

108/11/131 Wt
ASS. REC. BY: MOROUS
2

REF:

A16

ASSIGNMENT

From:
Estimated Cost:

Date:

OD / TP / WS / TP RES / OD RES / EVA / INV / MY

To inspect Vehicle No:

at Workshop m/s

of

Insured:

Policy No.

Claims No.

Sum Insured:

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

Bal. or Market Value:

IDAC Accident Report:

GIA / PR Seen:

Est. Repairs:

Lum Sum:

CA / REV / REP. / 24 HRS

Date:

Person Contacted:



Veh No: SJ234737 Yr Regn: 11 / 10
Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or CA /

Make:

Colour:

Sp. Reading:

Eng/No:

C/No:

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / Rim / STD A/Rim or

Tyre Size:

F:

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or Cam fort

Front

R/Bal.

L/Bal.

D.O.A.

Survey held at

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time

Action / Instruction

have video of folder 17A14259
original - result?
10/6/19 4/5 @ 60000 cost find with Ahs.

Date/Time, File Pass to?

1)

Date/Time, File Return to?

2)

☐ : Prel. Report
☐ : Final Report

Days Of Repair:

Resurvey No. of Trip:

Survey Fee:

Transportation:

Add Fee:

☐ : Site Insp (\$)
☐ : Interview (\$)
☐ : Tech. Invs (\$)
☐ : Weekend (\$)

Report Format :

Lump Sum / I.B.I. (\$)

TOTAL

FASTECH AUTO PTE LTD
BLK1 KAKI BUKIT AVE 6
#01-46,48,50 AUTOBAY
SINGAPORE 417883

VEHICLE NO: SJZ 3473T

QTY	PARTICULAR
1 PCS	FRONT BUMPER
1 PCS	FRONT BUMPER SIDE HOLDER O/S
1 SET	FRONT BUMPER CLIPS
1 PCS	FRONT BUMPER FOG LAMP O/S
1 PCS	FRONT BUMPER REINFORCEMENT
1 PCS	HEADLAMP O/S
1 PCS	FRONT FENDER O/S
1 PCS	FRONT FENDER INNER SHIELD O/S
1 SET	FRONT FENDER INNER SHIELD CLIPS O/S
1 PCS	FRONT WIPER WASHER TANK O/S
1 PCS	FRONT SHOCK ABSORBER O/S
1 PCS	FRONT KNUCKLE ARM O/S
1 PCS	FRONT KNUCKLE ARM BEARING O/S
1 PCS	FRONT LOWER ARM O/S
1 PCS	FRONT STEERING RACK ASSY
1 PCS	FRONT DOOR O/S
1 SET	FRONT DOOR FRAME BLACK STICKER O/S
1 PCS	FRONT DOOR OUTER PROTECTOR O/S
1 PCS	FRONT DOOR VIEW MIRROR ASSY O/S
1 PCS	FRONT DOOR GLASS REGULATOR O/S
1 PCS	FRONT DOOR GLASS REGULATOR MOTOR O/S
1 PCS	FRONT SPORT RIM O/S

566.30

521.10

699.50

252

24/7/19	\$655.00	
11	\$88.50	X
rec	\$50.00	
11/19	\$392.30	
11	\$422.10	X
11/19	\$1,266.10	
11/19	\$715.30	
11/19	\$288.50	
11	\$50.00	
11	\$222.10	X
11	\$566.50	
11	\$645.10	
11	\$350.00	
11	\$699.20	
11	\$2,180.00	X
11/19	\$1,420.00	
11	\$125.00	
11	\$288.50	
11	\$1,045.30	
11	\$299.20	X
11	\$488.10	X
11	\$680.00	X
	\$12,916.80	

LABOUR CHARGES:

TO CHECK WIRING
TO DISMANTLE & REPLACING FRONT UNDERCARRIAGE
TO DISMANTLE & REFIX DOOR MECHANISM
TO CONDUCT WHEEL ALIGNMENT
TO SPRAY RUST PROOFING
LABOUR FOR PANEL BEATING & REPLACING PARTS
TO PUTTY & SPRAY PAINTING

\$80.00	20
\$180.00	120
\$100.00	60
\$150.00	80
\$100.00	60
\$900.00	400
\$1,500.00	800

TOTAL \$15,926.80

who Auto Centralists hence notify the Reparer of the following:

- * To ensure satisfaction spray painting
- * To ensure damaged part(s) during resurvey
- * Final price up subject to confirmation
- * That this survey is on a "Without Prejudice" basis
- * For work commencement it is agreed
- * Supplementary survey must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Reparer

Signature:

Date:

7998.3
5998.72
7538.72
6030

not Adhwa
2/5 = 6000
28/5/19 Hdy.

FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay

Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 200006262D

Date : 19.06.2019

AIG Asia Pacific Insurance Pte Ltd

Chartis Building

78 Shenton Way #07-16

Singapore 079120

Attn: Motor Claim Department

ACCIDENT INVOLVING VEHICLE: SJZ 3473T AND SGK 4896P ON 27.05.2019

We are the authorized repair workshop for the owner of motor vehicle no: **SJZ 3473T**, which was involved in the captioned accident with your insured vehicle no: **SGK 4896P**. 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)	\$	6,420.00
2) Loss Of Use (4 days X \$100)	\$	400.00
3) GIA Search Fee	\$	2.00
	<u>\$</u>	<u>6,822.00</u>

We enclosed herewith the following documents to support the claims:

- | | |
|---------------------------------|------------------------------------|
| a) Final Repair Invoice | b) Vehicle Registration Log Card |
| c) GIA Report/GIA Search Result | d) I/C & Driving Licence |
| e) Insurance Certificate | f) Letter of Authorisation, etc... |

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

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

AIIG Asia Pacific Insurance Pte Ltd

Chartis Building

78 Shenton Way #07-16

Singapore 079120

Attn: Motor Claim Department

Tax Invoice : 21114

Date: 19.06.2019

Vehicle No: SJZ 3473T

Make/Model: TOYOTA COROLLA

Accident Date: 27.05.2019

Claim No : 0519-21114

Reference :

Policy No :

		Amount
To proceed on lump sum repair	S\$	6,000.00

E. & O. E.

Total : S\$ 6,000.00

GST @ 7% : S\$ 420.00

Amount Due : **S\$ 6,420.00**

for FASTECH AUTO PTE LTD

All Invoices are subjected to GST

**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-19-083785
Date of Request: 28/05/2019

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 28/05/2019
Enquiry By Jason Tang Jun Zhong
Vehicle No. SGK4896P
Accident Date 27/05/2019

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SGK4896P	AIG Asia Pacific Insurance Pte. Ltd.	31/05/2018-30/05/2019	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.



RECORDS MANAGEMENT CENTRE

**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
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TAX INVOICE

Our Ref No: GR-19-083785

Date of Request: 28/05/2019

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 28/05/2019
Enquiry By Jason Tang Jun Zhong
Vehicle No. SGK4896P
Accident Date 27/05/2019

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:

☒ GIRO ☐ Cash ☐ Cheque



RELEASE VOUCHER
(AIG Asia Pacific - EXPRESS THIRD PARTY CLAIM)

We/I, FasTech Auto Pte Ltd ("the workshop") hereby confirm that we/I have reached an agreement with the appointed surveyor of AIG Asia Pacific Insurance Pte. Ltd. ("name of surveyor") with respect to the amount claimed for S\$ _____ (repair costs), S\$ _____ (loss of use/rental) S\$ _____ (search fees) for vehicle no. SJZ 3473T that was damaged pursuant to the accident which occurred on 27/5/19 (date) along CTE Exit Ang Mo Kio AVE5 (location) involving vehicle no/s SGK 4896P

This is pursuant to the inspection conducted on _____ (date) at "the workshop".

We/I confirm that we/I are/am authorized by the owner Deming 68 ("third party claimant") of vehicle no. SJZ 3473T to make the claim as set out in the above paragraph and we/I have full authority to settle the matter on his/her behalf in a manner that we/I deem fit. We/I enclose herein the letter of authority given by "the third party claimant".

We/I further confirm that we/I will indemnify AIG Asia Pacific Insurance Pte. Ltd for all damages, loss and/or expense that they will or have already incurred in the event that "the third party claimant" after the above said agreement lodges a further claim against the former for any loss and expenses suffered pertaining to costs of repairs and/or rental and/or loss of use pursuant to the damage to SJZ 3473T (vehicle no.) as a result of the accident.

We/I confirm that the agreement reached above is in full and final settlement of any claim of "the third party claimant" pursuant to the accident and that further this settlement is reached on a without prejudice and without admission of liability basis.

This agreement is subject to the application of Singapore law and the Singapore Courts have exclusive jurisdiction over any dispute arising out of the same.

Dated this _____ day of _____ (month) 20____ (year)

Signed by AIG appointed surveyor



Chopped & Signed by "the workshop"



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

I, Deming 68 ("the third party claimant")
of BIK213 Toa Payoh Lor 8 #06-69 5310213 (address),
owner of SJZ3473T (vehicle no.) hereby authorize
Fastech Auto Pte Ltd
("the workshop") to act for me with respect to my claim for repair costs and/or
rental and/or loss of use ("claim") for my vehicle no. SJZ3473T that was
damaged pursuant to the accident which occurred on 27/5/19 (date) along
CTE Exit Ang Mo Kio Aves (location)
involving vehicle no/s SGK4896P ("the accident").

I further authorize the workshop to settle the above mentioned claim in a
manner that they deem fit and the workshop is further authorized to receive
payment further to settlement of my claim with payment cheque/s being made in
favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my
behalf is on a without prejudice and without admission of liability basis insofar
as the driver/owner/insurers of the other vehicle/s is concerned.

Date this _____ day of _____ (month) 20____ (year)



Signed by "the third party claimant"



Signed by "the workshop"

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	28/05/2019 13:17
Date Of Accident	27/05/2019 13:55
Exact Location Of Accident	ALONG CTE EXIT ANG MO KIO AVENUE 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJZ3473T
Insured/Policyholder	
Name Of Registered Owner	DEMING68
Co Reg No	53357973B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97999850
Alternative Phone No	OFFICE-97999850

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS 1.6 AUTO
Exact Purpose for which vehicle was being used at time of accident	
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5095952743-01
Cover Note Number	

Driver

Name of Driver	CHAN TECK MENG
NRIC No	S6824269Z
Date Of Birth	26/06/1968
Occupation	OUTDOOR
Date Of Driving Pass	02/08/1996
Driving Experience	22 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97999850
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 213 #06-69 LORONG 8 TOA PAYOH
Postcode	310213
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - SOLE-PROPIETOR
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

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

Circumstances of Accident

REFER TO BELOW STATEMENT/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	SGK4896P
Vehicle Make/Model/Colour	MERCEDES BENZ GLA180 URBAN (R18 LED)
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
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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:

IDAC KAKI BUKIT (VAC)
23 KAKI BUKIT AVE 4
Reporting Centre
Name: Tel: 67416697
NRIC/FIN No.: Fax: 67492305
Email: vackb@singnet.com.sg

SKETCH PLAN



A - SJZ 3473T

B - SGK 4826P

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on the stated date and time, I was driving along
 CTE Exit Ang Mo Kio Ave 5. suddenly vehicle B
 cut into my lane and hit on my RH side
 portion.

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:

IDAC KAKI BUKIT(VAC)
 23 KAKI BUKIT AVE 4
 Singapore 415933

Reporting Centre Person's Signature
 Name:
 NRIC/IN No Email: vnckb@singnet.com.sg



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5095952743-01

Cover : drive CLASSIC

- | | |
|---|---------------------|
| 1. Index mark and Registration Number of Vehicle | : SJZ3473T |
| Chassis Number | : MR053REE104103988 |
| 2. Name of Policyholder | : DEMING68 |
| 3. Effective Date of Insurance | : 19 Nov 2018 |
| 4. Expiry Date of Insurance | : 18 Nov 2019 |
| 5. Persons 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. | |
| Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. | |
| 6. Limitations as to Use: | |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business. | |

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : YETTA INSURANCE AGENCY PTE. LTD. (00000573346)
 Date of Issue : 09 Nov 2018 15:43 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S6824269Z



Chan
CHAN TECK MENG

曾德銘

Race
CHINESE

Date of Birth
28-06-1968

Sex
M

Country of Birth
SINGAPORE




REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S6824269Z

Chan
CHAN TECK MENG

Birth Date: 28 Jun 1968
Issue Date: 18 Dec 2002




1F20818



NRIC No. S6824269Z



Blood Group: O+ Date of issue: 27-03-1994

APT BLK 213 LORONG 8 TOA PAYOH POB-BB
SINGAPORE 310213
NRIC No. S6824269Z Date: 30/12/2002 No. 1779651

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

CLASS	VEHICLE CLASS	ISSUE DATE
Class 2B	Motorcycles not exceeding 200 cc	16 Jun 1998
Class 3	Motor Cars and Motor Tractors the weight of which (laden) does not exceed 2500 kilograms	03 Aug 1996

NP 428A

License No. S6824269Z



Land Transport Authority

VOCATIONAL LICENCE


Licence No : 56824269Z

Name : CHAN TECK MENG

Issue Date : 8/9/2005


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

PDVL/TDVL
25 000 00000
260925



This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 12 Sin Ming Drive, Singapore 57501.

Type	Description	Issue Date
03	BUS VL	08/01/1998
02	TAXI VL	13/05/1999
04	BUS ATTENDANT	08/01/1998



> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID:	7973B
Vehicle Details	
Vehicle No.:	SJZ3473T
Vehicle to be Exported:	No
Intended Deregistration Date:	28 May 2019
Vehicle Make:	TOYOTA
Vehicle Model:	COROLLA ALTIS 1.6 AUTO
Primary Colour:	Silver
Manufacturing Year:	2010
Engine No.:	1ZRX031993
Chassis No.:	MR053REE104103988
Maximum Power Output:	90.0 kW (120 bhp)
Open Market Value:	\$16,446.00
Original Registration Date:	19 Nov 2010
First Registration Date:	19 Nov 2010
Transfer Count:	1
Actual ARF Paid:	\$16,446.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	18 Nov 2020
PARF Rebate Amount:	\$9,045.00
Intended COE Rebate Details	
COE Expiry Date:	18 Nov 2020
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
QP Paid:	\$34,001.00
COE Rebate Amount:	\$5,014.00
Total Rebate Amount:	\$14,059.00

The information contained herein is correct as at 28 May 2019

OK