

NATIONAL Assessment Centre Services <small>(and 1 Jan 2019)</small> NA19095979			
Date In: 22/07/2019 19:19	Job description	Date & Time Completed	Done by
Ref No: NA19095979	SAS e-filing		
Veh No: SFL 6262P	E-mail (within 2hrs, AIC 2hrs)		
D.O.A: 22/07/2019 23:55	I-Motor Claim Form		
OD (TP) Reporting Only	I-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by <u>Fax / Hand</u> to <u>Owner/Wkap</u>		

Preferred Wkap /MNC Assign Wkap / QW: ()		Tel: ()	Fax: ()
TP Particulars:	Veh No: ED 9508Z	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: ()

Date/Time	Actions

NA190557 Claimant's Particulars: Driver/Owner: Contact No: Damaged Portion: QC Checked by (Engr-In-Charge): Auditor's Comment(s): Cat. 1: Cat. 2/3:	Invoice Preparation Checklist		Amt (\$) In Bill	Amt (\$) Add. Bill
	1) AR: Accident Reporting (\$30):			
	2) DA: Damage Assessment (\$100):	INC (\$40)		
	3) TP: Towing Fee	\$40/\$45		
	4) FT: Follow-Through Survey	\$120		
	5) FT: Follow-Through Survey (Resurvey)	\$30		
	For claimant against INC Only (wef 10 Jan 2019)			
	6) TR: Re-inspection	\$75		
	7) N1: Idno DA + SMRT Survey	\$160		
	8) NTUC Additional Services:			
* 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 * N12: Idno Mobile \$0				
Invoice dated: For Charged: For Charged:				

07-MAY-2019 16:39

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 19:19
Date Of Accident	20/07/2019 23:55
Exact Location Of Accident	JUNCTION OF CLEMENTI AVENUE 2/WEST COAST ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJL6262P
Insured/Policyholder	
Name Of Registered Owner	YUSNI BIN FADAL
NRIC No	S7227374E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90012155
Alternative Phone No	OTHERS-96412671

Vehicle Particulars

Manufacturer	HONDA
Model	FREED-1.5 G (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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT110359
Cover Note Number	

Driver

Name of Driver	NUR ILLFA BATRISYA BINTE YUSNI
NRIC No	S9936820I
Date Of Birth	16/11/1999
Occupation	INDOOR
Date Of Driving Pass	09/04/2019
Driving Experience	0 YEAR AND 3 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-90012155
Fax Number	
Contact Number	OTHERS-96412671
Email Address	NOEMAIL

Address	BLK 407 PANDAN GARDENS #03-47
Postcode	600407
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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: : YUSNI BIN FADAL GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CLEMENTI NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: NO. 20 CLEMENTI AVENUE 5 , POSTCODE: 129858 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8729999 - FAX NO: 67748639
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190721/2073

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH THE POLICE OFFICER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	EU9508Z
Vehicle Make/Model/Colour	AUDI A6
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

Name	YUSNI BIN FADAL
Approximate Age	
Injuries Sustain	NECK AND BACK PAIN
Injured person in which vehicle?	SJL6262P
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	NUR ILLFA BATRISYA BINTE YUSNI
Approximate Age	
Injuries Sustain	NECK AND BACK PAIN
Injured person in which vehicle?	SJL6262P
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	


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**.
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.

