

# NATIONAL Assessment Centre Services. (ref 1.3.2005) **SA0051100002**

Date In: <b>17/01/2021 12.38</b>	Job description	Date & Time Completed	Done by
Ref No: <b>NBA/11621000514/4</b>	SAS e-Milling		
Veh No: <b>SML 553D</b>	E-mail (Update this, AIC this)		
D.O.A: <b>11/01/2021 09.15</b>	I-Motor Claims Form		
OD <b>TH</b> Reporting Only	I-Motor W/O (With: OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner / Witness		

Preferred Wkep / INC Assign Wkep / OW: (	Tel:	Fax:
TP Particulars: Vch No: <b>SJT 1671S</b> INC ( ) / Non-INC ( )		
Owner / Driver: (	Tel:	
Policy No: ( ) Period: ( ) Cover Type: ( )		
Confirmed by: (	Date:	Time:
Insured/Driver Liability: ( % ) [Note-Est Status (WO): N: 0-20%; P: 21-79% P: 80-100%]		
Year of Registration: ( ) Warranty: YES ( ) / NO ( )		
Excess: (\$ ) Loading: \$1,000 ( ) / \$2,000 ( )		

( ) Walk-In Customer: Customer's Information strictly Confidential & Strictly NO refer of repairer.

( ) Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ) ; Invoice: YES ( ) / NO ( ) ; Towing Co: ( )

1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

Injury: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b>NBA2100601</b>	1) AIC: Accident Reporting (\$30)	
Driver/Owner:	2) DA: Damage Assessment (\$100)	INC rate
Contact No:	3) TP: Towing Fee	\$102/45
Damaged Portion:	4) PT: Follow-Through Survey	\$120
QC Checked by (Engr-In-Charge):	5) PF: Follow-Through Survey (Resurvey)	\$20
	For claim against INC Only (ref 10 Jan 2005)	
	6) TR: Re-inspection	\$75
	7) NI: IDA + SMRT Survey	\$160
	8) NTUC Additional Services	
	ON:	
	*NS: Courtesy Car / Tpt Allowance	\$3
	*NG: Repairs Coordination	\$10
	*NT: Post Repair Inspection	\$25
	*ND: DV / Collect Excess Coordination	\$3
	TE (NI) / TP (NS) INC: against INC	\$20
	9) NI: IDA Mobile	
	Invoice dated	Fee Charged
	Invoice dated	Fee Charged



## 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 sforesaid.

### ACCIDENT STATEMENT

Date of Submission	12/01/2021 12:38 (SGT)
Date of Accident	11/01/2021 07:15 (SGT)
Exact Location of Accident	TPE, Singapore
Additional Location Information	TOWARDS PIE ABOUT LORONG HALUS EXIT
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SML553D
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN CHEE TECK
NRIC No	SXXXX380F
Email Address	garytan.c.t@gmail.com
Mobile Phone No	(Phone) +65-90059195
Alternative Phone No	+65-90059195

#### VEHICLE PARTICULARS

Manufacturer	Kia
Model	Cerato
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	AIG
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1900085737
Cover Note Number	-

#### DRIVER

Name of Driver	TAN CHEE TECK
NRIC No	SXXXX380F

Date Of Driving Pass	01/05/2021
Driving experience	8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90059195
Alt. Phone Number	+65-90059195
Email Address	garytan.c.t@gmail.com
Address	BLK 232B SUMANG LANE #08-383
Address complement	MATILDA COURT
Postcode	822232
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	Chain Collision
Weather Conditions	Clear
Road Surface	Wet

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	ONG KIM LUAN
Gender	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20210111/7042

#### 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	SJT1677S
Vehicle Manufacturer	-

Vehicle Colour	-
Vehicle Category	Private car
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)	-

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKK3259M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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)	-

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SMR754J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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	TAN CHEE TECK
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SML553D
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

##### INJURED 2

Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SML553D
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	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 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.

