

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 : 08.01.2021

QBE Insurance Singapore Pte Ltd

1 Raffles Quay #29-10

South Tower

Singapore 048583

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES : SLK 160X / YL 8472J ON 19.12.2020

We are the authorized repair workshop for the owner of motor vehicle no: **SLK 160X**, which was involved in the captioned accident with your insured vehicle no: **YL 8472J**. The vehicle owner 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)	\$ 5,992.00
2) Loss of Rental (7 days X S\$180)	\$ 1,050.00
3) GIA Search Fee	\$ 2.00
	<u>\$ 7,044.00</u>

We enclosed herewith the following documents to support the claims:

- | | |
|----------------------------------|------------------------------------|
| a) Final Repair Invoice | b) Car Rental Invoice / Agreement |
| 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@fastechauto.com.sg)

For Fastech 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

QBE Insurance Singapore Pte Ltd

1 Raffles Quay #29-10

South Tower

Singapore 048583

Attn : Motor Claim Department

Tax Invoice : 22146

Date : 08.01.2021

Vehicle No : SLK 160X

Make/Model : MERCEDES C180K

Chassis/Eng# :

Accident Date : 19.12.2020

Claim No :

Reference : 1220 -22146

Policy No :

	Amount
To proceed on lump sum repair	S\$ 5600.00

E. & O. E.

Total : S\$ 5600.00

GST @ 7% : S\$ 392.00

Amount Due : S\$ 5992.00


for FASTECH AUTO PTE LTD

All Invoices are subjected to GST

DYNAMIC CAR RENTAL

1 Kaki Bukit Ave 6 #01-46 Autobay

Singapore 417883

Tel No: 6741 7244 / 6746 5405 Fax No: 6745 8520 / 6746 5786

Co. Reg No: 52928467K

To: STEPHANIE ANGEL LOW WAI LING

Invoice : DCR-2020-12-11

Date : 26.12.2020

Agreement No : 21556

Payment Terms: CASH

DESCRIPTION

AMOUNT

Rental charges for vehicle : SMM 3489G (1220-22146) \$ 1,050.00

Rental Period from 19.12.2020 to 26.12.2020 .

E. & O. E.

Total \$ 1,050.00

LINA PANG

for Dynamic Car Rental

Dynamic Car Rental

1 KAKI BUKIT AVENUE 6, #01-46/48/50 AUTOBAY, SINGAPORE 417883.

TEL: (+65) 6741 7244, 6746 5405 FAX: (+65) 6745 8520, 6746 5786

Co. Reg. No. 52928467K

RENTAL TERMS AND CONDITIONS

No. 21556

Name Stephanie Angel Low Wai Ling			REG. No. SMM 3489G		MAKE MODEL:									
ADDRESS					DIESEL		PETROL		E	1/4	1/2	3/4	F	
			KM IN		DATE & TIME IN 26.12.2020 @ 3.23pm									
			KM OUT		DATE & TIME OUT 19.12.2020 @ 11.20am									
			KM DRIVEN		TIME USED									
NAMED DRIVER														
DRIVING LICENCE NO S8324133J			DATE OF EXPIRY			PLACE OF ISSUE			HOURS		@SS			
PASSPORT NO			DATE OF ISSUE			PLACE OF ISSUE			7 DAYS		@SS 150.00		\$ 1050.00	
ADD NAMED DRIVER														
DRIVING LICENCE NO			DATE OF EXPIRY			PLACE OF ISSUE			WEEKS		@SS			
PASSPORT NO			DATE OF ISSUE			PLACE OF ISSUE			MONTHS		@SS			
BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR COLLISION DAMAGES WAIVER (C.D.W.)														
SUB-TOTAL														
TOTAL RENTAL \$ 1050.00														
DELIVERY FEE														
COLLECTION FEE														
X PER DAY \$ PER WEEK \$ PER MONTH \$														
BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR PERSONAL ACCIDENT INSURANCE (P.A.I.)														
X PER DAY \$ PER WEEK \$ PER MONTH \$														
PREPAYMENT							TOTAL CHARGE							
CHECK							DEPOSIT							
CASH														
RECEIPT NO.							NETT CHARGE							
AMOUNT DUE / REFUND														

IMPORTANT NOTES:

This vehicle is licenced to carry 04 passengers only.
 No refund will be given for vehicle returns early.
 No refund will be given for period left in vehicle.
 Hirer is liable to pay loss of earnings while damaged vehicle is under repair.
 Hirer is liable to pay all parking fee and traffic summonses.
 Vehicle return during office hour only.
 No service on Public Holiday and Sunday.
 Geographical areas: Singapore & West Malaysia.
 Driver must be:
 a) 18 years old and above.
 b) Holding a valid relevant class of driving license.
 The vehicle is strictly to be driven by the person to whom it is hired to and the additional driver named in the agreement.
 The hirer is not allowed to sub-let the vehicle to another party and subletting is not covered.

ADDITIONAL CONDITIONS:

COMPREHENSIVE COVERED EXCESS:

*Section I - Used in S'pore Only : SGD 2000.00
 *Section II - Used in S'pore Only : SGD 1500.00
 *W/screen Excess In S'pore : SGD 100.00
 *Section I - Used Outside S'pore : SGD 4000.00
 *Section II - Used Outside S'pore : SGD 3000.00
 *W/screen Excess Outside S'pore : SGD 100.00

THIRD PARTY COVERED EXCESS:

*Hirer must bear all costs to the damages of the return vehicle.
 *Section II - Used in S'pore Only : SGD 1500.00
 *Hirer must bear all costs to the damages of the return vehicle.
 *Section II - Used Outside S'pore : SGD 3000.00

YOUNG AND INEXPERIENCE DRIVER

Hirer or any authorised driver who is age 22 years old (on the date accident) and below or possess 18 month or less driving experience.

COMPREHENSIVE COVERED EXCESS:

*Section I - Used in S'pore Only : SGD 6000.00
 *Section II - Used in S'pore Only : SGD 6000.00
 *W/screen Excess In S'pore : SGD 100.00
 *Section I - Used Outside S'pore : SGD 12,000.00
 *Section II - Used Outside S'pore : SGD 12,000.00
 *W/screen Excess Outside S'pore : SGD 100.00

THIRD PARTY COVERED EXCESS:

*Hirer must bear all costs to the damages of the return vehicle.
 *Section II - Used in S'pore Only : SGD 6000.00
 *Hirer must bear all costs to the damages of the return vehicle.
 *Section II - Used Outside S'pore : SGD 12,000.00

Hirer is responsible for any costs to the
 THIRD PARTY DAMAGE / INJURY claims.

I HAVE READ THE TERMS AND CONDITIONS ON BOTH SIDES
 OF THIS RENTAL AGREEMENT AND AGREE THEREOF.

SIGNED BY THE PARTIES HERETO ON THE DAY OF

X

DYNAMIC CAR RENTAL

X

RENTER'S/DRIVER'S SIGNATURE


INSURER ENQUIRY

Find
insurer

Vehicle reg. no.

YL8472J

Date of Accident

19/12/2020 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance QBE

Period of Insurance 01/03/2020 - 28/02/2021

Requested By ALLAN TANG (KIM CHWEE AUT...

Requested Date 19/12/2020 09:45

Payment details

Request Amount: **S\$1.87**

GST Amount: **S\$0.13**

Total Amount Due (GST Inclusive): **S\$2**

General Insurance Association

Records Management Centre

GST Registration No: **M400017735**

DATE : 19.12.2020

TO : ABE Insurance Singapore Pte Ltd

RE : ACCIDENT INVOLVING VEHICLE NO. SLK 160 X / YL 8472J

ALONG BKE Towards PIE Changi

ON 19.12.2020

I/We, Stephanie Angel Low Wai Ling

of (NRIC No./ROC No.) S 8324133J

of Blk 10 Bukit Batok Street 41 #10-28 Singapore 657977

owner of vehicle no. SLK 160X in consideration of M/s FASTECH AUTO PTE LTD repairing my/our vehicle SLK 160X 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 : 

Name of Owner : Stephanie Angel Low Wai Ling.

