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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	832R
Vehicle Details	
Vehicle No.:	SME9896S
Vehicle to be Exported:	No
Intended Deregistration Date:	06 Apr 2020
Vehicle Make:	TOYOTA
Vehicle Model:	RAV4 2.4X A
Primary Colour:	Silver
Manufacturing Year:	2008
Engine No.:	2AZH119336
Chassis No.:	ACA365020250
Maximum Power Output:	125.0 kW (167 bhp)
Open Market Value:	\$19,797.00
Original Registration Date:	23 Jul 2008
First Registration Date:	23 Jul 2008
Transfer Count:	3
Actual ARF Paid:	\$13,593.00
Intended PARF Rebate Details	
PARF Eligibility:	Forfeited
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	31 May 2023
COE Category:	B - Car (1601cc & above)
COE Period(Years):	5
PQP Paid:	\$19,356.00
COE Rebate Amount:	\$12,196.00
Total Rebate Amount:	\$12,196.00
Message	
Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 06 Apr 2020

OK



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3 vehicles

Toyota Rav4

Advanced Search

	Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	Toyota Rav4		Any	Any	> 10 year(s) old	Any	Any	Any	Availabl
	Toyota Rav4 2.4A (COE till 02/2029)		\$50,000	\$5,620 /yr	25-Feb-2009	2,362 cc	-	SUV	Availabl
01 Transfer. 25 Feb 2009 Car. COE Till 24 Feb 2029. Direct Owner Sale, Feel Free To Contact For Viewing.									
Posted: 03-Apr-2020 Tags: 2009 Toyota Rav4, Toyota Rav4, Toyota, Rav4									
	Toyota Rav4 2.4A (COE till 08/2029)		\$66,800	\$7,130 /yr	17-Aug-2009	2,362 cc	138,800 km	SUV	Availabl
100% Loan Available. Bank And In House Loan Available! Accident Free, Low Mileage, Sunroof! Good For Family Usage. A Well Maintained SUV! Engine And Gearbox In Excellent Conditions! No Gimmicks! Trade In Welcome! Don't Miss It, View To Believe! Call Us Now To Arra...									
ABWIN (1994) Pte Ltd									
Posted: 26-Mar-2020 Tags: 2009 Toyota Rav4, Toyota Rav4, Toyota, Rav4									
	Toyota Rav4 2.4A X (COE till 07/2028)		\$51,888	\$6,250 /yr	25-Jul-2008	2,362 cc	160,000 km	SUV	Availabl
Low Maintenance Cost, Accident Free, Well Maintained SUV. Don't Miss It.									
Posted: 19-Mar-2020 Tags: 2008 Toyota Rav4, Toyota Rav4, Toyota, Rav4									

Save this search criteria, to get email alerts whenever a match is found.

Make Model Price Depreciation Reg Date Eng Cap Mileage Veh Type Status

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20 results/pag

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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	03/04/2020 22:37
Date Of Accident	02/04/2020 07:45
Exact Location Of Accident	CHUAN DRIVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME9896S
Insured/Policyholder	
Name Of Registered Owner	SAFEERA CATERING PTE LTD
Co Reg No	2XXXXX832R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-66033620

Vehicle Particulars

Manufacturer	TOYOTA
Model	RAV4 2.4X 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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00746416
Cover Note Number	NA

Driver

Name of Driver	ANWER AMBIYA BIN KADIR MAIDEN
NRIC No	SXXXX195Z
Date Of Birth	06/09/1969
Occupation	INDOOR
Date Of Driving Pass	22/05/2012
Driving Experience	7 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84989346
Fax Number	
Contact Number	OTHERS-84989346
Email Address	SINGAPORESAFEERA@GMAIL.COM

Address	NA
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	YES
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?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	ANG MO KIO DIVISION HQ
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

I WAS DRIVING ALONG CHUAN DRIVE TOWARDS CHUAN LINK WHEN SUDDENLY VEHICLE B, FAILED TO STOP AT THE STOP LINE, TURNED OUT FROM A SMALL ROAD ON CHUAN DRIVE AND COLLIDED INTO THE RIGHT HAND PORTION OF MY VEHICLE. AFTER THE ACCIDENT I ALIGHTED TO SEE THAT MY RIGHT HAND PORTION DAMAGED BY VEHICLE B FRONT PORTION. I FELT THE DISCOMFORT AND PAIN FROM THE ACCIDENT AND SEEK MEDICAL ATTENTION. I WAS GIVEN 04 DAYS MC. MY VEHICLE RIGHT HAND PORTION WAS DAMAGED BY VEHICLE B FRONT PORTION. HENCE, I WAS INVOLVED IN AN ACCIDENT OF 2 VEHICLES.