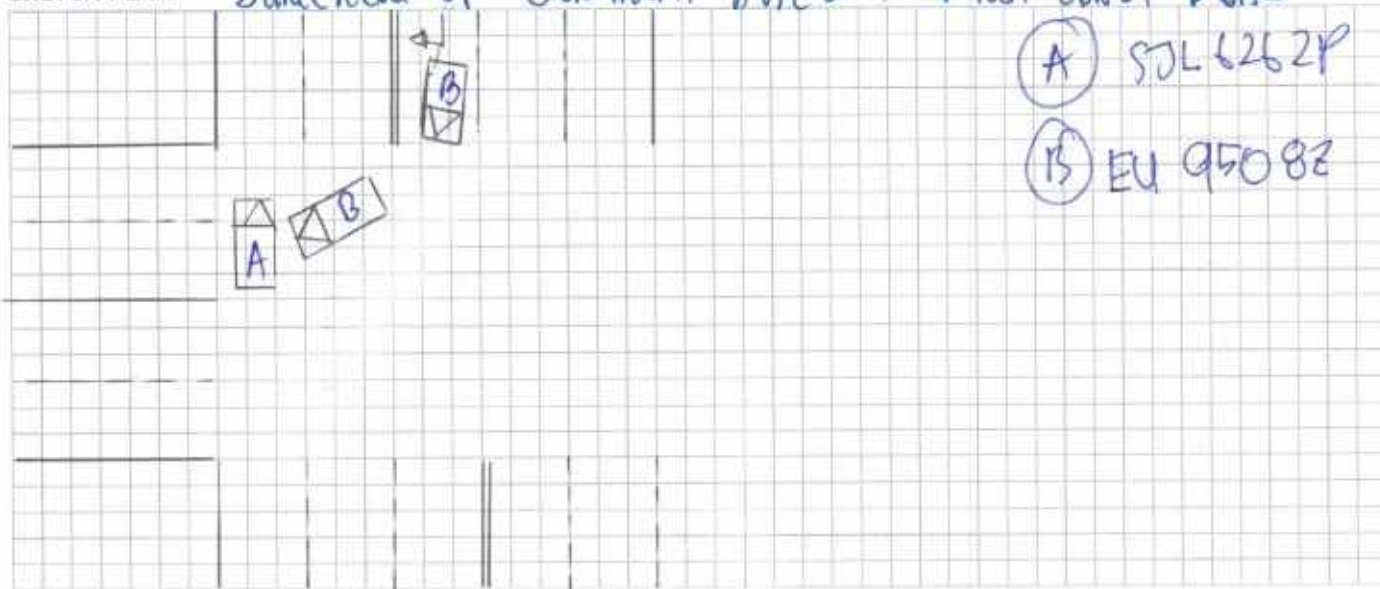

Policyholder's Signature
Date & Time:

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


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

SKETCH PLAN

JUNCTION OF CLEMENTI AVE 2 & WEST COAST ROAD



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report No: T/20190512/2043

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.:



SINGAPORE POLICE FORCE



T/20190721/2073

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

1 of 3

Report No: T/20190721/2073

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/07/2019 17:28		Vide Report No.: D/20190720/0162		Station Diary No.: 89	
Informant's Particulars					
Name of Informant: NUR ILLFA BATRISYA BINTE YUSNI			Address: APT BLK 407 PANDAN GARDENS #03-47 SINGAPORE 600407		
ID Type / ID No.: NRIC NO / S99368201			Contact No.: Home/Office: Mobile: 96412671		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 19	Date of Birth: 16/11/1999	Type of Informant: Driver		
Race: Boyanese			Language: English		Institution / School Name:
Occupation: UNEMPLOYED			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 20/07/2019 23:55	Type of Location: X-Junction
Location: Along Road 1 WEST COAST ROAD Junction of Clementi Avenue 2				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head On				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
EU9508Z	Car	AUDI	A6	Grey	Slightly Damaged	1
SJL6262P	Car	HONDA	FREED	Red	Slightly Damaged	1



**SINGAPORE
POLICE FORCE**



T/20190721/2073

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

2 of 3

Report No. T/20190721/2073

CONTINUATION OF REPORT

Brief Details.

On the above mentioned date, time and location, I was driving my father's car bearing the said registration plate number, heading towards Pasir Panjang direction. At the point of time, I was travelling along lane 2 at a speed of 40-50km/hr as I was approaching the traffic junction. At the moment, the traffic volume was light and the floor was dry.