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 Submission	21/12/2020 09:11 (SGT)
Date of Accident	19/12/2020 09:30 (SGT)
Exact Location of Accident	BKE, Singapore
Additional Location Information	TWDS PIE CHANGI
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK160X
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	STEPHANIE ANGEL LOW WAI LING
NRIC No	SXXXX133J
Email Address	JASONKCAPL@GMAIL.COM
Mobile Phone No	(Phone) +65-90289328
Alternative Phone No	+65-90289328

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	C180k
Variant	-
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 - Claiming third party
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	FWD
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	PNPV2019-00010705-01
Cover Note Number	-

DRIVER

Name of Driver	STEPHANIE ANGEL LOW WAI LING
NRIC No	SXXXX133J
Date Of Birth	10/08/1983
Occupation	Indoor

Date Of Driving Pass	07/12/2005
Driving experience	15 YEARS
Gender	Female
Mobile Number	(Phone) +65-90289328
Alt. Phone Number	+65-90289328
Email Address	JASONKCAPL@GMAIL.COM
Address	BLK 10 BUKIT BATOK ST 41 #10-28
Address complement	-
Postcode	657977
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Change/cross lane
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO STATEMENT.

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	YL8472J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-

Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -


INJURED PERSONS DETAILS


INJURED 1


Name of injured person	STEPHANIE ANGEL LOW WAI LING
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	BODY
Injured person in which vehicle?	SLK160X
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

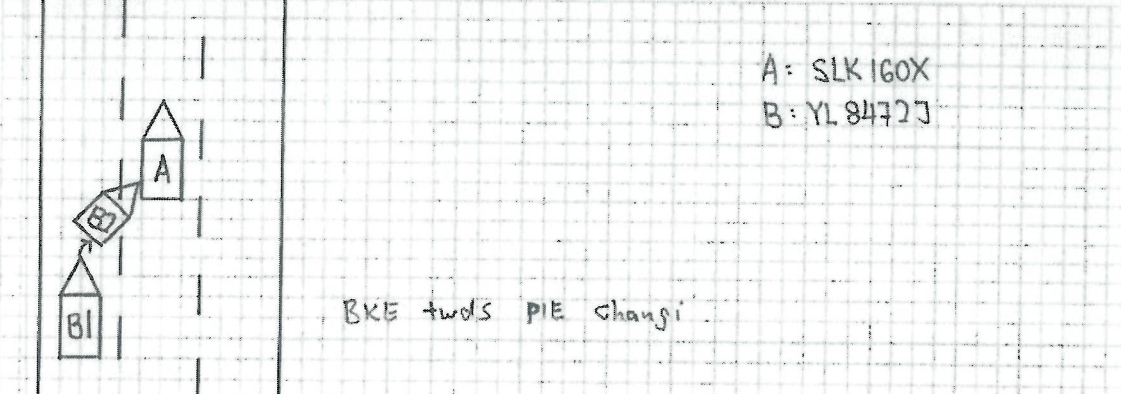
SKETCH PLANIMPORTANT NOTICE

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 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.
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.


Policyholder's Signature / Date & Time


Driver's Signature (if driver is not the policyholder) / Date & Time


Witnessed by Reporting Centre Personnel

Sketch Plan


A: SLK 160X
B: YL 84727

BKE twos PIE Changi


Describe Circumstances of the Accident


On 19.12.2020 at about 09:30AM. I was travelling along BKE towards PIE Changi.


I was travelling straight. Suddenly, vehicle B (YL 81123) encroached into my lane and hit on the rear left side my vehicle.

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


 Witnessed by Reporting Centre Personnel



SINGAPORE POLICE FORCE



T/20201219/7011

1 of 3

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

Report No. T/20201219/7011

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/12/2020 12:38		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: STEPHANIE ANGEL LOW WAI LING			Address: 10 BUKIT BATOK STREET 41 #10-28 SINGAPORE 657977		
ID Type / ID No.: NRIC NO / S8324133J			Contact No.: Home/Office: Mobile: 90289328		
Nationality: SINGAPORE CITIZEN			Email: steph_angel_low@yahoo.com.sg		
Sex: Female	Age: 37	Date of Birth: 10/08/1983	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Tuition Teacher			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 19/12/2020 09:30	Type of Location: Straight Road
Location: BUKIT TIMAH EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		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.	Type	Make	Model	Color	Conditio	No of
SLK160X	Car	MERCEDES BENZ	C180K	Beige	Slightly Damaged	0
YL8572J	Lorry				Slightly Damaged	0



