> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	013G
Vehicle No.:	SKK415Z
Vehicle to be Exported:	No
Intended Deregistration Date:	17 Mar 2020
Vehicle Make:	B.M.W.
Vehicle Model:	528I AT DSC HID NAV
Primary Colour:	White
Manufacturing Year:	2014
Engine No.:	A2330882N20B20A
Chassis No.:	WBA5A520X0D823554
Maximum Power Output:	180.0 kW (241 bhp)
Open Market Value:	\$40,310.00
Original Registration Date:	27 May 2015
First Registration Date:	27 May 2015
Transfer Count:	1
Actual ARF Paid: Intended PARF Rebate Details	\$43,434.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	26 May 2025
PARF Rebate Amount: Intended COE Rebate Details	\$32,575.00
COE Expiry Date:	26 May 2025
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$75,002.00
COE Rebate Amount:	\$38,932.00
Total Rebate Amount:	\$71,507.00

The information contained herein is correct as at 17 Mar 2020

OK

MAI220027041 / Auto Insure Pte Ltd - Toh Guan ENTRY DATE & TIME: 02/03/2020 12:29 SUBMITTED BY; Lye Mun Onn

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 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.
- 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	02/03/2020 12:29
Date Of Accident	29/02/2020 12:05
Exact Location Of Accident	ALONG PIE TOWARDS JURONG BEFORE EXIT 12
Country/State of Loss	SINGAPORE
C	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKK415Z
Insured/Policyholder	
Name Of Registered Owner	CHUA ZHIQIANG, ALVIN (CAI ZHIQIANG)
NRIC No	SXXXX013G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91507998
Alternative Phone No	OFFICE-91507998
Vehicle Particulars	
Manufacturer	BMW
Model	528I AT DSC HID NAV
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 CAR
Insurance Company	
Name of Insurance Company	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00392199/02
Cover Note Number	
Driver	
Name of Driver	CHUA ZHIQIANG, ALVIN (CAI ZHIQIANG)
NRIC No	SXXXX013G

 NRIC No
 SXXXX013G

 Date Of Birth
 24/08/1985

 Occupation
 INDOOR

 Date Of Driving Pass
 28/09/2004

Driving Experience 15 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91507998

Contact Number

Fax Number

EMail Address NOEMAIL

Address

APT 21 PASIR RIS RISE #06-44

Postcode

518090

NO Was driver an employee of the Insured's Company

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

COLLISION - HEAD TO REAR

Weather Conditions

CLEAR

Road Surface

DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

NO 2

involved in the accident

NO

Was any body injured in the Accident?

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)

5

Passenger 1

NAME:

: UNKNOWN

GENDER:

: FEMALE

Passenger 2

NAME:

: UNKNOWN

GENDER:

: FEMALE

Passenger 3

NAME:

: UNKNOWN

GENDER:

: FEMALE

Passenger 4

NAME:

: UNKNOWN

GENDER:

: MALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes.Please state which Police Station

10 UBI AVENUE 3

Police Station Name

Police Station Address

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO POLICE REPORT NO: T/20200229/7020

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

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SGT3857L

PRIVATE CAR

RHYME BIN ABDUL HALIM

88087549

Accident Sketch Plan

SKETCH PLAN		
A- SVY AIT	7	
A= SKK 415 B= SGT385		
B=56738	SAL I	FALA
	1	1-/-
File + 1-1		BIB
DESCRIBE CIRCUMSTANCES OF TH		0.1-
Pls refer to Police	e Report No: T/20208	1227/7020
DECLARATION 1/We declare the foregoing particulars a	re true in every respect.	А
M.	The state of the s	(/, ,
X /F		Y
Policyholder's Signature Date & Time: 2/3/29 11 57-64-	Driver's Signature (If driver is not the policyholder)	Reporting Center Personnel's Signature Name:
	Date & Time:	NRIC/FIN 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.
- 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 copies 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 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:
 - 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:
 - 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: 2/1/20

11:56 agu

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

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.

Appropriate Communication

Accident Sketch Plan





1 of 4

Report No. T/20200229/7020

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/02/2020 16:53		fade:	Vide Report No.:	Station Diary No.:	
Informa	nt's Particu	ılars	建设建设建设设施的建设设施		
Name of Informant: CHUA ZHIQIANG, ALVIN			Address: 21 PASIR RIS RISE #06-44 SINGAPORE 518090		
ID Type / ID No.: NRIC NO / S8524013G		13G	Contact No.: Home/Office: Mobile: 91507998		
Nationality: SINGAPORE CITIZEN		EN	Email: alvinchuazq@gmail.com		
Sex: Age: Date of Birth: Male 34 24/08/1985			Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: Product Marketing Professional		Professional	Driving Licence Information: Class:	Date of Expiry:	

General Inform	mation of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 29/02/2020, 12:05	Type of Location Straight Road	
Location:					
PAN ISLAND	EXPRESSWAY				
Weather: Sunny		Road Surface: Dry		Road Speed Limit: 90 Km/h	
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SGT3857L	Car	AUDI	A6 2.0T	White		1
SKK415Z	Car	BMW	528I AT DSC HID NAV	White		0

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
SKK415Z	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MT/00392199	02/06/2017	01/06/2020	