	<u> </u>		The same of the sa	11 1.70	<del></del>
NATIONAL Assessment Centre	Services.	ort i Jan'08] ,	M0820 (8000		Done by
Date 11128 11/2020 1811.2	Jep description	·	Date & Time Complete	20	Dono
Ker HO: NBA1(7220014563)	SAS c-filling	ni i ∳i onexermoeto Bi	i	1.	
Veh No. (16), 78797	E-mall (Ljula 81	m, AlC thri)			
0.01.2712/2020 13.50	I-Motor Claim	Porm	lu		<u></u>
	I-Motor W/O	(Withle: OD 2hrs,	TP 4hrs)		
OD (TP)! Reporting Only	I-Photo Uploa	ded	1		,
	Assessment/Sur		1		· ••.
TP Insurer:			Owner/Wksiz		
Profested Wksp / INC Assign Wksp / QW: (			Yeli	Fext	)
TP Panticulars: .: Veh No:	5490	, INC(	, )/Non-INC( )		
Owner / Driver: (			Tel: ·		)
	rlod: (	)	Cover Type: (		. )
Confirmed by 1 (	,	Dates,	Timer		)
Insured/Driver Liability: ( %) [	Note-Est Sintus (W	O): N: 0-2	)%; P: 21-79%. P:	BO-100%	<u>'</u>
Year of Registration: ( )	Warranty: YES (	)/NO(	<u>)                                    </u>		
Buccss: (\$ ') Londing: \$1,0	00 ( )/\$2,000 (	( ) <del>2012/102</del> /07 <del>-001</del>		TT 18	Marian na
Control to the control of the contro	兴州武河流	派员的共和国	SESSIONAL PROPERTY.	CATINO	161.7.4
( ) Walle-In Customar i Customers Info	rmation strictly Con	de Michael	ictly NO refer of reput		<del>.</del>
( ) Total Loss Case : to c-mall Ynsure			and ar Coul	·	· )
Drive-In ( )/Towed-In ( ); Invoice	uvrs()/N	0()11	owing Co: (	2477.730	STATE OF THE STATE
TAMERICAN STREET		New State of	William Strategic Strategi	品技術品	action to be
1) Apply for Transport Allowance ( )/C	Courtesy Car ( )				
2) QC Check / Post Repair Inspection	( ·)		<u> </u>		•
3) Upload Resurvey Photo [Repuir Cost>\$3	0000] ()	: :	<u></u>		
Injurý i			<del>, ', ''</del>		The second secon
		ATMUMAYA YARA			Char.
Difference karafaltamakin 8 bermanan	CONTRACTOR OF THE PROPERTY OF	NACHARA MANAGANA	ACCUPATION PATER		
The state of the s		WOLLD AND A SECOND			Committee (Committee)
HAYDDY93		<b>介於於於於</b>	Hanoriot (520)	AL STEDA	MERIS
		1) All I Analdan 2) DA I Demuge	Asmesment (\$100); It	240/242 G (270)	-
A CONTRACTOR OF THE PROPERTY O		4) PT 1 Follow-T	Lacot wie Milyvay	\$120	
river/Owner:		S) PT   Follow-T	trough Burvey (Resurvey)	2000 }	
ontiet No:		6) TIL: Ita-lumps	ollon	\$160	
arnaged Portion:		7) NI 1 Idao DA 4) NTUC Addiu	SMRT Survey		
	<u>.</u>		Cof/TptAllowshow	23	
C Checked by (Engr-In-Charge):		abite Hamelet	THAT CHAPTION	\$10 \$23	
CANADA SINGINA NO DA ARANG TRANSPORTO DE PORTADA DE CANADA DE CANA	THEIR STATES	* HIL POLLICE	Condination	\$10	
addicas communistry year and was	SECIATIONS AND MINISTED	TP (HII) 17	(Kva Inc)	30	
0[_1;		Involve dated	Pee CA	nrg sd	SELECTION .
1 2/3;		lavolce dated	Market	750	

SN0820CS0009-01 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 28/12/2020 18:12 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 2 (29/12/2020 10:40 (SGT))



## **SINGAPORE ACCIDENT STATEMENT**

#### IMPORTANT NOTICE

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.

Any false reporting may be referred to the Police for investigation.

