

NATIONAL Assessment Centre Services			
Date In: 22/07/2015 17:44	Job description	Date & Time Completed	Done by
Ref No: NIA/INC/90129044	SAS e-filing		
Veh No: SJV984B	E-mail (within 4hrs. AIC 2hrs)		
D.O.A: 2007/2015 28/10	i-Motor Claim Form	M/1054541-001	28/07/2015
OD (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs TP 4hrs)		10/11
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: SLT 7421A	INC ( ) / Non-INC ( )
Owner / Driver: (	Tel:	
Policy No: (	Period: (	Cover Type: (
Confirmed by: (	Date:	Time:
Insured/Driver Liability: (	% (Note-Est. Status (WO): N: 0-20%; P: 21-79%; F: 80-100%)	
Year of Registration: (	Warranty: YES ( ) / NO ( )	
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 ( ) / NO ( ); Towing Co: ( )

Remarks: (INC hotline: 6788 6616)	Date & Time Completed:	Done by:
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

Injury: _____
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Date/Time	Actions

NIA/905524	Invoice Preparation Checklist:	Am't (\$)	Am't (\$)
Claimant's Particulars:	1) AR: Accident Reporting (\$30)	10.00	
Driver/Owner:	2) DA: Damage Assessment (\$100) INC (\$80)		
Contact No:	3) TP: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) PT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (waf 10 Jan 2009)		
	6) TR: Re-inspection \$75		
	7) N1: Idnu DA + SMRT Survey \$160		
	8) NTUC: Additional Services:		
	9) N3: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (N-in INC) against INC \$20		
	9) N12: Idnu Mobile 30		
	Invoice dated	Pen Charged	
	Excess 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.
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	22/07/2019 17:44
Date Of Accident	20/07/2019 21:10
Exact Location Of Accident	BUGIS OPEN CARPARK ALONG QUEENS STREET
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJV984B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	YIP TUCK WEI
NRIC No	S9350638C
Email Address	TONYYIP2606@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92373203
Alternative Phone No	OTHERS-92373203

### Vehicle Particulars

Manufacturer	KIA
Model	CERATO FORTE KOUP-1.6 SX (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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5110108230
Cover Note Number	

### Driver

Name of Driver	YIP TUCK WEI
NRIC No	S9350638C
Date Of Birth	26/12/1993
Occupation	INDOOR
Date Of Driving Pass	10/10/2014
Driving Experience	4 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92373203
Fax Number	
Contact Number	OTHERS-92373203
EMail Address	TONYYIP2606@GMAIL.COM

Address	BLK 339B KANG CHING #09-336
Postcode	612339
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	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)	2
Passenger 1	NAME: : TAN SUYING GENDER: : FEMALE

#### Details of Police Action

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

#### Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE TOO LARGE
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLT7421A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	GOH CHOON SIAH
NRIC/Passport Number	
Contact Number	90036769
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

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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. 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.

I AM AWARE THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

 220719 023hrs  
Policyholder's Signature  
Date & Time:

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

 22/07/2019  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

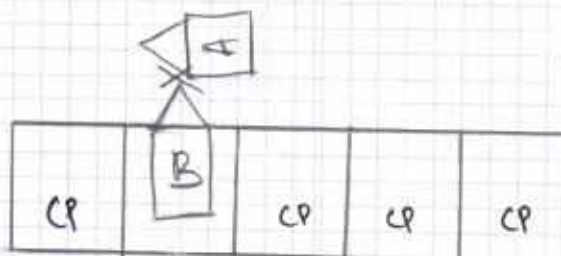
Roshi Lwinthor

SKETCH PLAN

Veh A: SJV 984B

Veh B: SLT 7421A

Bugis Open Car Park Along Queen St



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 20<sup>th</sup> Jul 2019 2113hrs, I was driving out from my parking lot at bugis open carpark along Queen St. On of the vehicle (SLT 7421A) suddenly accelerate out from his parking lot and hit the left side (Fmr) of my vehicle.

DECLARATION

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

*[Signature]*

Policyholder's Signature  
Date & Time:

220714 1123hrs.