As the lights were still green and in my favor, I continued to drive forward at the same constant speed however I noticed one car bearing the said registration plate number from the opposite direction, making a right turn. The car was seen turning into Clementi Avenue 2 and after seeing my car approaching, the car did not stop.

When I was in the midst of crossing the junction, the said car made a right turn and his front side of the headlights collided into my driver's side door. We then pulled over and exchanged particulars while waiting for traffic police and the ambulance arrival. I was being conveyed to NUH for medical treatment and was given 3 days MC. My father who was my passenger was given 2 days MC as well. There is in-car camera installed in my car and the SD card was handed over to the traffic police.



**SINGAPORE
POLICE FORCE**



T/20190721/2073

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

3 of 3

Report No. T/20190721/2073

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: D / Sgt 2 CLEMENT CHEE WEI JUN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 21/07/2019 17:28
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt SYED ZAYID MUHAMMAD BIN SYED ABDUL WAHID ALHINDUAN Contact No. 65476394	Classification Of Case:
Authentication Stamp NP168	SN 37
 SIGNATURE	

SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 20.07.2019	TIME: 23:55hrs	(hh:mm) 24 hrs Format
LOCATION Junction of Clementi Ave 2 & West Coast Rd		
VEHICLE NUMBER S2L 5262P		
INSURED NAME Yusni Bin Fadal		
NRIC / FIN S7227374E	CONTACT: 9001 2155	
MAKE Honda	MODEL Freed 1.56A	
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 Tokio		
TYPE OF POLICY (<input checked="" type="checkbox"/>) COMPREHENSIVE () THIRD PARTY () TPFT		
POLICY NUMBER: MT110359		
NAME DRIVER: Nur ILFA Bahisya Bin Yusni () SAME AS INSURED		
NRIC / FIN		CONTACT: 9641 2671
DATE OF BIRTH: 16.11.1999		
DRIVING PASS DATE: 09.04.2019		
OCCUPATION: (<input checked="" type="checkbox"/>) INDOOR () OUTDOOR		
GENDER: () MALE (<input checked="" type="checkbox"/>) FEMALE		
EMAIL ADDRESS: () NO EMAIL		
ADDRESS OF DRIVER: 407 Pandan Gardens #03-47 S(600407)		
Number Of Passenger Include Driver: 2 pax include driver		
(1) Yusni Bin Fadal - male		
Was driver an employee of the Insured's Company? () YES () NO		
If No, Relationship Of The Driver With The Insured		
() Owner () Spouse () Friend () Relative (<input checked="" type="checkbox"/>) 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: (<input checked="" type="checkbox"/>) Clear () Raining () Drizzling () Others		
Road Surface : (<input checked="" type="checkbox"/>) Dry () Wet () Others		
Was Any Foreign Vehicle Involved In This Accident? () YES (<input checked="" type="checkbox"/>) NO		
Was Anybody Injured In The Accident? (<input checked="" type="checkbox"/>) YES () NO		
If YES, Injured details : Both driver & pax (check back pain)		
Convey By Ambulance: () YES (<input checked="" type="checkbox"/>) NO		
Was There Any Video Capture By Car Camera? (<input checked="" type="checkbox"/>) YES () 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)
Veh B EU 9508 Z		() / Not Sure ()
Veh C		() / Not Sure ()
Veh D		() / Not Sure ()
Veh E		() / Not Sure ()
Veh F		() / Not Sure ()
Veh G		() / Not Sure ()

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S99368201



Name

For LKK/NAC Use Only

NUR ILLFA BATRISYA BINTE
YUSNI

نور ايلفى بترىشا بنت يوسنى

Race

BOYANESE

Date of birth

16-11-1999

Sex

F

S99368201



Country/Place of birth

SINGAPORE

5444824



NRIC No. S99368201



For LKK/NAC Use Only

Date of issue

11-03-2015

Address

APT BLK 407 PANDAN GARDENS
#03-47
SINGAPORE 600407

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **S99368201**
Name: **NUR ILLFA BATRI SYA BINTE YUSNI**
For LKK/NAC Use Only
Birth Date: **16 Nov 1999**
Issue Date: **09 Apr 2019**



