#### FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 200006262D

Date: 08.08.2019

AIG Asia Pacific Insurance Pte Ltd Chartis Building 78 Shenton Way #07-16 Singapore 079120

Attn: Motor Claim Department

Dear Sir/Madam,

#### ACCIDENT INVOLVING VEHICLES: SKC 3185J / SLJ 9761H AND OTHER ON 30.04.2019

We are the authorized repair workshop for the owner of motor vehicle no: SKC 3185J , which was involved in the captioned accident with your insured vehicle no: SLJ 9761H . The vehicle owner has requested and authorized us to assist him in presenting his/her claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving, we are submitting these claims for your consideration on behalf of the owner/claimant.

1)	Cost of Repair (inclusive of GST)	S	15,515.00
2)	Loss of Use (10 Days + 1 Sunday x S\$100)	5	1,100.00
3)	GIA Search Fee	S	2.00
		S	16,617.00

We enclosed herewith the following documents to support the claims:

a) Final Repair Invoice

b) GIA Search Result

c) Letter of Authorisation, etc...

d) GIA Report

e) Police Report

f) I/C & Driving Licence

g) Insurance Certificate

h) Vehicle Registration Log Card

Kindly look into the matter and let us hear from you on the settlement of our customer's claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/claimant.

Thank you.

Yours faithfully,

Jason Tang (jason@fastechauto.com.sg)

For FASTECH AUTO PTE LTD

## TAX INVOICE

#### FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay

Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 200006262D

Tax Invoice: 21065

AIG Asia Pacific Insurance Pte Ltd

Chartis Building 78 Shenton Way #07-16

Singapore 079120

Attn: Motor Claim Department

Date

:08.08.2019

Vehicle No

:SKC 3185J

Make/Model : SUBARU FORESTER

Chassis/Eng#

Accident Date :30.04.2019

Claim No

Reference

:0519 -21065

Policy No.

Amount

To proceed on lump sum repair

SS

14500.00

E. & O. E.

Total: S\$

14500.00

GST @ 7% : S\$

1015.00

Amount Due : SS

15515.00

for FASTECH AUTO PTE LTD

All Invoices are subjected to GST

Invoice 30/04/2019



#### GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

## Third Party Insurer Enquiry

Our Ref No:

GR-19-067487

Date of Request:

30/04/2019

Your Ref No:

Online Purchase

Kim Chwee Auto Pte Ltd 1 Kaki Bukit Avenue 6 #01-48 AutoBay@Kaki Bukit Singapore 417883

Dear Sir/Madam,

Enquiry Date

30/04/2019

Enquiry By

Tang Kok Wee, Allan

IP Vehicle No.

SLJ9761H

cident Date

30/04/2019

**Enquiry Result** 

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SLJ9761H	AIG Asia Pacific Insurance Pte. Ltd.	30/12/2018-29/12/2019	65-6419-3000

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

This is a computer generated document and requires no signature.



### GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm GST Registration No: M400017735

## TAX INVOICE

Our Ref No:

GR-19-067487

Date of Request:

30/04/2019

Your Ref No:

Online Purchase

Kim Chwee Auto Pte Ltd 1 Kaki Bukit Avenue 6 #01-48 AutoBay@Kaki Bukit Singapore 417883

Dear Sir/Madam,

Enquiry Date

30/04/2019

Enquiry By

Tang Kok Wee, Allan

IP Vehicle No.

SLJ9761H

ccident Date

30/04/2019

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

[X] GIRO [] Cash [] Cheque



## RELEASE VOUCHER (AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)

Fretzel Asta De 111	
wen. Fastech Auto He Ltd	("the workshop") hereby confirm that we/l
have reached an agreement with the appointed sur	veyor of AIG Asia Pacific Insurance Pte. Ltd.
(*name	of surveyor") with respect to the amount deimod for
S\$ (repair costs), S\$	(loss of use/metal) S\$ (asset 5
for vertice no. OC 31634 that was damage	d nursuant to the applicant which
on 20.04-1017 (date) along 2FF [M(72 REF	(location) impolying
vehicle no/sSLJ_9761 H	(HARDEN (HARDEN)
This is pursuant to the inspection conducted on	(date) at "the workshop"
We/I confirm that we/I are/am authorized by the owner KO of vehicle no. SCC 318ST to make the claim as an	ng Teck Yeong Cithird party claimants
of vehicle no. SKC 31857 to make the claim as set	out in the above paragraph and well have full
authority to settle the matter on his/her behalf in a manner to	ial we/l deem fit We/l stockes begin the letter of
authority given by "the third party claimant".	and a large up gill the letter. Of
We'll further confirm that we'll will indemnify AIG Asia Pacific	c Insurance Pte. Ltd for all dameros loss and/-
appears that they will or have already incurred in the event i	hat "the third perty daimant" after the should and
agreement lodges a further claim scalnst the former for any	loss and expenses outlend - 111
repairs and/or rental and/or loss of use pursuant to the dama	ge to SKC 318SJ - (vehicle no ) as a mouth
of the accident.	Transcip in a se a testin
We/I confirm that the agreement reached above is in full an	d final settlement of any claim of the third costs.
contraint paradem to the accident and that further this settlem	ent is reached on a without projudice and without
admission of ilability basis.	Programma said Williams
This agreement is subject to the application of Singapore	lew and the Singapore Courts have exclusive
urisdication over any dispute arising out of the same.	Into morphic
Dated thisday of	(month) 20 (year)
	/ >
	STO PTE 1
	(\$C = \$\frac{1}{2}\)
	(3)
ligned by AIG appointed surreyor	Chopped 3 Signed by "the workshop"



# AUTHORIZATION TO ACT (AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)

W				
of Blk 613D Punggol Drine # 03-1  owner of Skc 3185J  Fastech Auto He Ltd.	SIT Singapore (vehicle	_("the 824613 no.)	third party	claimant") (address), authorize
("the workshop") to act for me with rental and/or loss of use ("claim") for damaged pursuant to the accident we see Twds 8KE involving vehicle no/s SLJ 9761 H	r my vehicle n hich occurred	o. <u>\$60</u>	04.2019 (d	that was
I further authorize the workshop to manner that they deem fit and the payment furtherto settlement of my cl	workshop is fi	urther a	uthorized t	o receive
favour of the workshop.			Janes	g made in
I further acknowledge that any settle behalf is on a without prejudice and as the driver/owner/insurers of the other.	ement the wo	orkshop sion of I	may reac	h on my
I further acknowledge that any settle behalf is on a without prejudice and	lement the wo	orkshop sion of I concern	may reac lability basi led.	h on my

#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

- Please report <u>correctly</u> 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 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.

<ol><li>By the lodgement of this report to the insurers, you hereby consaforesaid.</li></ol>	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	30/04/2019 13:33
Date Of Accident	30/04/2019 07:00
Exact Location Of Accident	ALONG SLE TWDS BKE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKC3185J
Insured/Policyholder	
Name Of Registered Owner	KANG TECK YEONG (JIANG DERONG)
NRIC No	S7421211E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98006927
Alternative Phone No	OFFICE-98006927
Vehicle Particulars	
Manufacturer	SUBARU
Model	FORESTER 2.0XT CVT AWD SR
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5100868358



Cover Note Number

Name of Driver KANG TECK YEONG (JIANG DERONG)

NRIC No S7421211E Date Of Birth 02/07/1974 Occupation INDOOR Date Of Driving Pass 23/04/2009

10 YEARS AND 0 MONTHS Driving Experience

Gender MALE

(LOCAL) +65-98006927 Mobile Number

Fax Number

OFFICE-98006927 Contact Number

EMail Address NOEMAIL

BLK 613D PUNGGOL DRIVE Address

#03-817

824613 Postcode

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

CHAIN COLLISION Type Of Accident

Weather Conditions CLEAR Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident?

YES

6

Was any injured conveyed to hospital by ambulance?

NO YES

Was any other material or property damaged?

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

REFER TO STATEMENT.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SLJ9761H

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 2

Vehicle Registration Number

SME637H

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

SLG7563S

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 4**

Vehicle Registration Number

SGL100Z

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 5**

Vehicle Registration Number

SLZ2293D

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**

KANG TECK YEONG (JIANG DERONG) Name

Approximate Age

Injuries Sustain Injured person in which vehicle?

Were seat belts wom?

Was this injured conveyed to hospital by ambulance?