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

*[Signature]*  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

22/07/2019

Resh Loo

## Claim Handling

Accident MT/1054541

Police No.	5110106230	Vehicle No.	SIV984B	GST Registration No.	
Certificate No.					
Policyholder Name	YIP TUCK WEI			Policyholder NRIC	S9350638C
Product Code	PRIVATE CAR INSURANCE	Cover Type	Drive CLASSIC	Loading	0
Contact No.(Mobile)	92373203	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KPI	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	TCA	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	eCode Reason	
NCD Privilege	No	WCD Entitlement(%)	20	Private Hire	No

## Accident Details

Report Date	23/07/2019 10:10	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	20/07/2019	Time of Accident (approx)	21:10	Country of Accident	Singapore
Reporting Centre		Orange Force		ICH No.	
Accident Location	BUGIS OPEN CARPARK ALONG QUEENS STREET				

## Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00	Driver is Covered?	Covered
GD Standard Excess	600.00	TP Standard Excess	0.00		
VED GD Excess	0.00	VED TP Excess	0.00		
Additional Excess	0				
Total GD Excess Applicable	600.00	Total TP Excess Applicable	0.00		

## Benefits

## GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

## Policyholder Mailing Address

Address 1	BUK 3395 #09-336	Address 2	KANG CHING ROAD	Address 3	SINGAPORE 612329
Address 4		Address Type	Singapore address	Post Code	612329
Unit No.	09-336	Related Policy number	5110106230		

## OI Driver Info

Driver Name	YIP TUCK WEI	Driver Type	Main Driver	Driver DOB	26/12/1993
Uninsured Driver Name		Driver NRIC	S9350638C	Driving Experience	8
Register Date of Driver License	10/10/2014	Driver Age	25	Contact No.(Home)	
Contact No.(Mobile)	92373203	Contact No.(Office)		Address 3	SINGAPORE 612329
Address 1	BUK 3395 #09-336	Address 2	KANG CHING ROAD	Post Code	612329
Address 4		Address Type	Singapore address		
Unit No.	09-336				
Does he own a Singapore Registered car?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Driver Vehicle No.	SIV984B	Driver Insurer Company	NTUC

## Declaration

Breathalyzer or Blood Test Reading?	0 mg	Any injury?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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## Modification History

Claim 001 New

Claim Type *	GD-MR	Insured Name	YIP TUCK WEI	Insured NRIC	S9350638C
Contact No.(Mobile)	92373203	Contact No.(Home)		Contact No.(Office)	
Email Address		Vehicle Number	SIV984B	TP Number	SLT7421A
Claim Description	SIV984B / SLT7421A ON 20 Jul 2019				
Preferred Workshop	<input checked="" type="checkbox"/> Insured Liability <input type="checkbox"/> Not at Fault				
Repair No. Finalisation	Yes	Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered		Claim Close Date	23/07/2019 10:15	Date Received	23/07/2019 00:00
Report Taken By	ROSLI WAHAB				

Print AK letter

Save Submit

## Attachment

Accident No.	MT/1054541	Claim No.	001
Last Doc. Received	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Upload Date	23/07/2019 10:17
Path *			
Choose File	No file chosen	Category *	Confidential
Choose File	No file chosen	Urgency *	Normal
Choose File	No file chosen	Description *	
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Choose File	No file chosen		
Message Read			

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)
		Photos	Normal	Photos 2019-7-23	
		Photos	Normal	Photos 2019-7-23	

	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:16	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:16	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:16	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:16	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:16	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:15	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:15	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:15	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:15	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:15	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:15	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:15	SAS	Normal	SAS 2019-7-23

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
<div>Display in New Window</div> <div>Scan and uploading</div>				

# Accord Auto Services Pte Ltd

Tel: 6271 7433 / 9274 0999 Fax: 6274 5715 Email: [avclaims@mycarworkshop.com](mailto:avclaims@mycarworkshop.com)

## Particular Of Insured/Driver & Details Of The Accident Motor Accident Report

\*Date of Accident: 20 Jul 2014 \*Time of Accident: 9.13pm  
\*Accident Location: Bugis OPEN CAR PARK ALONG QUEEN ST

### Vehicle Details

\*Vehicle Number: SJV 9848 \*Make & Model: Kia Cerato Forte coup 1.6 AT SX  
ABS D/AB SR

### Insured / Policyholder

\*Owner Name: YIP TUCK WEI \*NRIC: S9350658C  
\*Address: 334B KANG CHING RD #04-336 S612339  
\*Email: TonyYip2606@gmail.com \*HP: 92373203  
\*Occupation: Civil Servant (Army) (Indoor / Outdoor) \*Tel / H / Other: \_\_\_\_\_

### Driver (1) same as above

\*Driver Name: \_\_\_\_\_ \*NRIC: \_\_\_\_\_  
\*Address: \_\_\_\_\_  
\*Date of Birth: \_\_\_\_\_ \*Driving Pass Date: 10/10/2014 \*HP: \_\_\_\_\_  
\*Email: \_\_\_\_\_ \*Gender: Male / Female  
\*Occupation: \_\_\_\_\_ (Indoor / Outdoor) \*Tel / H / Other: \_\_\_\_\_  
\*Driver an employee: Yes / No (\*If no, what is relationship with the policyholder: \_\_\_\_\_)