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 3A: Motor cars without clutch pedals (Auto) with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight $\leq 2500\text{kg}$	09 Apr 2019

For LKK/NAC Use Only



NP 428A

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7227374E



Name
YUSNI BIN FADAL

For LKK/NAC Use Only

Race
BOYANESE

Date of Birth
03-08-1972

Sex
M

Country of Birth
SINGAPORE



11954



NRIC No. S7227374E

For LKK/NAC Use Only

Blood Group
O+

Date of issue
17-08-1993

APT BLK 407 PANDAN GARDENS #03-47
SINGAPORE 600407

NRIC No. S7227374E

Date 06/03/2008

No. 5901807



Tokio Marine Insurance Singapore Ltd.

(Company Reg. No. 192100014M) (GST Reg No. 162-0000023-4)

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tnis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the
Tokio Marine Group



**TOKIO MARINE
INSURANCE GROUP**

Certificate of Insurance

FORM MX1

S1889
688.79

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)

Policy No.: MT110358 (Private Car)

- | | | |
|---|-----------------------|-------------------------|
| 1. Index Mark and Registration Number of Vehicle | SJL6262P | Chassis No.: GB31028670 |
| 2. Name of Policyholder | YUSNI BIN FADAL | |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 23/11/2018 (00:00:00) | |
| 4. Date of Expiry of Insurance | 03/12/2019 | |
| 5. Persons or Class of Persons entitled to drive* | | |
| (a) The Policyholder. | | |
| (b) Any other person who is driving on the Policyholder's order or with his 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to use*

Use only for social domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or the carriage of goods (other than samples) in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 3 of the Motor Vehicles (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.

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

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd, within 7 days thereof or, if the Certificate has been lost or destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION

Account No: 2388DDA

Insurance Plan:	Comprehensive Approved Workshop Plan		
Limit for total loss or theft:	Prevailing Market Value		
Policy Excess:	Own Damage Claims	SGD 600.00	(Original Excess : SGD 600.00)
	Additional Excess for Unnamed Driver(s)	SGD 500.00	
	Additional Excess for Young or Inexperience Driver(s)	SGD 3,500.00	
	WindScreen Excess	SGD 100.00	
Financial Interest:	EFIZZIG CREDIT PTE LTD		

TOKIO MARINE INSURANCE SINGAPORE LTD.

LQ SERVICES PTE LTD

160B BENCOOLEN STREET
#08-04 THE BENCOOLEN
SINGAPORE 189648
TEL: 6-333-4116 FAX: 6-333-4108
Co. Reg. No: 201227819H

Authorised Signature

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 374E

Vehicle Details

Vehicle No.: SJL6262P
Vehicle to be Exported: No
Intended Deregistration Date: 31 Jul 2019
Vehicle Make: HONDA
Vehicle Model: FREED 1.5G A
Primary Colour: Red
Manufacturing Year: 2008
Engine No.: L15A2327001
Chassis No.: GB31026670
Maximum Power Output: 87.0 kW (116 bhp)
Open Market Value: \$18,168.00
Original Registration Date: 04 Dec 2008
First Registration Date: 04 Dec 2008
Transfer Count: 3
Actual ARF Paid: \$8,918.00

Intended PARF Rebate Details

PARF Eligibility: Forfeited
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 03 Dec 2028
COE Category: A - Car (1600cc & below)
COE Period(Years): 10
PQP Paid: \$27,571.00
COE Rebate Amount: \$25,755.00
Total Rebate Amount: \$25,755.00

The information contained herein is correct as at 22 Jul 2019

OK