: 2016 Vehicle Type: Passenger Station Wagon/Jeep/Land Rover Vehicle Scheme: Vehicle Attachment 1: With Sun Roof Vehicle Attachment 2: Vehicle Attachment 3: Vehicle Make: **JAGUAR** Vehicle Model: F-PACES 3.0 V6 SC SR Primary Colour: Red Secondary Colour: Passenger Capacity: 1 Chassis No.: SADCA2AV5HA079403 Engine No.: 16081803484306PS Engine Capacity / Power Rating: 2995 cc/-Maximum Power Output: 280.0 kW (375 bhp) Propellant: Petrol Max Unladen Weight: 1856 kg Maximum Laden Weight: 2500 kg Open Market Value: \$81,253.00 PARF Eligibility: PARF Eligibility Expiry Date: 14 Dec 2026 Minimum PARF Benefit: \$59,128.00 No. of Transfers: IU Label No.: 1127151479 COE No .: 2016110103001177Z COE Expiry Date: 14 Dec 2026 COE Category: B - Car above 1600cc or 97kW (130bhp) COE Registration Category: B - Car above 1600cc or 97kW (130bhp) Quota Premium (QP) / Prevailing Quota \$53,001.00/-Premium: Actual QP Paid: \$53,001.00 QP (Regn Cat): \$53,001.00 OPC Cash Rebate Eligibility: No QP during COE Bidding Exercise: Additional Registration Fee Rate: First \$20,000.00 (100%), next \$30,000.00 (140%), next \$31,253.00 (180%) Actual ARF Paid: \$118,256.00

 Vehicle Lifespan Expiry Date :
 No Lifespan

 CO2 Emission:
 209.00 (g/km)

 CEVS/VES Surcharge Paid Amount:
 \$10,000.00

CO Emission: HC Emission: NOx Emission: -

PM Emission: Message : To

To renew the COE, the Prevailing Quota Premium payable is that of Category B.