SINGAPORE POLICE FORCE



T/20201219/7011

2 of 3

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

Report No. T/20201219/7011

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLK160X	FWD Singapore Pte. Ltd	PNPV2019-00010705-01	01/10/2020	30/09/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	STEPHANIE ANGEL LOW WAI LING		ID No. S8324133J
Related Vehicle	SLK160X (Car)		Contact No. 90289328
Hospital/Clinic	WONG FAMILY CLINIC & SURGERY PTE LTD		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	19/12/2020		Date 19/12/2020
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

I was traveling at lane 2 along BKE towards PIE before Bukit Panjang Exit, Suddenly I feel an great impact at the rear potion of my vehicle. I stop my vehicle and found a lorry (YL8472J) hit on to the rear left potion of my car.

I feel discomfort at my neck and back area after the accident, I consult a Doctor and was given 3 days MC.



**SINGAPORE
POLICE FORCE**



T/20201219/7011

3 of 3

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

Report No. T/20201219/7011

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 /
ANG YI TING, STEPHANIE
Contact No.: 65476414

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:
19/12/2020 12:38

Classification Of Case:

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S8324133J**

Name
LOW WAI LING (LIU HUILING)

Birth Date: **10 Aug 1963**
Issue Date: **07 Dec 2005**

001386716K

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8324133J**

Name
STEPHANIE ANGEL LOW WAI LING

Race
CHINESE

Date of birth
10-08-1983

Country/Place of birth
SINGAPORE

Sex
F

S8324133J

For Insurance Reporting And
Claim Purposes Only

[Handwritten signature]

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

PASS DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 07 Dec 2005

NP 428A

Licence No: **S8324133J**

5397732

S8324133J

Date of issue
05-12-2014

BLK 10 BUKIT BATOK STREET 41 #10-23
SINGAPORE 657977
NRIC No: XXXXX133J

Date of change: **24/11/2020**



CERTIFICATE OF INSURANCE

Please call **+65-6322-2072** for FWD Emergency Assistance
if Your Car breaks down or is involved in an accident.

All accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

POLICY NUMBER: PNPV2019-00010705-01 (Comprehensive - Classic Plan)

Car plate number: SLK160X

Car chassis number: WDD2040452A320289

Engine number: 27191031261471

Your name (As the policyholder): STEPHANIE ANGEL LOW WAI LING

Coverage start date: 01/10/2020

Coverage end date: 30/09/2021

Covered geographical area: Singapore, West Malaysia and Southern Thailand

Who is insured to drive:

(a) You; and

(b) Anyone with a valid driving license who You give permission to drive Your Car.

Important things to know:

Your Policy comprises this Certificate of Insurance, the Contract, the Car Insurance Summary and any Endorsements attached by Us. These documents should be read together as one. You must make sure that any person You give permission to drive Your Car understands Your duties under this Policy and complies with its conditions.

Your Policy is only valid if Your Car is being used for non-commercial activities in accordance with Your contract.

Finance company:

We confirm that this Policy complies with the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).

Issued on: 03/08/2020

Khor Kee Eng
Chief Executive Officer
FWD Singapore Pte Ltd

Please immediately inform us at **+65-6820-8888**
or email us at **contact.sg@fwd.com** if any details
in this Certificate of Insurance need to be changed.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	133J
Vehicle Details	
Vehicle No.:	SLK160X
Vehicle to be Exported:	No
Intended Deregistration Date:	19 Dec 2020
Vehicle Make:	MERCEDES BENZ
Vehicle Model:	C180K
Primary Colour:	Beige
Manufacturing Year:	2009
Engine No.:	27191031261471
Chassis No.:	WDD2040452A320289
Maximum Power Output:	115.0 kW (154 bhp)
Open Market Value:	\$36,986.00
Original Registration Date:	01 Oct 2009
First Registration Date:	01 Oct 2009
Transfer Count:	2
Actual ARF Paid:	\$36,986.00
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 2029
COE Category:	A - Car (1600cc & below)
COE Period(Years):	10
PQP Paid:	\$27,886.00
COE Rebate Amount:	\$23,560.00
Total Rebate Amount:	\$23,560.00

The information contained herein is correct as at 19 Dec 2020

OK