

# 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 : 02.09.2020

China Taiping Insurance Singapore Pte Ltd

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909

Attn: Motor Claim Department

Dear Sir/Madam,

## **ACCIDENT INVOLVING VEHICLES : PA 9704Z / PD 108M ON 07.08.2020**

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We are the authorized repair workshop for the owner of motor vehicle no: **PA 9704Z**, which was involved in the captioned accident with your insured vehicle no: **PD 108M**. 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)	\$	26,750.00
2) Loss of Use (13 days + 2 Holiday + 2 Sunday X \$ 500)	\$	8,500.00
3) Towing Fee	\$	400.00
4) GIA Search Fee	\$	2.00
	<u>\$</u>	<u>35,652.00</u>

We enclosed herewith the following documents to support the claims:

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

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 (jason@fastechnauto.com.sg)

For Fastechn 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**

China Taiping Insurance Singapore Pte Ltd

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909

Attn : Motor Claim Department

Tax Invoice : 21924

Date : 02.09.2020

Vehicle No : PA 9704Z

Make/Model : KING LONG XMQ6117K

Chassis/Eng# :

Accident Date : 07.08.2020

Claim No :

Reference : 0820 -21924

Policy No :

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		Amount
To proceed on lump sum repair	S\$	25000.00

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E. & O. E.

Total : S\$ 25000.00

GST @ 7% : S\$ 1750.00

*Amount Due* : **S\$ 26750.00**

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for FASTECH AUTO PTE LTD



# Singapore Towing Pte Ltd

22 Sin Ming Lane #06-76, Mid View City Singapore 573969

Tel: 98302645 / 85717384

Email: singaporetowing.sales@gmail.com

Website: www.singaporetowing.com

UEN: 201721244E

DELIVERY ORDER



/ CASH SALES

No : 60852

Date: 7/8/20

M/s: Fastech Auto Pte Ltd

bizSAFE<sub>4</sub>

Towing Of : 45 Seater Bus		QTY	\$	Cts.
Vehicle No. : PA 9704Z		<input checked="" type="checkbox"/> REMOVE SHAFT	x 2	\$150.00
Location From: ECP MCE before bedok		<input checked="" type="checkbox"/> RELEASE BRAKE	brake	\$50.00
To Destination: kaki Bukit Vicom		<input type="checkbox"/> CHAIN UP	shaft	\$50.00
TIME ARRIVAL ON LOCATION : AM/PM		<input type="checkbox"/> FULL LOADED		
TIME DEPART ON LOCATION : AM/PM		<input type="checkbox"/> CRANE UP		
TIME ARRIVE ON DESTINATION : AM/PM		<input type="checkbox"/> NIGHT CHARGES (7PM TO 7AM)		
REMARKS : tow to vicom Report then tow to KB workshop		<input type="checkbox"/> SUNDAY / PUBLIC HOLIDAY		
Recipient's Name		<input type="checkbox"/> OTHERS	TOTAL	\$400.00
	GOODS / SERVICES RECEIVED IN GOOD ORDER	Tow Truck No. XD9559R		
Mobile No.		Tow Driver's Name Wilson		
Signature & Stamp		Note: Vehicle towed at owner's risk. The company accepts no responsibility for damages or other misdemeanor to your vehicle while being towed.		

**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-20-091853

Date of Request: 07/08/2020

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 07/08/2020  
Enquiry By Tang Kok Wee, Allan  
Vehicle No. PD108M  
Accident Date 07/08/2020

**Enquiry Result**

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
PD108M	China Taiping Insurance (Singapore) Pte. Ltd.	13/09/2019-12/09/2020	6389 6111

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.

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**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

**TAX INVOICE**

Our Ref No: GR-20-091853  
Date of Request: 07/08/2020

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 07/08/2020  
Enquiry By Tang Kok Wee, Allan  
Vehicle No. PD108M  
Accident Date 07/08/2020

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



DATE : 07.08.2020

TO : China Taiping Insurance (Singapore) Pte.Ltd.

RE : ACCIDENT INVOLVING VEHICLE NO. PA 9704Z / PD 108 M

ALONG ECP Twrds City (lamp Post No. 346F)

ON 07.08.2020

☐ I/We, KS Transport Service  
of (NRIC No./ROC No.) 53091276K  
of Blk 234A Sumang Lane #10-285 Singapore 821234.  
owner of vehicle no. PA 9704Z in consideration of M/s FASTECH AUTO  
PTE LTD repairing my/our vehicle PA 9704Z at my/our instruction and hereby  
authorise M/s FASTECH AUTO PTE LTD to demand claim settlement whatever  
amount settled/payable by the Insurance Company and/or third party or to commence legal  
proceedings, if necessary, under my name, for the cost of repairs, car rental and/or loss of use,  
etc. and to their appointing solicitor to act for me/us in respect of the said accident/claim and  
all claimed and/or settled shall belong to them absolutely.

☐ I/We further agree and undertake to indemnify them against the above-mentioned claim cost  
which may arisen therewith.

Signature of Owner :



**KS TRANSPORT SERVICE**  
Blk 234A Sumang Lane #10-285  
Singapore 821234  
HP: 9616 1733

Name of Owner :

\_\_\_\_\_

## 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	07/08/2020 15:02
Date Of Accident	07/08/2020 09:00
Exact Location Of Accident	ECP TWRDS CITY(LAMP POST NO.346F)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	PA9704Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KS TRANSPORT SERVICE
Co Reg No	5XXXX276K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-90152878

### Vehicle Particulars

Manufacturer	KING LONG
Model	KING LONG / XMQ6117K

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 BUS

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5113086771
Cover Note Number	

### Driver

Name of Driver	CHEN XIFENG
Passport No/FIN	GXXXX312X
Date Of Birth	11/04/1966
Occupation	OUTDOOR
Date Of Driving Pass	19/02/2009
Driving Experience	11 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90152878
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 234A SUMANG LANE #10-285
Postcode	821234
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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?	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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER ATTACHED;

#### 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	PD108M
Vehicle Make/Model/Colour	TOYOTA / HIACE COMMUTER GL 2.8 AUTO
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	CHEN XIFENG
------	-------------



Approximate Age

Injuries Sustain

Injured person in which vehicle?

PA9704Z

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

Address

BLK 234A SUMANG LANE #10-285

Postcode

821234

## 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.
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.

**KS TRANSPORT SERVICE**  
Bik 234A Sumang Lane #10-285  
Singapore 821234  
HP: 9618-1733

Policyholder's Signature  
Date & Time:

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

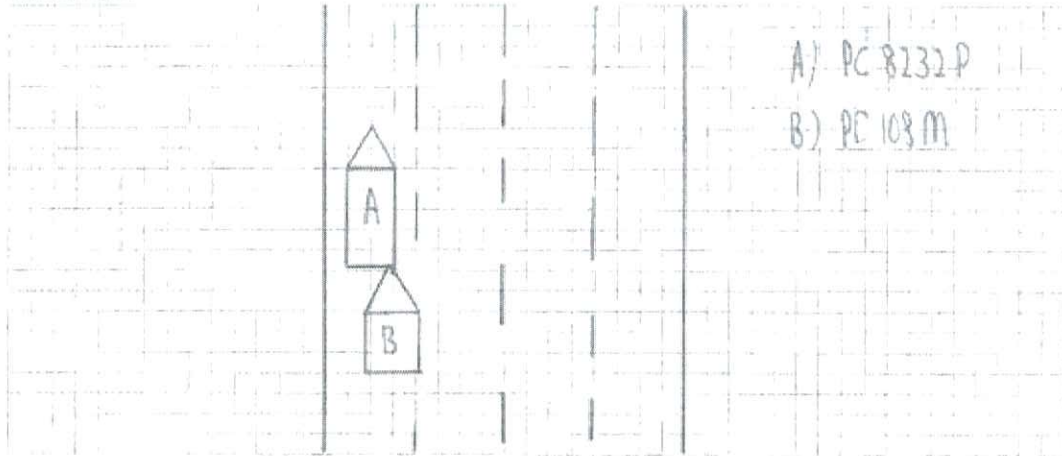
**IDAC KAKI BUKIT (VAC)**  
23 Kaki Bukit Ave 4 #02-02  
Singapore 415933  
Tel: 67416697 Fax: 67492305  
Email: vackb@vicom.com.sg

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

- 7 AUG 2020

# Accident Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

In 07.08.2020 at about 9am, I was travelling along ECP Towards  
 City (Lamp Post No : 346F), I was travelling straight. Suddenly  
 I felt an impact from my rear.

## DECLARATION

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

**KS TRANSPORT SERVICE**

Bik 234A Sumang Lane #10-285

Singapore 821234

HP: 9818 1733

chen xi Feng

Driver's Signature

(If driver is not the policyholder)

Date & Time:

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4 #02-02

Singapore 415933

Tel: 67416697 Fax: 67492305

Email: vackb@vicom.com.sg

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

- 7 AUG 2020





Police Station Of Origin:  
Mountbatten NPP  
60 Dakota Crescent #01-213 SINGAPORE  
390060  
Tel No: 1800-3449999

Report No. T/20200808/2036

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 08/08/2020 12:09		Vide Report No.: G/20200807/0060		Station Diary No.: 9	
<b>Informant's Particulars</b>					
Name of Informant: CHEN XIFENG			Address: APT BLK 1 LORONG 19 GEYLANG #03-02 THE PRIMERO SINGAPORE 388487		
ID Type / ID No.: FIN NO / G6184312X			Contact No.: Home/Office: Mobile: 90152878		
Nationality: CHINESE			Email:		
Sex: Male	Age: 54	Date of Birth: 11/04/1966	Type of Informant: Driver		
Race: Chinese		Language: Chinese		Institution / School Name:	
Occupation: Bus driver		Driving Licence Information: Class: 3,4 Date of Expiry:			

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 07/08/2020 09:15	Type of Location: Bend
Location: Along Road 1 EAST COAST EXPRESSWAY  toward city before bayshore exit Lamp Post Number: 346F				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PA9704Z	Bus/Coach/Mi nibus				Seriously Damaged	0
PD108M	Van					0

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





**SINGAPORE  
POLICE FORCE**



T/20200808/2036

Police Station Of Origin:  
Mountbatten NPP  
60 Dakota Crescent #01-213 SINGAPORE  
390060  
Tel No: 1800-3449999

2 of 3

Report No. T/20200808/2036

**CONTINUATION OF REPORT**

<b>Driver</b>			
Name	CHEN XIFENG	ID No.	G6184312X
Related Vehicle	PA9704Z (Bus/Coach/Minibus)	Contact No.	90152878
Hospital/Clinic	CASSIA CLINIC & SURGERY	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	07/08/2020	Date Discharge	07/08/2020
No. of Days granted Medical Leave	04	Degree of Injury	Slight

**Brief Details.**

On 07/08/2020 at about 0915hrs, I was driving my company bus, PA9704Z along ECP toward city before Bayshore Exit near LP346F. I was driving on the extreme left of the 4 lane road. I was driving at about 50km/h and the road traffic was light. Suddenly, I felt an impact coming from the rear right. I managed to stop the bus and get out of the bus. I spotted a white van, PD108M had collided onto the rear right portion of my bus. Due to the impact, the rear right portion of the bus was badly damaged. Police and ambulance were at scene. The van driver was not injured and was arrested by the police. There were about 4 female passenger in the van and three of them were injured. I am unsure how many of the passenger were conveyed by the ambulance. After the accident, I felt pain on my shin and back and went to Cassia Clinic & Surgery for a check. I was given 4 days of medical leave from 07/08/2020 - 10/08/2020.



SINGAPORE  
POLICE FORCE



T/20200808/2036

Police Station Of Origin:  
Mountbatten NPP  
60 Dakota Crescent #01-213 SINGAPORE  
390060  
Tel No: 1800-3449999

3 of 3

Report No. T/20200808/2036

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:  
G /  
Sgt 2 ANG KAH LUN

Signature Of Interpreter:  
Not applicable

Signature Of Informant:

chen xi feng

Date/Time:  
08/08/2020 12:09

Officer In Charge Of Case:  
TP / GIT /

Sr Staff Sgt MOHAMMED FEROUZ BIN HUSSEIN  
Contact No.: 65476206

Classification Of Case:

Authentication Stamp  
NP168



**S PASS**  
Employment of Foreign Manpower Act (Chapter 91A)  
Republic of Singapore

Employer  
KS TRANSPORT SERVICE

Name  
CHEN XIFENG

S Pass No.  
0 72838793

Sector  
SERVICE

For Insurance Reporting And  
Claim Purposes Only

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number  
G6184312X

Name  
CHEN XIFENG

Birth Date: 11 Apr 1966  
Issue Date: 29 Oct 2018  
Valid Till 30/11/2023

002862951C

chen xifeng

**VISIT PASS**  
Immigration Regulations

08-02-2019

Name  
CHEN XIFENG

FIN  
G6184312X

Date of Birth  
11-04-1966

Sex  
M

Nationality  
CHINESE

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED  
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.

Download SGWorkPass  
App to check status

For Insurance Reporting And  
Claim Purposes Only

**UNLICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)**

EFFECTIVE DATE

Class 3	Motor cars with unladen weight $\leq 3000\text{kg}$ with $\leq 7$ passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$	01 Dec 2008
Class 4	Motor vehicles which are constructed to carry load or passengers and the unladen weight $> 2500\text{kg}$ Motor vehicles which are not constructed to carry load or passengers and the unladen weight $\leq 7250\text{kg}$	19 Feb 2009

NP 428A

Licence No: G6184312X



**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** : 5113086771-000002

**Cover** : Comprehensive

- |   |   |                      |
|---|---|----------------------|
| 1. Index mark and Registration Number of Vehicle  | : | <b>PA9704Z</b>       |
| Chassis Number  | : | LA6R1FSH39B102796    |
| 2. Name of Policyholder   | : | KS TRANSPORT SERVICE |
| 3. Effective Date of Insurance  | : | 27 Oct 2019          |
| 4. Expiry Date of Insurance   | : | 26 Oct 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 the carriage of passengers in connection with the Policyholder's business.  |   |                      |
| (b) Limited to carry 45 passengers  |   |                      |

**This Policy does not cover**

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use whilst drawing a trailer except the towing (Other than for reward) of any one disabled mechanically propelled vehicle.

\* 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.

GEOGRAPHICAL LIMIT	: WITHIN THE REPUBLIC OF SINGAPORE ONLY
EXCESS (SECTION I)	: S\$3,000
EXCESS (SECTION II)	: S\$1,500
WINDSCREEN EXCESS	: S\$500
INSURE WITH COE	: YES
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 : THINK ONE AUTOMOBILE & TRADING PTE LTD (00000571089)  
Date of Issue : 03 Oct 2019 09:48 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:	Business
Owner ID:	276K

### Vehicle Details

Vehicle No.:	PA9704Z
Vehicle to be Exported:	No
Intended Deregistration Date:	07 Aug 2020
Vehicle Make:	KING LONG
Vehicle Model:	XMQ6117K
Primary Colour:	Multicolor
Manufacturing Year:	2009
Engine No.:	ISBE428521843367
Chassis No.:	LA6R1FSH39B102796
Maximum Power Output:	-
Open Market Value:	\$114,478.00
Original Registration Date:	12 May 2010
First Registration Date:	12 May 2010
Transfer Count:	0
Actual ARF Paid:	\$5,724.00

### Intended PARF Rebate Details

PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00

### Intended COE Rebate Details

COE Expiry Date:	11 May 2025
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$12,136.00
COE Rebate Amount:	\$11,555.00
<b>Total Rebate Amount:</b>	<b>\$11,555.00</b>

### Message

Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.

The information contained herein is correct as at 07 Aug 2020

OK