

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 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 Report	14/01/2019 13:41
Date Of Accident	12/01/2019 18:30
Exact Location Of Accident	AYE TOWARDS MCE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU1869B
Insured/Policyholder	
Name Of Registered Owner	WEN FENGDUO
NRIC No	S8779465B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92956189
Alternative Phone No	OTHERS-92956189

Vehicle Particulars

Manufacturer	MAZDA
Model	3-1.5 SEDAN EU6 (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	1700087817
Cover Note Number	

Driver

Name of Driver	DAI JIADI
NRIC No	S8187865Z
Date Of Birth	09/10/1981
Occupation	INDOOR
Date Of Driving Pass	05/02/2015
Driving Experience	3 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92956189
Fax Number	
Contact Number	OTHERS-92956189
EMail Address	NOEMAIL

Address	BLK 157 YUNG LOH ROAD #04-28
Postcode	610157
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JLK3194 (PRIVATE CAR)
Number of vehicles (including own vehicle) involved in the accident	5
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)	4
Passenger 1	NAME: : WEN FENGDUO GENDER: : FEMALE
Passenger 2	NAME: : DAI WENHUI WILLIAM GENDER: : MALE
Passenger 3	NAME: : DAI WENHAN GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	GEYLANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 132 PAYA LEBAR ROAD , POSTCODE: 409014 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8486999 - FAX NO: 68486799
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180113/2058

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	JLK3194
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Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver GAN AH SIONG
NRIC/Passport Number 870905015215
Contact Number 87432955
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver) 1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKM4256D
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver KENNETH TOH JUN YONG
NRIC/Passport Number S9134783J
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver) 1

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SMF5934L
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver CHEW YANG YANG JACKSON
NRIC/Passport Number S9149288A
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver) 1

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number SJU7937Y
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver REDDIPALLI ASHOK RAMAURTHY
NRIC/Passport Number S7464476G
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage

No. Of Passenger (Including Driver)

1

SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

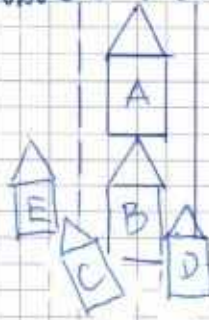
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN

Along Dyke towards MCR



(A) SLU 1864B

(B) JLK 3194

(C) SKM 4256D

(D) SMP 5934L

(E) SJU 7937Y

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Ref to Police Report: T/20190113/2059

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:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

14/01/2019

Rashid bin [Signature]



Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

Report No. T/20190113/2058

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/01/2019 14:28	Vide Report No.: D/20190112/0107	Station Diary No.: 34
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Informant's Particulars			
Name of Informant: DAI JIADI		Address: APT BLK 157 YUNG LOH ROAD #04-28 SINGAPORE 610157	
ID Type / ID No.: NRIC NO / S8187865Z		Contact No.: Home/Office: Mobile: 92956189	
Nationality: CHINESE		Email:	
Sex: Male	Age: 37	Date of Birth: 09/10/1981	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: FOOD AND MANUFACTURING MANAGER		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 12/01/2019 18:30	Type of Location: Straight Road
Location: Along Road 1 AYER RAJAH EXPRESSWAY				
Towards MCE				
Weather: Raining		Road Surface: Wet	Road Speed Limit: 90 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
JLK3194	Car					0
SJU7937Y	Car					0
SKM4256D	Car					0
SLU1869B	Car					3
SMF5934L	Car					0



Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

Report No. T/20190113/2058

CONTINUATION OF REPORT

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	Gan Ah Siong		ID No.	870905015215
Related Vehicle	JLK3194 (Car)		Contact No.	87432955
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	NIL		Degree of Injury	NIL
Driver				
Name	Reddipalli Ashok Ramaurthy		ID No.	S7464476G
Related Vehicle	SJU7937Y (Car)		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	NIL		Degree of Injury	NIL
Driver				
Name	Kenneth Toh Jun Yong		ID No.	S9134783J
Related Vehicle	SKM4256D (Car)		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	NIL		Degree of Injury	NIL



Police Station Of Origin:

Geylang N.P.C

132 Paya Lebar Road SINGAPORE 409014

Tel No: 1800-8486999

Report No. T/20190113/2058

CONTINUATION OF REPORT

Passenger			
Name	Wen Fengduo	ID No.	S879465B
Related Vehicle	SLU1869B (Car)	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	NIL	Degree of Injury	NIL
Driver			
Name	DAI JIADI	ID No.	S8187865Z
Related Vehicle	SLU1869B (Car)	Contact No.	92956189
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	NIL	Degree of Injury	NIL
Passenger			
Name	Dai Wenrui William	ID No.	T1433722E
Related Vehicle	SLU1869B (Car)	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	NIL	Degree of Injury	NIL
Passenger			
Name	Dai Wenhan	ID No.	T1270208B
Related Vehicle	SLU1869B (Car)	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	NIL	Degree of Injury	NIL



**SINGAPORE
POLICE FORCE**



T/20190113/2058

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Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

Report No: T/20190113/2058

CONTINUATION OF REPORT

Driver			
Name	Chew Yang Yang Jackson	ID No.	S9149288A,
Related Vehicle	SMF5934L (Car)	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	NIL	Degree of Injury	NIL

Brief Details.

On 12/01/2019 at about 1830hrs I was driving in my car along AYE towards MCE on the right most lane. Due to the heavy traffic, I had used the brake to slow down my car to follow the traffic. While my car was slowly moving, I felt an impact from the rear of my car. I then stopped my car made a check outside. After I had left my car, I discovered that one Proton car(JLK3194), had hit on to the rear of my car bumper. There are scratches and dents on my car rear bumper. There was 3 other car that was also involved in the said accident. Traffic police later attended to us and I was advised to lodged an accident report.



SINGAPORE
POLICE FORCE



T/20190113/2058

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Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

Report No. T/20190113/2058

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 The Report: G / Staff Sgt AHMAD SALLEH BIN RAHMAN
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / AEIT / SSI 2 JUREMAH BINTE AHMAD Contact No.: 65472076

Signature Of Informant:
Date/Time: 13/01/2019 14:28
Classification Of Case:

Authentication Stamp
NP168

SIGNATURE

SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 12.01.2019		TIME: 18:30hrs (hh:mm) 24 hrs Format	
LOCATION AYE Towards MCE			
VEHICLE NUMBER SLU 1869B			
INSURED NAME Weng Fenduan			
NRIC / FIN 88719465B		CONTACT:	
MAKE Mazda 3 Sedan		MODEL 1.5 AT EUG	
Are you claiming under your own insurance policy for repair to your vehicle?			
() Yes, If No, Pls Select : (<input checked="" type="checkbox"/>) Third Party () Reporting Only			
INSURANCE COMPANY AB			
TYPE OF POLICY (<input checked="" type="checkbox"/>) COMPREHENSIVE () THIRD PARTY () TPFT			
POLICY NUMBER : 1700087817			
NAME DRIVER : Dai Jiadi		() SAME AS INSURED	
NRIC / FIN 881878552		CONTACT: 9295 6189	
DATE OF BIRTH: 09.10.1981			
DRIVING PASS DATE: 05.02.2015			
OCCUPATION : (<input checked="" type="checkbox"/>) INDOOR () OUTDOOR			
GENDER : (<input checked="" type="checkbox"/>) MALE () FEMALE			
EMAIL ADDRESS: () NO EMAIL			
ADDRESS OF DRIVER: 157 Yung Loh Rd #0428 S(610151)			
Number Of Passenger Include Driver:			
Was driver an employee of the Insured's Company? () YES (<input checked="" type="checkbox"/>) NO			
If No, Relationship Of The Driver With The Insured			
() Owner (<input checked="" type="checkbox"/>) Spouse () Friend () Relative () Children () Sibling () Others			
Does The Driver Own Any Other Vehicle? : () YES (<input checked="" type="checkbox"/>) NO			
If Yes, Vehicle Registration Number Of Driver's Own Vehicle:			
Insurance Company Of Driver's Own Vehicle			
Weather Conditions: () Clear (<input checked="" type="checkbox"/>) Raining () Drizzling () Others			
Road Surface : () Dry (<input checked="" type="checkbox"/>) Wet () Others			
Was Any Foreign Vehicle Involved In This Accident? (<input checked="" type="checkbox"/>) YES () NO JLK 3194			
Was Anybody Injured In The Accident? () YES (<input checked="" type="checkbox"/>) NO			
If YES, Injured details :			
Convey By Ambulance: () YES (<input checked="" type="checkbox"/>) NO			
Was There Any Video Capture By Car Camera? () YES (<input checked="" type="checkbox"/>) NO			
Was There Accident Reported To The Police? (<input checked="" type="checkbox"/>) YES () NO If Yes Attach Police Report			
Police Report Number (if any)			
Details Of 3rd Party	Name / NRIC	No.of Paxs (incl'driver)	Contact
Veh B JLK 3194	(Kurnia Ins)	() / Not Sure ()	
Veh C SKM 4256D		() / Not Sure ()	
Veh D SMF 5934L		() / Not Sure ()	
Veh E SJU 793TV		() / Not Sure ()	
Veh F		() / Not Sure ()	
Veh G		() / Not Sure ()	

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number **S8187865Z**

Name: **DAI JIADI**

Birth Date: **09 Oct 1981**

Issue Date: **05 Feb 2015**

002393593A

SG 50

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8187865Z**

Name: **DAI JIADI**

戴家弟

Race: **CHINESE**

Date of birth: **09-10-1981**

Sex: **M**

Country of birth: **CHINA**

S8187865Z

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

EFFECTIVE DATE

Class 3 Motor Cars < 3000kg with < 7 passengers, exclusive of the driver; and other motor vehicles < 2500kg **05 Feb 2015**

Licence No: **S8187865Z**

NP 428A

8183026

S8187865Z

8187865Z

Nationality: **CHINESE**

Date of issue: **06-03-2013**

APT BLK 157 YUNG LOH ROAD #04-28 SINGAPORE 610157

S8187865Z **25/06/2013**

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8779465B



Name

WEN FENGDUO

文 凤 朵

Race

CHINESE

Date of birth

28-08-1987

Sex

F

Country of birth

CHINA

S8779465B



9193072



NRIC No S8779465B

Nationality

CHINESE

Date of issue

06-03-2013

APT BLK 157 YUNG LOH ROAD #04-28
SINGAPORE 610157

S8779465B

25/06/2013

MAZDA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : WEN FENG DUO
Period of Insurance : 24 Nov 2017 To 23 Nov 2019
Engine No. : P520478385
Chassis No. : JM6BN22A8J0187549

Vehicle No. : SLU1869B
Policy No. : 1700087817
Endorsement No. :
Issued Date : 07 Dec 2017

ABOUT THE COVER

Make/Model : MAZDA 3 1.5 SKYACTIV
Engine Capacity/Tonnage : 1,496.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2017
Insuring with COE/PAFF : 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 his/her permission.
This Policy will indemnify the Policyholder or any authorized 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" ("YIDH") if You are or Your Authorized Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

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 1500cc - 1800cc Optional

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 35 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

WEN FENG DUO - \$600 (Own Damage)

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

1. Trans Eurocars Pte Ltd. Add: 5 Ubi Close, Singapore 408605 63958899

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: HONG LEONG FINANCE LTD

We hereby certify 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, 1989 (Malaysia).

0903599190

ARF (AP) PTE LTD - MAZDA
7 MAXWELL ROAD #01-100 ANNEX B MND COMPLEX
SINGAPORE 068111

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

ESSC28

> **Back to OneMotoring**

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	9465B
Vehicle Details	
Vehicle No.:	SLU1869B
Vehicle to be Exported:	No
Intended Deregistration Date:	31 Jan 2019
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA3 SEDAN 1.5 AT EU6
Primary Colour:	Red
Manufacturing Year:	2017
Engine No.:	P520478385
Chassis No.:	JM6BN22A8J0187549
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$15,614.00
Original Registration Date:	24 Nov 2017
First Registration Date:	24 Nov 2017
Transfer Count:	0
Actual ARF Paid:	\$10,614.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	23 Nov 2027
PARF Rebate Amount:	\$7,960.00
Intended COE Rebate Details	
COE Expiry Date:	23 Nov 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$46,791.00
COE Rebate Amount:	\$41,241.00
Total Rebate Amount:	\$49,201.00

The information contained herein is correct as at 14 Jan 2019

OK