### Passengers Details

\*P/Name: TAN SUYING (Male/Female) \*P/Name: \_\_\_\_\_ (Male/Female)  
\*P/Name: \_\_\_\_\_ (Male/Female) \*P/Name: \_\_\_\_\_ (Male/Female)

### Insurance Company

\*Insurer: NTUC \*Coverage: C / TPFT / TPO \*Policy No: \_\_\_\_\_

### Detail of other vehicle / Property 1

Vehicle No.: SLT 7421A  
Make & Model: \_\_\_\_\_  
Vehicle Category: \_\_\_\_\_  
Name of Driver: GOH CHHON SIAH  
NRIC : S16920329  
HP : 90036769  
No. of Passengers (Including Driver): \_\_\_\_\_

### Detail of other vehicle / Property 2

Vehicle No.: \_\_\_\_\_  
Make & Model: \_\_\_\_\_  
Vehicle Category: \_\_\_\_\_  
Name of Driver: \_\_\_\_\_  
NRIC : \_\_\_\_\_  
HP : \_\_\_\_\_  
No. of Passengers (Including Driver): \_\_\_\_\_

### For Official Use Only

\*Claiming against Own Ins.: Yes (No) (If No, Reporting Only / TP Claims)

### General Information of the accident

\*Type of accident: Head-Rear / Side swipe / others: Head to side  
\*Weather conditions: Clear / Raining / others: \_\_\_\_\_ \*Any video cam: Yes / No  
\*Road Surface: Dry / Wet / others: \_\_\_\_\_  
\*Witness: Yes / No (Name: \_\_\_\_\_ NRIC: \_\_\_\_\_ HP: \_\_\_\_\_)  
\*Accident reported to police: Yes / No \*Summon against whom: \_\_\_\_\_  
\*Injured party: Yes / No \*No. of passengers (include driver): \_\_\_\_\_  
-I/Name: \_\_\_\_\_ \*Fasten seat belt: Yes / No \*Conveyed by Ambulance: Yes / No  
-I/Name: \_\_\_\_\_ \*Fasten seat belt: Yes / No \*Conveyed by Ambulance: Yes / No



ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5110106230

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle

: SJV984B

Chassis Number

: KNAFW611MA5174087

2. Name of Policyholder

: YIP TUCK WEI

3. Effective Date of Insurance

: 08 Jun 2019

4. Expiry Date of Insurance

: 07 Jun 2020

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 business or profession.

**This Policy does not cover**

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-testing.

(c) Use for the carriage of goods (other than samples) in connection with any trade or business.

(d) 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\$600

EXCESS (SECTION 2)

: N/A

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

: YIP TUCK WEI

NAMED DRIVER (1)

: N/A

NAMED DRIVER (2)

: N/A

HIRE PURCHASE COMPANY

: SWEE SENG CREDIT PTE LTD

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 : VV INSURANCE AGENCY PTE. LTD. (00000614878)

Date of Issue : 07 Jun 2019 14:59 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Singapore NRIC  
Owner ID: 638C

### Vehicle Details

Vehicle No.: SJV984B  
Vehicle to be Exported: Yes  
Intended Deregistration Date: 22 Jul 2019  
Vehicle Make: KIA  
Vehicle Model: CERATO FORTE KOUP 1.6 AT SX ABS D/AB SR  
Primary Colour: White  
Manufacturing Year: 2009  
Engine No.: G4FC9H340168  
Chassis No.: KNAFW611MA5174087  
Maximum Power Output: 92.7 kW (124 bhp)  
Open Market Value: \$15,631.00  
Original Registration Date: 12 Jan 2010  
First Registration Date: 12 Jan 2010  
Transfer Count: 4  
Actual ARF Paid: \$15,631.00

### Intended PARF Rebate Details

PARF Eligibility: Yes  
PARF Eligibility Expiry Date: 11 Jan 2020  
PARF Rebate Amount: \$7,815.00

### Intended COE Rebate Details

COE Expiry Date: 30 Jun 2029  
COE Category: A - Car (1600cc & below)  
COE Period(Years): 10  
PQP Paid: \$29,839.00  
COE Rebate Amount: \$29,656.00  
Total Rebate Amount: \$37,471.00

The information contained herein is correct as at 22 Jul 2019

OK