

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 : 19.03.2021

China Taiping Insurance Singapore Pte Ltd

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES : SKZ 4184J / YQ 8877Z ON.06.02.2021

We are the authorized repair workshop for the owner of motor vehicle no: **SKZ 4184J**, which was involved in the captioned accident with your insured vehicle no: **YQ 8877Z**. The vehicle owner has requested and authorized us to assist him in presenting his/her claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving, we are submitting these claims for your consideration on behalf of the owner/claimant.

| | |
|--------------------------------------|---------------------|
| 1) Cost of Repair (inclusive of GST) | \$ 18,190.00 |
| 2) Loss of Rental | \$ 7,260.00 |
| 3) LTA Search Fee | \$ 7.45 |
| | <u>\$ 25,457.45</u> |

We enclosed herewith the following documents to support the claims:

- | | |
|-------------------------|-----------------------------------|
| a) Final Repair Invoice | b) Car Rental Invoice / Agreement |
| c) LTA Search Result | d) Letter Authorisation , etc |
| e) GIA Report | f) I/C & Driving Licence |
| g) Insurane Certificate | h) 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

China Taiping Insurance Singapore Pte Ltd

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909

Attn : Motor Claim Department

Tax Invoice : 22238

Date : 19.03.2021

Vehicle No : SKZ 4184J

Make/Model : Volvo V40

Chassis/Eng# :

Accident Date : 06.02.2021

Claim No :

Reference : 0221 -22238

Policy No :

| | Amount |
|-------------------------------|--------------|
| To proceed on lump sum repair | S\$ 17000.00 |

E. & O. E.

Total : S\$ 17000.00

GST @ 7% : S\$ 1190.00

Amount Due : **S\$ 18190.00**



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: KHOO WAI CHEONG

Invoice : DCR-2021-03-07

Date : 10.03.2021

Agreement No : 21677

Payment Terms : LOD

| DESCRIPTION | AMOUNT |
|--|-------------|
| Rental charges for vehicle : <u>SKU 1627U</u> (0221-22238) | \$ 7,260.00 |
| Rental Period from <u>06.02.2021</u> to <u>10.03.2021</u> . | |

E. & O. E.

Total \$ 7,260.00

JENNY LAW

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. 21677

| | | | | | | |
|---|----------------|----------------|---|--|--|--|
| Name Khoo Wai Cheong | | | REG. No. SKU1627U | | MAKE MODEL: | |
| ADDRESS Blk 219 Ang Mo Kio Ave 1 | | | | | DIESEL PETROL E 1/4 1/2 3/4 F | |
| #07-827 | | | KM IN | | DATE & TIME IN 10.03.2021 @ 4:30pm | |
| Singapore 560219 | | | KM OUT | | DATE & TIME OUT 06.03.2021 @ 8.15pm | |
| | | | KM DRIVEN | | TIME USED | |
| NAMED DRIVER | | | | | | |
| DRIVING LICENCE NO S18220859 | DATE OF EXPIRY | PLACE OF ISSUE | HOURS | | @S\$ | |
| PASSPORT NO | DATE OF ISSUE | PLACE OF ISSUE | 33 DAYS | | @S\$ 220.00 \$7260.00 | |
| ADD NAMED DRIVER | | | WEEKS | | @S\$ | |
| DRIVING LICENCE NO | DATE OF EXPIRY | PLACE OF ISSUE | MONTHS | | @S\$ | |
| PASSPORT NO | DATE OF ISSUE | PLACE OF ISSUE | BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR COLLISION DAMAGES WAIVER (C.D.W.) | | SUB-TOTAL | |
| 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. | | | | | TOTAL RENTAL \$7260.00 | |
| | | | | | DELIVERY FEE | |
| | | | | | COLLECTION FEE | |
| | | | | | | |
| ADDITIONAL CONDITIONS: COMPREHENSIVE COVERED EXCESS: *Section I - Used in S'pore Only : SGD 2000.00 *Section I - Used Outside S'pore : SGD 4000.00 *Section II - Used in S'pore Only : SGD 1500.00 *Section II - Used Outside S'pore : SGD 3000.00 *W/screen Excess In S'pore : SGD 100.00 *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 I - Used Outside S'pore : SGD 12,000.00 *Section II - Used in S'pore Only : SGD 6000.00 *Section II - Used Outside S'pore : SGD 12,000.00 *W/screen Excess In S'pore : SGD 100.00 *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. | | | 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 | | | |