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 Date of Accident

Exact Location of Accident Additional Location Information

Country/State of Loss

28/12/2020 18:12 (SGT) 27/12/2020 13:50 (SGT) Jln Toa Payoh, Singapore TOWARDS CTE AND PIE (TUAS) Singapore

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number

GBJ7879J

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No

Email Address

Mobile Phone No

Alternative Phone No

Yes

AZ HITECH PTE. LTD.

2XXXXX825N

alexlim@azhitech.com

(Phone) +65-94552277

+65-81572121

VEHICLE PARTICULARS

Manufacturer

Model

Variant

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?

Vehicle Category

Toyota

HIACE TURBO 5DRMT

Employment

No - Claiming third party Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number

Cover Note Number

China Taiping Insurance Comprehensive

DMCVSNW00069092001

DRIVER

Name of Driver

Passport No/FIN

ARIRAMAN MURUGAN GXXXX071N

Data Of Database Bases	
Date Of Driving Pass	30/04/2013
Driving experience Gender	7 YEARS AND 8 MONTHS
	Male
Mobile Number	(Phone) +65-81572121
Alt. Phone Number	¥
Email Address	ulexlim@azhitech.com
Address	35A LORONG 22 GEYLANG
Address complement	1) - 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Postcode	398692
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	110
The region and remove of Caret Control Office by Direct	a contract of the contract of
Insurance Company of Other Vehicle Owned by Driver	
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Major/Minor Rd
Weather Conditions	Clear
Road Surface	
- Control of the cont	Dry
CTUES INFORMATION	
OTHER INFORMATION	
Was a second sec	
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
A STANCE AND THE PROPERTY OF T	
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	
PLEASE REFER TO SKETCH PLAN	
ATTACHMENT(S)	
W	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No
The second of th	
DETAILS OF OTHER	R VEHICLE PROPERTY 1
Vehicle Registration Number	
Market and the second of the s	SJP5481J
	5
Vehicle Model	5
Vehicle Variant	
Vehicle Colour	
Vehicle Category	Private car
Name of Driver	
Contact Number	*
Address	*
Address complement	··
Doctorda	

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

### INJURED PERSONS DETAILS

#### INJURED 1

Name of injured person Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance?

ARARAMAN MURUGAN

SLIGHT INJURY GBJ7879J

Yes

No

#### 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:

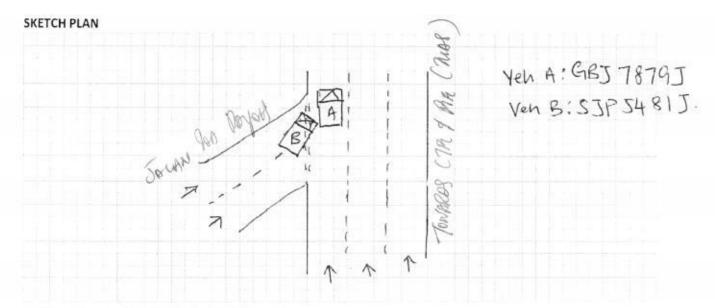
Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personne

NRIC/FIN No .:



	On	the	Sto	atrod	dat	ie a	nd ti	me	1	vehi	cle	A	was		
							sta								nicle
3	coi	Ming	0	at	from	JACA	No 20A	Pour	H	can	10	and	hi	+ ,	on to
u	VP	nict	e 1	ett	Dex	+ (on	. 1	uch	to	stad	re	the	2+	vei	ele
							- nac								
						***********	VODA	A 40		174.		-	9,00		)
nt	2	n n	SF	oad.											
			- Fection - 1												
_	-			-	-	-									
										normal and					
									A	/10-Table			-0-31147		
_															
						11 65									

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:

Name:

NRIC/FIN No .:

	WN DAMAGE ( ) 3rd PA	RTY ( ) REPORTING ONLY ( )
DATE OF ACCIDENT : 2	17/12/2020 TIME	:_ 1350 HR. OWARDS CTE & PIE (TUAS)
LOCATION : k	Talan 7 0 /	1350 AK.
<u>-</u>	Toa rayon.	awaens cte & PIE (TUAS)
VEHICLE NUMBER : G	BT 7879 T MAKE/MOR	DEL TOYUTA HIACE VANTUUDO 50
OWNER INSURED :	1 HITELD MI GO	TO TOTAL HAMES THE TUNDO DE
NRIC NO. : 201703925	· I	55 2277
INSURANCE COMP:	China Tairint	POLICY NUMBER:
TYPE OF INSURANCE:		PFT ( ) 3RD PARTY ONLY ( )
DRIVED DADWIGHT	_ woweness continues to	
DRIVER PARTICULA	A/ASEV I	ER SAME AS OWNER: ( )
DRIVER NAME : A	RIRAMAN MURUGAN	NRIC NO .: 67697071 N
		CONTROL DESCRIPTION ASSESSMENT OF THE SECOND
	22 GIEYLANG	POSTAL: 398692
CONTACT: 8157212		tech. (om GENDER: MALE
DOB: 8/6/198	81 DATE OF PASS: 30/4	2013
(DIE TO A CITE DESIGNATION A NATION A		
(PLEASE TICK AND )	FILL THE RELEVANT CHOICE	
WAS DRIVER AND EMPLOY	EE OF THE INSURED'S COMPANY	( / ) YES ( ) NO
IF NO, RELATION OF DRIVER		5
( ) OWNER ( ) SPOUS	E( ) FRIEND ( ) RELATIVE (	CHILDREN ( ) SIBLING ( ) OTHERS
WEATHER CONDITION: (	) CLEAR ( ) RAINING ( ) DRIZZL	
ROAD SURFACE: ( / DRY (	( ) WET ( ) SLIPPERY	
WAS ANYBODY INJURED: (	/) YES ( ) NO INJURIES SUSTA	201
		AINED: Medo badio
WAS ACCIDENT REPORTED	TO POLICE: IF YES, WHIC	AINED: Medo, back.
( ) YES ( / ) NO	TO POLICE: IF YES, WHI	CH STATION:
( ) YES ( / ) NO	TO POLICE: IF YES, WHICE POLICE REPORT	CH STATION:
( ) YES ( / ) NO ANY VIDEO CAPTURED: ( NUMBER OF PASSENGER IN	TO POLICE:    F YES, WHITE   POLICE REPORT   YES ( V ) NO   CONVEY BY AMBUL	CH STATION:
( ) YES ( / ) NO ANY VIDEO CAPTURED: (	TO POLICE:    F YES, WHITE   POLICE REPORT   YES ( V ) NO   CONVEY BY AMBUL	CH STATION:  RT NUMBER:  ANCE ( ) YES ( ) NO
( ) YES ( / ) NO ANY VIDEO CAPTURED: ( NUMBER OF PASSENGER IN	TO POLICE:    F YES, WHITE   POLICE REPORT   YES ( V ) NO   CONVEY BY AMBUL	CH STATION:  RT NUMBER:  ANCE ( ) YES ( ) NO  ( ) MALE ( ) FEMALE
( ) YES ( / ) NO ANY VIDEO CAPTURED: ( NUMBER OF PASSENGER IN	TO POLICE:    F YES, WHITE   POLICE REPORT   YES ( V ) NO   CONVEY BY AMBUL	CH STATION:  RT NUMBER:  ANCE ( ) YES ( ) NO  ( ) MALE ( ) FEMALE  ( ) MALE ( ) FEMALE
( ) YES ( / ) NO ANY VIDEO CAPTURED: ( NUMBER OF PASSENGER IN	TO POLICE:    F YES, WHITE   POLICE REPORT   YES ( V ) NO   CONVEY BY AMBUL	CH STATION:  RT NUMBER:  ANCE ( ) YES ( ) NO  ( ) MALE ( ) FEMALE
( ) YES ( / ) NO ANY VIDEO CAPTURED: ( NUMBER OF PASSENGER IN PARTICULAR OF PASSENGER	TO POLICE:  IF YES, WHICH POLICE REPORT CONVEY BY AMBUL ICLUDE DRIVER:  Driver on b	CH STATION:  RT NUMBER:  ANCE ( ) YES ( ) NO  ( ) MALE ( ) FEMALE ( ) MALE ( ) FEMALE ( ) MALE ( ) FEMALE
( ) YES ( / ) NO ANY VIDEO CAPTURED: ( NUMBER OF PASSENGER IN PARTICULAR OF PASSENGER  (THIRD PARTY PART	TO POLICE:  IF YES, WHICE  POLICE REPORT  CONVEY BY AMBULE  IF YES, WHICE  POLICE REPORT  CONVEY BY AMBULE  POLICE REPORT  FOR ON IN  FOR ON  FOR ON IN	CH STATION:  RT NUMBER:  ANCE ( ) YES ( ) NO  ( ) MALE ( ) FEMALE ( ) MALE ( ) FEMALE ( ) MALE ( ) FEMALE