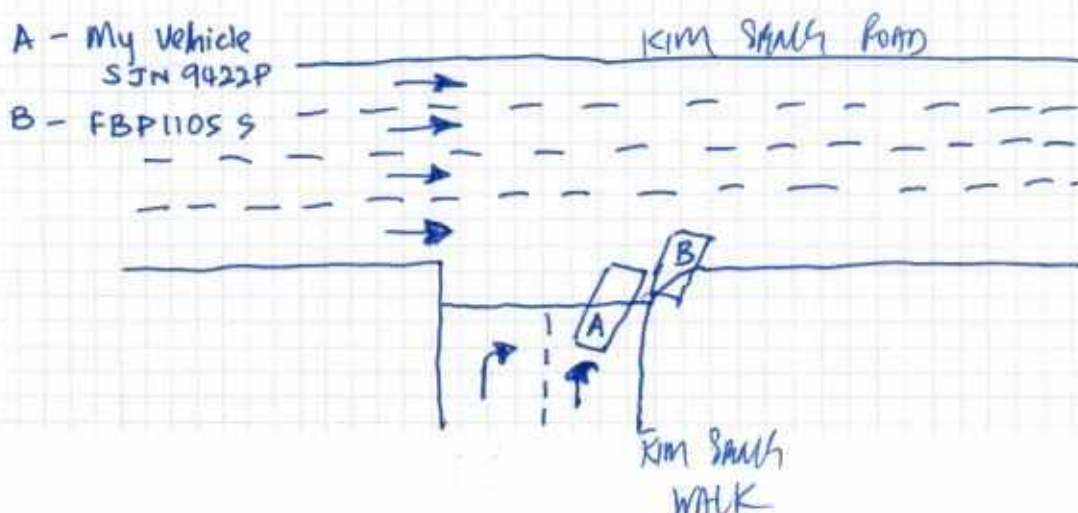
*ah* 12/01/2021 1220hrs

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

### **Sketch Plan**



## Describe Circumstances of the Accident

Kim Seng

On the 12/01/2021 around 0815 hrs at Kay Seng Walk exit towards Kim Seng Road. I hit a motorbike on my right side. After road clear I was moving out to the right and suddenly I heard a crack sound. I thought I hit the pavement but when I look out I saw a motorbike fall <sup>from</sup> my right side bumper. So I came out and ask anything/everything o.k? But the rider just tell me to report. Physically at the look of the bike there is no damage. No injury complain by the rider. My front bumper bodykit cracked. We took each other details and decided to report.

## Declaration

We declare the foregoing particulars are true in every respect.



12/01/2021

1220 WS

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



## 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.
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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.
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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.

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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' law yers/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' law yers/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 law yers/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

TPZ

(A) SML 553D

(B) SJT 1677S

(C) SKK 3259M

(D) SmR 754J



### Describe Circumstances of the Accident

REF. TO POLICE REPORT 7/20210111/7042.

### Declaration

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

Policyholder's Signature / Date &amp; Time

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

Witnessed by Reporting Centre  
Personnel

## SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 11-Jan-2021

ACCIDENT TIME: 0715HRS

LOCATION: TPE TWDS PIE ABOUT LORONG HALUS EXIT

VEHICLE NUMBER: SML553D

INSURED NAME: TAN CHEE TECK

NRIC / FIN: S7013380F

CONTACT: 90059195

MAKE: KIA

MODEL: CERATO 1.6(A) EX

Are you claiming under your own insurance policy for repair to your vehicle?

( ) Yes, If No, Pls Select: ( ☒ ) Third Party ( ) Reporting Only

INSURANCE COMPANY: AIG

TYPE OF POLICY: Comprehensive

POLICY NUMBER: 1900085737

EXPIRY DATE: 01-May-2021

NAME DRIVER: TAN CHEE TECK

NRIC / FIN: S7013380F

CONTACT: 90059195

DATE OF BIRTH: 29-Apr-1970

DRIVING PASS DATE: 07-Sep-1987

OCCUPATION: Indoor

GENDER: Male

EMAIL ADDRESS: GARYTAN.C.T@GMAIL.COM

ADDRESS OF DRIVER: 232B SUMANG LANE #04-383 MATILDA COURT SINGAPORE 822232

Relationship Of The Driver With The Insured: Owner

Number Of Passenger Include Driver: 1 Driver + 1 Passenger(s)

NAME	NRIC/FIN/BC	GENDER	INJURED
TAN CHEE TECK	S7013380F	Male	<input checked="" type="checkbox"/>
ONG KIM LUAN	S7001362B	Female	<input checked="" type="checkbox"/>

INJURY DETAILS: 1 Driver, 1 Passenger(s)

Insurance Company Of Driver's Own Vehicle:

Weather Conditions: Clear

Road Surface: WET

Was Any Foreign Vehicle Involved In This Accident? No

Convey By Ambulance: No

Was There Any Video Capture By Car Camera? No

Was There Accident Reported To The Police? YES

Police Report Number: T/20210111/7042

Details Of 3rd Party	Name	NRIC	Contact	No. of Paxs (incl' driver)
Veh B SJT1677S				Not Sure
Veh C SKK3259M				Not Sure
Veh D SMR754J				Not Sure





# SINGAPORE POLICE FORCE



T/20210111/7042

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

1 of 3

Report No. T/20210111/7042

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 11/01/2021 21:12		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: TAN CHEE TECK			Address: 232B SUMANG LANE #04-383 SINGAPORE 822232		
ID Type / ID No.: NRIC NO / S7013380F			Contact No.: Home/Office: Mobile: 90059195		
Nationality: SINGAPORE CITIZEN			Email: GARYTAN.C.T@GMAIL.COM		
Sex: Male	Age: 50	Date of Birth: 29/04/1970	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Hearing consultant			Driving Licence Information: Class:		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 11/01/2021 07:15	Type of Location: Straight Road
Location:  TAMPINES EXPRESSWAY				
Weather: Clear		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: chain collision			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SJT1677S	Car	HYUNDAI	AVANTE			0
SKK3259M	Car	HONDA		Black		0
SML553D	Car	KIA	CERATO 1.6(A) EX	Black		1
SMR754J	Car					0



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

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Report No. T/20210111/7042

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SML553D	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1900085737	02/05/2019	01/05/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	ONG KIM LUAN	ID No.	S7001362B
Related Vehicle	SML553D (Car)	Contact No.	81898300
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	11/01/2021	Date	11/01/2021
No. of Days granted Medical Leave	03	Degree of	Slight
Driver			
Name	TAN CHEE TECK	ID No.	S7013380F
Related Vehicle	SML553D (Car)	Contact No.	90059195
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	11/01/2021	Date	11/01/2021
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

On the above date and time, I was travelling along TPE towards PIE. I was driving on lane 1 of 4 lanes expressway. The vehicles in front of me stopped and I followed suit and stopped my vehicle. After a few seconds, I felt a huge impact from the rear. The impact was so huge that it pushed my vehicle forward and collided onto the vehicle in front of me. I alighted and realised SGT1677S had collided onto my vehicle and I was involved in a chain collision involving total 4 vehicles. I was the 3rd vehicle in the chain.

Me and my passenger later went to Calrose Medical Family Clinic to seek treatment and was issued with 3 days MC each.





**SINGAPORE  
POLICE FORCE**



T/20210111/7042

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

3 of 3

Report No. T/20210111/7042

**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 / TPHQ /  
ONG YONG HOCK  
Contact No.: 65476436

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:  
11/01/2021 21:12

Classification Of Case:



# CERTIFICATE OF INSURANCE

## KIA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : TAN CHEE TECK  
 Period of Insurance : 02 May 2019 To 01 May 2021  
 Engine No. : G4FGJH719142  
 Chassis No. : KNAF3416MK5036731

Vehicle No. : SML553D  
 Policy No. : 1900085737  
 Endorsement No. :  
 Issued Date : 15 May 2019

### ABOUT THE COVER

Make/Model : KIA Cerato  
 Engine Capacity/Tonnage : 1,591.00 CC  
 Driver Restriction : NA  
 Sum Insured : Market Value  
 Off Peak Car : No  
 First Year of Registration : 2019  
 Insuring with COE/PARF : Yes

#### Person 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.  
 This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 20 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

#### Limitation as to use\*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.  
 This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the damage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc

\* Limitations rendered inoperative by Section 6 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

### EXCESS

#### Section 1

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

#### Section 2

Property Damage - \$0

Windscreen : \$100

#### Named Driver and Excess (where applicable)

TAN CHEE TECK - \$600 (Own Damage)

### APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Ser Ming Ave Singapore 575733 69326000
2. Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 609339 65684501
3. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 241 Alexandra Road Singapore 159931 64278800
4. Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408550 67481000

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website [www.aig.com.sg](http://www.aig.com.sg) or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HL Bank

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504622245

CYCLE & CARRIAGE-JEDD  
 239 ALEXANDRA ROAD  
 SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

*M. Anil*

AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORISED REPRESENTATIVE

SECH01



> Back to OneMotoring

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

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	380F
<b>Vehicle Details</b>	
Vehicle No.:	SML553D
Vehicle to be Exported:	Yes
Intended Deregistration Date:	11 Jan 2021
Vehicle Make:	KIA
Vehicle Model:	CERATO 1.6(A) EX
Primary Colour:	Black
Manufacturing Year:	2018
Engine No.:	G4FGJH719142
Chassis No.:	KNAF3416MK5036731
Maximum Power Output:	93.8 kW (125 bhp)
Open Market Value:	\$13,687.00
Original Registration Date:	02 May 2019
First Registration Date:	02 May 2019
Transfer Count:	0
Actual ARF Paid:	\$13,687.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	01 May 2029
PARF Rebate Amount:	\$10,265.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	01 May 2029
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$29,159.00
COE Rebate Amount:	\$23,327.00
Total Rebate Amount:	\$33,592.00

The information contained herein is correct as at 11 Jan 2021

OK