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

M. i.ass.

DYNAMIC CAR RENTAL

X

[Signature]

RENTER'S/DRIVER'S SIGNATURE



Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 06 Feb 2021 / 19:34:18

Receipt Date/Time : 06 Feb 2021 / 19:34:18

Tax Invoice/Receipt

Receipt No. : ITNET-00000-210206-001959

Previous Receipt No. :

| S/N | Item Description/ Business Transaction Reference No. | Amount Before GST (S\$) | GST Amount (S\$) | Amount After GST (S\$) |
|-----|--|-------------------------------|------------------------|------------------------------|
|-----|--|-------------------------------|------------------------|------------------------------|

Result of Insurance Enquiry - YQ8877Z

As at 06 Feb 2021/16:50:00

Insurance Co: CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

| | | | | |
|---|--|------|------|------|
| 1 | Insurance Enquiry - YQ8877Z Enquiry Fee 20210206193336846990 | 7.00 | 0.49 | 7.49 |
|---|--|------|------|------|

| | | | |
|------------------|------|------|------|
| Sub-Total | 7.00 | 0.49 | 7.49 |
|------------------|------|------|------|

| | | | |
|------------------------------|------|------|------|
| Total Before Rounding | 7.00 | 0.49 | 7.49 |
|------------------------------|------|------|------|

| | | | |
|----------------------------|--|--|------|
| Rounding Difference | | | 0.04 |
|----------------------------|--|--|------|

| | | | |
|-----------------------------|--|--|------|
| Total Amount Payable | | | 7.45 |
|-----------------------------|--|--|------|

Paid By

| | | |
|-------------------|---|------|
| 20210206193345104 | Direct Debit: eNETS Debit (Internet Banking) | 7.45 |
|-------------------|---|------|

| | |
|-------|------|
| Total | 7.45 |
|-------|------|

| | |
|-------------|------|
| Cash Change | 0.00 |
|-------------|------|

| | |
|-----------------|------|
| Tendered Amount | 7.45 |
|-----------------|------|

| | |
|--------------------------|------|
| Excess Refundable Amount | 0.00 |
|--------------------------|------|

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

DATE : 06.02.2021

TO : China Taiping Insurance Singapore Pte Ltd

RE : ACCIDENT INVOLVING VEHICLE NO. Skz 4184J / YQ8877Z

ALONG TPE Singapore

ON 06.02.2021

I/We, Khoo Wai Cheong
of (NRIC No./ROC No.) S18220856
of Blk 219 Ang Mo Kio Ave 1 # 07-827 Singapore 560219
owner of vehicle no. Skz 4184J in consideration of M/s FASTECH AUTO
PTE LTD repairing my/our vehicle Skz 4184J 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 : Khoo Wai Cheong

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 | 08/02/2021 14:52 (SGT) |
| Date of Accident | 06/02/2021 16:50 (SGT) |
| Exact Location of Accident | TPE, Singapore |
| Additional Location Information | - |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|--------------------------|
| Vehicle Registration Number | SKZ4184J |
| INSURED/POLICYHOLDER | |
| Is company? | No |
| Name Of Registered Owner | KHOO WAI CHEONG |
| NRIC No | SXXXX085G |
| Email Address | STEVENKHOO1919@GMAIL.COM |
| Mobile Phone No | (Phone) +65-96314883 |
| Alternative Phone No | +65-96314883 |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | Volvo |
| Model | V40 |
| 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 | China Taiping Insurance |
| Type of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | DMPCSNW00074212001 |
| Cover Note Number | - |

DRIVER

| | |
|----------------|-----------------|
| Name of Driver | KHOO WAI CHEONG |
| NRIC No | SXXXX085G |
| Date Of Birth | 15/08/1967 |
| Occupation | Indoor |

| | |
|--|---------------------------|
| Date Of Driving Pass | 20/08/1992 |
| Driving experience | 28 YEARS AND 6 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-96314883 |
| Alt. Phone Number | +65-96314883 |
| Email Address | STEVENKHOO1919@GMAIL.COM |
| Address | BLK 219 AMK AVE 1 #07-827 |
| Address complement | - |
| Postcode | 560219 |
| 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 - Head to Rear |
| 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) | 2 |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No |

PASSENGER 1

| | |
|--------|---------------|
| Name | YUEN LAI LENG |
| Gender | Female |

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 | YQ8877Z |
| 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 YUEN LAI LENG
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained BODY
 Injured person in which vehicle? SKZ4184J
 Were seat belts worn? Yes
 Was this injured conveyed to hospital by ambulance? No


INJURED 2

Name of injured person KHOO WAI CHEONG
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained BODY
 Injured person in which vehicle? SKZ4184J
 Were seat belts worn? Yes
 Was this injured conveyed to hospital by ambulance? No


SKETCH PLAN


IMPORTANT NOTICE

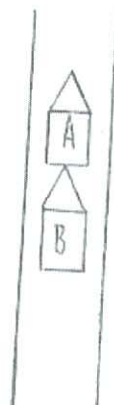
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
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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' 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

Sketch Plan


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


Witnessed by Reporting Centre Personnel



TPE

A) SKZ 4184J


B) YQ 8877Z


Describe Circumstances of the Accident


On 06.02.2021 at about 4.50pm. I was travelling along TPE Exit
Towards Punggol Road. I was stationary due to front traffic. Suddenly
Vehicle B hit on my vehicle.

Declaration

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

For Insurance Reporting And
Claim Purposes Only

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1822085G



Name
KHOO WAI CHEONG

高伟翔

Race

CHINESE

Date of Birth

15-08-1967

Sex

M

Country of Birth

SINGAPORE



For Insurance Reporting And
Claim Purposes Only



2091393

NRIC No. S1822085G



Blood Group

A+

Date of issue

04-06-1994

APT BLK 219 ANG MO KIO AVENUE 1 #07-827
SINGAPORE 560219

NRIC No: S1822085G

Date: 17/12/2011

No: 6985917

For Insurance Reporting And
Claim Purposes Only

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1822085G
Name: KHOO WAI CHEONG

Birth Date: 15 Aug 1967
Issue Date: 29 Aug 2003

1000783059F




For Insurance Reporting And
Claim Purposes Only

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

| | PASS DATE |
|--|-------------|
| Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms | 20 Aug 1992 |

NP 428A

Licence No: S1822085G





中国太平
CHINA TAIPING

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

Motor Private Car

MX1E
R SN
AN0218A
Cov. Type: C

CERTIFICATE OF INSURANCE
Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMPCSNW00074212001

Engine No. B4154T51435853
Cha. No. YV1MV28H0G2314138

AUTOSAFE
=====

1. Index Mark and Registration
Number of Vehicle

SKZ4184J

2. Name of Policy Holder

KHOO WAI CHEONG

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

21/07/2020

4. Date of Expiry of Insurance

20/07/2021

Named Drivers Ex Sect. I S\$500.00
Additional Ex Other than Named Drivers:
Ex Sect. I - Age <= 25 S\$3,000.00
Ex Sect. I - Age >= 26 S\$500.00
* Age as at date of accident
EX ON WINDSCREEN S\$100.00

5. Persons or Classes of Persons entitled to drive*

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his 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*

Use for social, domestic and pleasure purposes and for the Policyholder's business.
The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.
Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft), will be doubled. One time Waiver of Excess for the first S\$1,000 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.

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 (Malaysia), 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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By:

SHUANG HUP AGENCY
Authorised Office

Authorised Signatory

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

6389 6111

6222 1033

www.sg.cntaiping.com

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 085G

Vehicle Details

Vehicle No.: SKZ4184J
Vehicle to be Exported: No
Intended Deregistration Date: 06 Feb 2021
Vehicle Make: VOLVO
Vehicle Model: V40 T2 (A)
Primary Colour: White
Manufacturing Year: 2015
Engine No.: B4154T51435853
Chassis No.: YV1MV28H0G2314138
Maximum Power Output: 90.0 kW (120 bhp)
Open Market Value: \$22,664.00
Original Registration Date: 21 Jan 2016
First Registration Date: 21 Jan 2016
Transfer Count: 1
Actual ARF Paid: \$18,730.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 20 Jan 2026
PARF Rebate Amount: \$13,111.00

Intended COE Rebate Details

COE Expiry Date: 20 Jan 2026
COE Category: A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years): 10
QP Paid: \$45,002.00
COE Rebate Amount: \$22,295.00
Total Rebate Amount: \$35,406.00

The information contained herein is correct as at 06 Feb 2021

OK