( ) YES ( / ) NO  ANY VIDEO CAPTURED: ( NUMBER OF PASSENGER IN PARTICULAR OF PASSENGER  (THIRD PARTY PART VEHICLE B SJP 548 J	POLICE: IF YES, WHICE POLICE REPORT POLICE REPORT CONVEY BY AMBULE POLICE REPORT CONVEY BY AMBULE POLICE REPORT POLICE POLICE POLICE POLICE REPORT POLICE PO	CH STATION:  RT NUMBER:  ANCE ( ) YES ( ) NO  ( ) MALE ( ) FEMALE ( ) MALE ( ) FEMALE ( ) MALE ( ) FEMALE
(THIRD PARTY PARTY VEHICLE B SJP 548) J	POLICE: IF YES, WHICE POLICE REPORT CONVEY BY AMBULT DE VOY ON TO  POLICE REPORT CONVEY BY AMBULT DE VOY ON TO  POLICE REPORT CONVEY BY AMBULT DE VOY ON TO  NAME / NRICE NAME / NRICE NAME / NRICE	CH STATION:  RT NUMBER:  ANCE ( ) YES ( ) NO  ( ) MALE ( ) FEMALE
(THIRD PARTY PART VEHICLE B STP 548) J VEHICLE C VEHICLE D	POLICE: IF YES, WHICE POLICE REPORT CONVEY BY AMBULT CONVEY BY AMBULT POLICE REPORT CONVEY BY AMBULT POLICE	CH STATION:  RT NUMBER:  ANCE ( ) YES ( ) NO  ( ) MALE ( ) FEMALE  CONTACT: CONTACT: CONTACT:
(THIRD PARTY PART VEHICLE B SJP 548 J VEHICLE C VEHICLE E VEHICLE E  (A VEHICLE C VEHICLE C VEHICLE C VEHICLE C VEHICLE C VEHICLE C	POLICE: IF YES, WHICE POLICE REPORT POLICE REPORT CONVEY BY AMBULE DE VOY ON DE  POLICE REPORT CONVEY BY AMBULE DE VOY ON DE  NAME / NRICE:	CH STATION:  RT NUMBER:  ANCE ( ) YES ( ) NO  ( ) MALE ( ) FEMALE  CONTACT: CONTACT: CONTACT: CONTACT:
( ) YES ( / ) NO ANY VIDEO CAPTURED: ( NUMBER OF PASSENGER IN PARTICULAR OF PASSENGER  (THIRD PARTY PART VEHICLE B SJP SH8 J VEHICLE C VEHICLE C VEHICLE F	POLICE: IF YES, WHICE POLICE REPORT OF YES (V) NO CONVEY BY AMBULE ICLUDE DRIVER: Driver on to  R :  POLICE REPORT CONVEY BY AMBULE Driver on to  NAME / NRIC:	CH STATION:  RT NUMBER:  ANCE ( ) YES ( ) NO  ( ) MALE ( ) FEMALE  CONTACT: CONTACT: CONTACT: CONTACT: CONTACT: CONTACT:
(THIRD PARTY PART VEHICLE B SJP 548 J VEHICLE C VEHICLE E VEHICLE E  (A VEHICLE C VEHICLE C VEHICLE C VEHICLE C VEHICLE C VEHICLE C	POLICE: IF YES, WHICE POLICE REPORT POLICE REPORT CONVEY BY AMBULE DE VOY ON DE  POLICE REPORT CONVEY BY AMBULE DE VOY ON DE  NAME / NRICE:	CH STATION:  RT NUMBER:  ANCE ( ) YES ( ) NO  ( ) MALE ( ) FEMALE  CONTACT: CONTACT: CONTACT: CONTACT:
(THIRD PARTY PART VEHICLE B VEHICLE C VEHICLE F VEHICLE G VEHICLE G VEHICLE G VEHICLE G	POLICE: IF YES, WHICE POLICE REPORT OF YES (V) NO CONVEY BY AMBULE ICLUDE DRIVER: Driver on to  R :  POLICE REPORT CONVEY BY AMBULE Driver on to  NAME / NRIC:	CH STATION:  RT NUMBER:  ANCE ( ) YES ( ) NO  ( ) MALE ( ) FEMALE  CONTACT: CONTACT: CONTACT: CONTACT: CONTACT: CONTACT:
( ) YES ( / ) NO ANY VIDEO CAPTURED: ( NUMBER OF PASSENGER IN PARTICULAR OF PASSENGER  (THIRD PARTY PART VEHICLE B SJP SH8 J VEHICLE C VEHICLE C VEHICLE F	POLICE: IF YES, WHICE POLICE REPORT OF YES (V) NO CONVEY BY AMBULE ICLUDE DRIVER: Driver on to  R :  POLICE REPORT CONVEY BY AMBULE Driver on to  NAME / NRIC:	CH STATION:  RT NUMBER:  ANCE ( ) YES ( ) NO  ( ) MALE ( ) FEMALE  CONTACT: CONTACT: CONTACT: CONTACT: CONTACT: CONTACT:



# 中国太平保险 (新加坡) 有限公司 CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD.

Motor Commercial

MZ300/C

R SN AN0675A

Cov. Type:C

CERTIFICATE OF INSURANCE

Vehicles (Therd-Party Rosks and Componsation) Act (Chapter 189)

Rost Transport Act, 1997 (Malaysus)

Addor Vehicles (Therd-Party Rosks) Roles, 1959 (Malaysus)

CERTIFICATE No.

DMCVSNW00069092001

Engine No.: 1KD2868211 Cha. No.:JTFHT02P000249474

Index Mark and Registration Number of Vehicle

G8J7879J

Name of Policy Holder

AZ HITECH PTE. LTD.

Effective date of the Communicement of Insurance for the purposes of the Regulations, Ordinance or Enactment

28/08/2020

Excess Sect ! . EX ON WINDSCREEN.

8\$100.00

4. Date of Expiry of Insurance

27/08/2021

Persons or Classes of Persons embled to drive Any person who is driving on the Policyholder's order or with their 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\*
- (1) Use in connection with the Policyholder's businese.
  (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
  (3) Use for social, domestic or pleasure purposes.

- The Policy does not cover (1) Use for hire or reward or racing, pace-making, reliability trial or speed testing. (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propolled variable.

HIRE PURCHASE CO.: MAYBANK SINGAPORE LIMITED AS HP OWNER

\* 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 (Mataysia), 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

Please see reverse

FOI CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: EZY-1 SERVICES PTE LTD **Authorised Officer** 

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) #3 Anson Road #16-00 Springleaf Tower Singapore 079909

Q63896111

6222 1033

www.sg.cntaiping.com

### > Back to OneMotoring

# Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Company Owner ID: 825N

Vehicle Details

Vehicle No.: GBJ7879J

Vehicle to be Exported: No

Intended Deregistration Date: 31 Jan 2021 Vehicle Make: TOYOTA

Vehicle Model: HIACE VAN TURBO 5DR MT

Primary Colour: Silver Manufacturing Year: 2019

Engine No.: 1KD2868211

Chassis No.: JTFHT02P000249474

Maximum Power Output:

Open Market Value: \$28,138.00 Original Registration Date: 28 Aug 2019 First Registration Date: 28 Aug 2019

Transfer Count: 0

Actual ARF Paid: \$1,407.00

Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date:

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 27 Aug 2029

COE Category: C - Goods Vehicle & Bus

COE Period(Years): 10

QP Paid: \$24,599.00 COE Rebate Amount: \$21,087.00

Total Rebate Amount: \$21,087.00

The information contained herein is correct as at 28 Dec 2020



### GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours: Monday to Edday 09:00

Operating Hours : Monday to Friday, 09:00 – 17:00 UEN: S66SS0020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

# ADDENDUM (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: Original Report No: SN 1/20 CR 9009 Vehicle Registration No: Name(asshownin NRIC): ARIRAMBU MURUGOW\_\_\_NRIC/FIN/PassportNo: (\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate Singapore( Address Mobile No.: Contact (Tel) Email Address Time of Accident : Date of Accident Place of Accident Insurance Company: (B) ADDITIONALINFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: MAKE & MODAL OF THE VEHICLE TO TO Reporting Centre Perso Policyholder / Driver's Signature Name: Date: