



## 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	16/11/2020 19:12
Date Of Accident	13/11/2020 18:40
Exact Location Of Accident	BEDOK SOUTH AVENUE 2
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLZ6182P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MAJULAH CAR LEASING PTE LTD
Co Reg No	2XXXXX815C
Email Address	NASHARUDINMUIN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81802166
Alternative Phone No	OFFICE-81802166

### Vehicle Particulars

Manufacturer	TOYOTA
Model	VOXY HYBRID-1.8 (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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999993824
Cover Note Number	

### Driver

Name of Driver	NASHARUDIN BIN MUIN
NRIC No	SXXXX653I
Date Of Birth	27/04/1985
Occupation	INDOOR
Date Of Driving Pass	17/05/2016
Driving Experience	4 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81802166
Fax Number	
Contact Number	OTHERS_81802166

Address	BLK 414 FERNVALE LINK #10-10
Postcode	792414
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)	2
Passenger 1	NAME: : ROS FAIRUZANA BINTE ROSZALI GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	EUNOS NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 629 BEDOK RESERVOIR ROAD #01-1620 , POSTCODE: 470629 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4439999 - FAX NO: 62444376
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20201113/2111 AND T/20201116/7038

#### 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	FBE1488U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF INJURED PERSON 1

Name NASHARUDIN BIN MUIN

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? SLZ6182P

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

#### DETAILS OF INJURED PERSON 2

Name ROS FAIRUZANA BINTE ROSZALI

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? SLZ6182P

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:

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



Badok South  
Apr 2

(B) FBE 1488U



Refer to Police Report No. T/2020/113/211

7/2020 1116	7038
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I \_\_\_\_\_ is the \_\_\_\_\_ of  
company \_\_\_\_\_ and I'm using the vehicle  
for work/private purpose.

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



Date & Time:

(If driver is not the policyholder)

Date &amp; Time:

Name:

NRIC/FIN No.:

**SINGAPORE ACCIDENT STATEMENT**

TYPE OF CLAIMS : OWN DAMAGE ( ) 3rd PARTY ( ) REPORTING ONLY ( )

DATE OF ACCIDENT : 13/11/2020 TIME : 18:40hrs

LOCATION : Beek South Ave 2

VEHICLE NUMBER : SLZ 6182P MAKE / MODEL Toyota Vaux Hybrid 1.825 AT

OWNER INSURED : Maplah Car Leasing Pte Ltd

NRIC NO. : 201209815C CONTACT NUMBER: \_\_\_\_\_

INSURANCE COMP: AIG POLICY NUMBER: 999993824

TYPE OF INSURANCE: COMPREHENSIVE (✓) TPFT ( ) 3RD PARTY ONLY ( )

**DRIVER PARTICULAR**

**DRIVER SAME AS OWNER:** ( )

DRIVER NAME : Nasharudin Bin Muin NRIC NO.: 880126531

ADDRESS: 4140 Fernvale Link #10-10 POSTAL: 792414

CONTACT: 8180 2166 EMAIL: nasharudinmuin@gmail.com GENDER: Male

DOB: 27.04.1985 DATE OF PASS: 17.05.2016

**(PLEASE TICK AND FILL THE RELEVANT CHOICES)**

WAS DRIVER AND EMPLOYEE OF THE INSURED'S COMPANY ( ) YES ( ) NO

IF NO, RELATION OF DRIVER WITH INSURED:

( ) OWNER ( ) SPOUSE ( ) FRIEND ( ) RELATIVE ( ) CHILDREN ( ) SIBLING ( ) OTHERS

WEATHER CONDITION: ( ) CLEAR ( ) RAINING ( ) DRIZZLING

ROAD SURFACE: ( ) DRY ( ) WET ( ) SLIPPERY

WAS ANYBODY INJURED: (✓) YES ( ) NO INJURIES SUSTAINED : \_\_\_\_\_

WAS ACCIDENT REPORTED TO POLICE: IF YES, WHICH STATION: \_\_\_\_\_

(✓) YES ( ) NO POLICE REPORT NUMBER: \_\_\_\_\_

ANY VIDEO CAPTURED: ( ) YES ( ) NO CONVEY BY AMBULANCE ( ) YES ( ) NO

NUMBER OF PASSENGER INCLUDE DRIVER: 2 Pax

PARTICULAR OF PASSENGER : Rosfairuzana ( ) MALE (✓) FEMALE

( ) MALE ( ) FEMALE

( ) MALE ( ) FEMALE

( ) MALE ( ) FEMALE

**(THIRD PARTY PARTICULAR)**

VEHICLE B FDE 1488U NAME /NRIC: \_\_\_\_\_ CONTACT: \_\_\_\_\_

VEHICLE C NAME /NRIC: \_\_\_\_\_ CONTACT: \_\_\_\_\_

VEHICLE D NAME /NRIC: \_\_\_\_\_ CONTACT: \_\_\_\_\_

VEHICLE E NAME /NRIC: \_\_\_\_\_ CONTACT: \_\_\_\_\_

VEHICLE F NAME /NRIC: \_\_\_\_\_ CONTACT: \_\_\_\_\_

VEHICLE G NAME /NRIC: \_\_\_\_\_ CONTACT: \_\_\_\_\_

**WITNESS (IF ANY)**

NAME: \_\_\_\_\_ HP NO. : \_\_\_\_\_ NRIC: \_\_\_\_\_

\* TO PROVIDE ATTACH NRIC, WITNESS STATEMENT BY POLICE REPORT\*



**SINGAPORE  
POLICE FORCE**



T/20201113/2111

1 of 3

Police Station Of Origin:  
Eunos NPP  
629 Bedok Reservoir Road #01-1620  
SINGAPORE 470629  
Tel No: 1800-4439999

Report No. T/20201113/2111

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 13/11/2020 20:13		Vide Report No.: G/20201113/0145		Station Diary No.: 35	
<b>Informant's Particulars</b>					
Name of Informant: NASHARUDIN BIN MUIN			Address: APT BLK 414B FERNVALE LINK #10-10 SINGAPORE 792414		
ID Type / ID No.: NRIC NO / S8512653I			Contact No.: Home/Office: Mobile: 81802166		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 35	Date of Birth: 27/04/1985	Type of Informant: Driver		
Race: Malay			Language:		Institution / School Name:
Occupation: PERSONAL DRIVER			Driving Licence Information: Class: 2B,3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 13/11/2020 18:40	Type of Location: Straight Road
Location:  BEDOK SOUTH AVENUE 2				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 40 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
FBE1488U	Motorcycle	HONDA			Slightly Damaged	0
SLZ6182P	Car	TOYOTA		Black	Slightly Damaged	2

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





**SINGAPORE  
POLICE FORCE**



T/20201113/2111

2 of 3

Police Station Of Origin:

Eunos NPP

629 Bedok Reservoir Road #01-1620

SINGAPORE 470629

Tel No: 1800-4439999

Report No. T/20201113/2111

**CONTINUATION OF REPORT**

<b>Driver</b>			
Name	NASHARUDIN BIN MUIN	ID No.	S8512653I
Related Vehicle	NIL	Contact No.	81802166
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 13/11/20 at about 1840hrs, I was driving my vehicle(SLZ6182P) along Bedok South Ave 2 and was trying to make a left turn into Block 12. Suddenly a motorbike(FBE1488U) from the left side of my car wanted to go straight came in. As it was very sudden, we collided onto each other. The rider fell down and was unconscious. One of the passerby then called for ambulance. While the passerby was calling ambulance, I was trying to wake the rider up. A while later, the ambulance arrived and followed by the traffic police. The paramedic attended to the rider and the rider was subsequently conveyed to by the ambulance. I gave my particulars to the traffic police, was issued with a case card and was advised to lodge a traffic accident report.



**SINGAPORE  
POLICE FORCE**



T/20201113/2111

3 of 3

Report No. T/20201113/2111

Police Station Of Origin:  
Eunos NPP  
629 Bedok Reservoir Road #01-1620  
SINGAPORE 470629  
Tel No: 1800-4439999

**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 /

Staff Sgt SOONG PEI XING

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sgt 3 MUHAMMAD ZICKIE BIN AHMAD  
SUYUTI

Contact No.: 65476356

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

13/11/2020 20:13

Classification Of Case:



# SINGAPORE POLICE FORCE



T/20201116/7038

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

1 of 3

Report No. T/20201116/7038

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 16/11/2020 17:21		Vide Report No.: T/20201113/2111		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: NASHARUDIN BIN MUIN			Address: 414B FERNVALE LINK #10-10 SINGAPORE 792414		
ID Type / ID No.: NRIC NO / S8512653I			Contact No.: Home/Office: Mobile: 81802166		
Nationality: SINGAPORE CITIZEN			Email: nasharudinmuin@gmail.com		
Sex: Male	Age: 35	Date of Birth: 27/04/1985	Type of Informant: Driver		
Race: Malay		Language: English		Institution / School Name:	
Occupation: DRIVER		Driving Licence Information: Class: Date of Expiry:			

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 13/11/2020 18:40	Type of Location: Straight Road
Location:  BEDOK SOUTH AVENUE 2				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBE1488U	Motorcycle					0
SLZ6182P	Car	TOYOTA	VOXY HYBRID 1.8ZS AT	Black		2

<b>Details of Vehicle Insurance</b>				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE  
POLICE FORCE**



T/20201116/7038

2 of 3

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

Report No. T/20201116/7038

**CONTINUATION OF REPORT**

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLZ6182P	AIG ASIA PACIFIC INSURANCE PTE. LTD.			

**Details of Person Involved**

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA

**Passenger**

Name	ROS FAIRUZANA BINTE ROSZALI	ID No.	S8704988D
Related Vehicle	SLZ6182P (Car)	Contact No.	91873158
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	02	Degree of	Slight

**Driver**

Name	NASHARUDIN BIN MUIN	ID No.	S8512653I
Related Vehicle	SLZ6182P (Car)	Contact No.	81802166
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	02	Degree of	Slight

**Brief Details.**

AS PER REPORT ON T/20201113/2111, I WOULD LIKE TO AMEND THE REPORT. THE NEXT DAY, BOTH MY WIFE & I ENCOUNTER PAIN. WE CONSULT DOCTOR AND WERE GIVEN 2 DAYS MC FOR BOTH.



**SINGAPORE  
POLICE FORCE**



T/20201116/7038

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

3 of 3

Report No. T/20201116/7038

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPIB /  
MUHAMMAD ZICKIE BIN AHMAD SUYUTI  
Contact No.: 65476356

Authentication Stamp  
NP168

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

Date/Time:  
16/11/2020 17:21

Classification Of Case:





HOTLINE TEL: (65) 6419-3000

**CERTIFICATE OF INSURANCE**

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1980

ROAD TRANSPORT ACT, 1987 (MALAYSIA) and Road Transport (Amendment) Act 2019

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

M.Z.400

(The below excess is subject to GST)			
COMPREHENSIVE	COMMERCIAL MOTOR	POLICY EXCESS	REFER TO ITEM 5
CERTIFICATE NO.	SLZ6182P	WINDSCREEN EXCESS	S\$100.00
POLICY NO.	999993824	SUM INSURED	MARKET VALUE
		INSURING WITH COE/PARF	YES
		SLZ6182P	
1) VEHICLE REGISTRATION NO.		MAJULAH CAR LEASING PTE LTD	
2) NAME OF INSURED			
3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT		15 May 2020	
4) DATE OF EXPIRY OF INSURANCE		14 May 2021	
5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE*			
Any person who is driving on the Insured's order or with their permission. S\$2,000.00 Section I & S\$2,000.00 Section II Excess is applicable for driver who is between 23 years to 65 years old with minimum 2 years driving experience. An additional section II excess of \$1,000.00 per accident is applicable in the event of an accident occurring outside Singapore. Accident repair has to be carried out at AIG appointed list of workshop.			
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) LIMITATION AS TO USE*			
1) Use for social, domestic, pleasure purposes and business purposes of Insured 2) Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired. 3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.			
The Policy does not cover: 1) Use for tuition, driving test, racing, pace-making, reliability trial or speed-testing. 2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. 3) Use for any purpose in connection with the Motor Trade.			
LOSS OF USE		Not Included	
HIRE PURCHASE COMPANY		INDEX CREDIT PTE LTD	

\*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

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) and Road Transport (Amendment) Act 2019.

Issued in Singapore 28 May 2020

AIG Asia Pacific Insurance Pte. Ltd.

504631-000  
B.A.S. Insurance Agency  
No 30 Kaki Bukit Road 3  
#05-06  
Singapore 417819

  
AUTHORISED REPRESENTATIVE

ORIGINAL

SSPOEC

> Back to OneMotoring

**Enquire PARF/COE Rebate for Registered Vehicle**

**Vehicle Owner Particulars**

Owner ID Type: Company  
Owner ID: 815C

**Vehicle Details**

Vehicle No.: SLZ6182P  
Vehicle to be Exported: No  
Intended Deregistration Date: 30 Nov 2020  
Vehicle Make: TOYOTA  
Vehicle Model: VOXY HYBRID 1.8ZS AT ABS D/AIRBAG  
2WD

Primary Colour: Black  
Manufacturing Year: 2017  
Engine No.: 2ZR0A29888  
Chassis No.: ZWR800284814  
Maximum Power Output: 100.0 kW (134 bhp)  
Open Market Value: \$32,872.00  
Original Registration Date: 11 May 2018  
First Registration Date: 11 May 2018  
Transfer Count: 0  
Actual ARF Paid: \$28,021.00

**Intended PARF Rebate Details**

PARF Eligibility: Yes  
PARF Eligibility Expiry Date: 10 May 2028  
PARF Rebate Amount: \$21,015.00

**Intended COE Rebate Details**

COE Expiry Date: 10 May 2028  
COE Category: B - Car above 1600cc or 97kW (130bhp)  
COE Period(Years): 10  
QP Paid: \$37,330.00  
COE Rebate Amount: \$27,786.00  
Total Rebate Amount: \$48,801.00

The information contained herein is correct as at 16 Nov 2020

OK