Address Postcode BODY

SKC3185J

YES

NO

#### Accident Sketch Plan

#### 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 truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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 regions 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 berefy consent to the archiving of this report at the centre and to copies of the report being made svallable aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General imparance 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 forms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of the purpose(s).
  - 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 enquines 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 anit/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.
- (ii) 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:

Oriver's fignature (if driver is not the policyholder)

Date & Time:

Reporting Centre Person

Name: NRIC/FIN No.:

#### Accident Sketch Plan

SKETCH PLAN

	中国 中国人口人国人国人国人国人国人国人国人国人国人国人国人国人国人国人国人国人国人国	A-SKC 3185] B-SLJ9761H C-SME 637H D-SLG 75635 E-SGL 100Z F-SLZ 2293D
l i		

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on the stated date and time I was driving my
untile A to a second of the
vehicle A along see north BKE, vehicle F stop. I
for and college and the action of the
Sellow suit , sudebuly relicle B hit on my new and
course my cay to push forward and hit in which
The second of the second of the second
F. Mure were 6 cers involved in an assidurt.

DECLARATION

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

Policyholder's Signature Date & Time:

Driver's Manature (H driver is not the policyholider)

Date & Time:

Reporting Centre Personnel y Apature Name

NRIC/FIN No.





T/20190430/2074

1 of 4 Report No. T/20190430/2074

Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

Tel No: 1800-4519999

REPORT OF A TRAFFIC ACCIDENT

General Information of the Accident

Date/Time Report Made: 30/04/2019 13:45			Vide Report No.:	Station Diary No.
Informa	int's Partic	ulars		100
Name o KANG T	f Informant ECK YEON		Address: APT BLK 613D PUNGGOL I 824613	DRIVE #03-817 SINGAPORE
ID Type / ID No.: NRIC NO / S7421211E			Contact No.: Home/Office:	Mobile: poposon;
Nationality; SINGAPORE CITIZEN		EN	Email: Mobile: 98006927	
Sex: Male	Age: 44	Date of Birth: 02/07/1974	Type of Informant: Driver	
Race: Chinese Occupation: Service Engineer			Language:	Institution / School Name:
			Driving Licence Information: Class: 3	Date of Expiry:

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident:	Type of Locatio Straight Road
SELETAR EX	Traveling Toward Road 2 PRESSWAY  near Mandai Exit.		30/04/2019 07:00	
Weather: Clear	Maridal Exit.	Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision Between Movir	on: ng Vehicles - Head To Re	ar		Anyone conveyed by ambulance: No

Vehicle No.	Type an	44/4	Model	Color	ASSESSED TO THE REAL PROPERTY.	
SGL100Z	Car	H-Ne	THIS GIVE	Cold	Gondition	No of Passenge
SKC3!85J	Car	OMB 4 Print			Seriously Damaged	0
	Car	SUBARU	FORESTER 2.0XT CVT AWD SR	Brown	Slightly Damaged	0
SLG7563S	Car	·	TAND OIL		Seriously Damaged	0
SLJ9761H	Car				Slightly Damaged	0





Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

Tel No: 1800-4519999

2 of 4 Report No. T/20190430/2074

#### CONTINUATION OF REPORT

Vehicle No.	Tune	14.10	Take 1	To I was a second	以祖子(1527年)	
NAME OF TAXABLE PARTY.	19877	Make	Model	Color	Condition	No of Passenge
SLZ2293D	Car				Slightly Damaged	0
SME637H	Car				Seriously Damaged	

Details of V	ehicle Insurance	M. OFFICE OF	ate developed	accept the same
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKC3185J	NTUC Income Insurance Co-Operative		23/05/2018	
	Limited		20/00/2010	22/00/2019

Details of Perso	on involved	100		10000	- Table	
Any Pedestrian I	The second secon			and the same	Cont.	THE STREET, ST
No. of Pedestria			Use of	Pedestria	n Cross	cina: MA
Driver		DATE OF	100001	cuesula	II CIUS	sing: IVA
Name	KANG TECK YEONG		ID No.		S7421211E	
Related Vehicle	SKC3185J (Car)			Conta	act No.	98006927
Hospital/Clinic	PROHEALTH MEDICAL GROUP @ PUNGGOL DAMAI PTE LTD			Class Drivin Licen	g	Class: 3 Date of Expiry: NIL
Date Treatment	30/04/2019 Date Dis		scharge		/2019	
No. of Days gran	ted Medical Leave	03	Degree	of Injury	Slight	
Driver	Control of the last of the las		TO BELLEVIA	or migary	Citati	AND ADDRESS OF THE OWNER, THE OWN
Name	ONG CHEE BOON		ID No		S7327089H	
Related Vehicle	SLJ9761H (Car)			Contact No.		93835307
Hospital/Clinic				Class Driving Licence Expiry	e &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Dis		NIL	
No. of Days grant	ed Medical Leave	NIL	Degree	of Injury	NIL	