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	PC3934E
Vehicle Make/Model/Colour	TOYOTA / HIACE COMMUTER GL 3.0 AT 2WD 4DR LWB
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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	ANWER AMBIYA BIN KADIR MAIDEN
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SME9896S
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

SKETCH PLAN

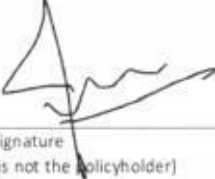
IMPORTANT NOTICE

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.

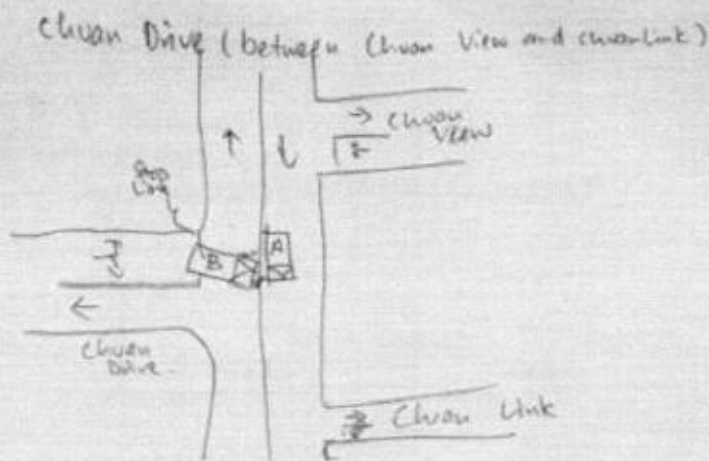

 Policyholder's Signature
 Date & Time:


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

**VERIFY BY AJAX MARS (ARC)
 REPORTING OFFICER
 MOHAMED SHARIL BIN SATAR**

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

Sketch Plan #2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Chuan Drive toward Chuan Link along the main road when suddenly a vehicle suddenly move out from side road and collided into the right hand portion of my vehicle. After the accident, I alighted to see that vehicle B failed to stop at the stop line and move onto the main road thereby colliding onto my vehicle right hand portion. I experience pain and discomfort from the impact of the accident, hence I was involved in an accident of 2 vehicles.

Veh A: SME 9896S.

Veh B: PC 3934E.

DECLARATION

I hereby 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:

VERIFIED BY
MARS OFFICER
SHARIL SATAR

Reporting Centre Personnel's Signature
Name
APR 2014 1501



**SINGAPORE
POLICE FORCE**



F/20200402/7038

1 of 2

POLICE REPORT (NP299)

Report No. F/20200402/7038

Police Station Of Origin
Ang Mo Kio Division HQ
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-2180000

Date/Time Report Made 02/04/2020 15:02	Vide Report No.	Station Diary No.	
Name Of Informant ANWER AMBIYA BIN KADIR MAIDEEN	Address APT BLK 107 BUKIT PURMEI ROAD #07-33 SINGAPORE 090107		
ID Type / ID No. NRIC NO / S6932195Z	Contact No. Home/Office:	Mobile: 84989346	
Nationality SINGAPORE CITIZEN	Email Address singaporeSAFEera@gmail.com		
Occupation SELF EMPLOYED	Sex Male	Age 50	Date of Birth 06/09/1969
Institution/School Name	Race Indian		
Date/Time Of Incident 02/04/2020 07:45 - 02/04/2020 07:45	Location Of Incident CHUAN DRIVE		

Brief details.

I WAS DRIVING ALONG CHUAN DRIVE TOWARDS CHUAN LINK WHEN SUDDENLY VEHICLE B. FAILED TO STOP AT THE STOP LINE. TURNED OUT FROM A SMALL ROAD ON CHUAN DRIVE AND COLLIDED INTO THE RIGHT HAND PORTION OF MY VEHICLE. AFTER THE ACCIDENT I ALIGHTED TO SEE THAT MY RIGHT HAND PORTION DAMAGED BY VEHICLE B FRONT PORTION. I FELT DISCOMFORT AND PAIN FROM THE ACCIDENT AND SEEK MEDICAL ATTENTION. I WAS GIVEN 04 DAYS MC. MY VEHICLE RIGHT HAND PORTION WAS DAMAGED BY VEHICLE B FRONT PORTION. HENCE I WAS INVOLVED IN AN ACCIDENT OF 2 VEHICLES.

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:
02/04/2020 15:02

Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



F/20200402/7038

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No: F/20200402/7038

VEH A (MY VEHICLE) : SME 9896 S

VEH B : PC 3934 E

Subject Involved			
Victim			
Person Name	ANWER AMBIYA BIN KADIR MAIDEEN		
ID Type	NRIC NO	ID No	S6932195Z
Gender	Male	Age	50
Race	Indian	Language	English
Occupation	SELF EMPLOYED		Address Type
Address	APT BLK 107 BUKIT PURMEI ROAD #07-33 SINGAPORE 090107		Mobile No 84989346
Is Informant A Victim?	Yes		
Person Name	ANWER AMBIYA BIN KADIR MAIDEEN (Informant)		

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:

02/04/2020 15:02

Classification Of Case:

Authentication Stamp