3 of 4

Report No. T/20190430/2074

Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

Tel No: 1800-4519999

CONTINUATION OF REPORT

Name	ISKANDAD ZI II KADMAINI DIA	2 2 4 4 4 4 4	THE PARK	STATE OF THE PARTY	
	ISKANDAR ZULKARNAIN BIN NAIM		ID No.		S1349805I
Related Vehicle	SLZ2293D (Car)		Contact No.		83359861
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment				NIL	
No. of Days gran	ited Medical Leave NIL	Degree o	of Injuny	NIL	
Driver		V ( V V V V V V V V V V V V V V V V V V	or mijury	LAIL	
Name	REUBEN CHUA HONG LIN		ID No	70	The sold by
			ID No.		S9705808C
Related Vehicle	SME637H (Car)				
	OMEDOTT (Cal)		Contact No.		NIL
Hospital/Clinic	NIL		-		
			Class of Driving Licence & Expiry Date		Class; NIL Date of Expiry: NIL
- AV - AMP			A second second	BUT KACKE	
Date Treatment	NIL ed Medical Leave NIL	Date Disc	hama	NIL	

#### Brief Details.

On 30/4/19 at about 0700hrs, I was driving along SLE towards BKE's direction. When I was near Mandai Exit, due to the heavy traffic, the car in front of me (SLZ2293D) jam braked. The car behind me (SLJ9761H) and I also managed to brake in time. However, the 4th car (SME637H) collided into SLJ9761H (3rd car), pushing it onto my car, which went forward and collided into SKC3185J (1st car). The 5th (SLG7563S) and 6th (SGL100Z) cars were also involved in the chain collision. The driver of the 5th car (SLG7563S) was bleeding on his head. I have the front and rear in-vehicle video footage of the incident. I left the scene before police and ambulance arrived. I was given 3 days MC due to pain on my neck and back.





T/20190430/2074

4 of 4 Report No. T/20190430/2074

Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

Tel No: 1800-4519999

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.

CONTINUATION OF REPORT

Signature Of Officer Recording The Report: F /	Signature Of Informant:
Sgt 3 ONG KOK CHUAN	fy.
Signature Of Interpreter: Not applicable	Date/Time: 30/04/2019 13:45
Officer In Charge Of Case:	Classification Of Case:
Sr Staff Sgt NOR FAIZAL BIN YAHYA Contact No.: 65476202	
Authentication Stamp	1007









## > Back to OneMotoring

Enquire PARF/COE	Rebate for	Registered	Vehicle
------------------	------------	------------	---------

Enquire PARF/COE Rebate for Registered	Vehicle
Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	1211E
Vehicle No.:	SKC3185J
Vehicle to be Exported:	Yes
Intended Deregistration Date:	30 Apr 2019
Vehicle Make:	SUBARU
Vehicle Model:	FORESTER 2.0XT CVT AWD SR
Primary Colour:	Brown
Manufacturing Year:	2015
Engine No.:	FA20K918805
Chassis No.:	JF1SJGK85FG056067
Maximum Power Output:	177.0 kW (237 bhp)
Open Market Value:	\$17,522.00
Original Registration Date:	30 Sep 2015
First Registration Date:	30 Sep 2015
Transfer Count:	1
Actual ARF Paid: Intended PARF Rebate Details	\$17.522.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Sep 2025
PARF Rebate Amount: Intended COE Rebate Details	\$13,141.00
COE Expiry Date:	29 Sep 2025
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period[Years]:	10
QP Paid:	\$62,101.00
COE Rebate Amount:	\$39,830.00
Total Rebate Amount:	\$52,971.00

The information contained herein is correct as at 30 Apr 2019

ОК