

# LEE BROTHERS AUTOMOTIVE PTE.LTD

NO. 1 KAKI BUKIT AVE 6 #02-47 AUTOBAY

SINGAPORE 417883

TEL: 6509 5521 FAX: 6509 5523 GST Reg. No. : 201101880C

ATTN:THE MOTOR CLAIMS DEPARTMENT

AXA INSURANCE SINGAPORE PTE LTD

8 SHENTON WAY

#27-01 AXA TOWER

SINGAPORE 068811

Yrs Ref. : ES2773E

Our Ref. : LB0321-2931

Date: : 27.03.2021

Accident involving GBF4636J and ES2773E on 05.03.2021 at 1120hrs along SLE TOWARD MANDAI

We refer to the above matter. We are instructed that above accident was caused solely and completely by the negligence of your insured, as a result of which, our client have suffered loss and expenses.

We are instructed by our client to make a property damages claims as:-

	<u>Amount</u>
1. Cost of repair (Inc GST)	S\$ 11,556.00
2. Loss of Rental (13Days @ S\$160PerDay)	S\$ 2,080.00
3. Towing	S\$ -
5. LTA Search fee	S\$ 7.45
4. E-File Serach fee	S\$ -
Claim Amount	<u>S\$ 13,643.45</u>

Enclosed are the following documents for your perusal.

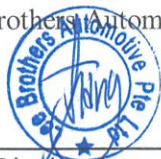
<input checked="" type="checkbox"/> Original Final repair Bill	<input checked="" type="checkbox"/> Letter of Authority
<input type="checkbox"/> Original Survey Report & Invoice	<input checked="" type="checkbox"/> Rental Agreement /Receipt
<input type="checkbox"/> Original Photographs of [GBF4636J]	<input checked="" type="checkbox"/> E-File Search Fee/ <u>LTA Receipt</u>
<input checked="" type="checkbox"/> GIAS Reports of [GBF4636J]	<input checked="" type="checkbox"/> Vehicle Registration Card
<input checked="" type="checkbox"/> Certificate of Insurance	<input checked="" type="checkbox"/> Driver's Driving License / Identity Card
<input checked="" type="checkbox"/> Report Of A Traffic Accident	

Your prompt action will be greatly appreciated.

Kindly acknowledge receipt of the above said documents and your favourable reply is greatly appreciated.

Yours faithfully,

Lee Brothers Automotive Pte.Ltd



sales@leebrothers.com.sg

# LEE BROTHERS AUTOMOTIVE PTE LTD

1 Kaki Bukit Avenue 6, #02-47 Autobay, Singapore 417883

Tel : (65) 6509 5521 Fax : (65) 6509 5523

Email : sales@leebrothers.com.sg

Co. Reg. : 201101880C

GST Reg. No. : 201101880C

## TAX INVOICE

**10040**

Messrs : **AXA INSURANCE PTE LTD**  
8 SHENTON WAY  
#27-01 AXA TOWER  
SINGAPORE 068811

Claim No. : LB0321-2931

Acc. Date : 05/03/2021

Veh. No./Model : GBF 4636J NISSAN NV200

Date : 27/03/2021

QTY	DESCRIPTIONS	AMOUNT
	<b>Repair Cost :</b> Inclusive of supply parts, panel beating, spray painting and labour.	10,800.00
	<b>Sub-total</b>	10,800.00
	<b>Add GST 7%</b>	756.00
	<b>Total Amount</b>	<b>11,556.00</b>

E. & O.E.

\* Please make all payments to " Lee Brothers Automotive Pte Ltd "

\* All service and repairing are in good order & conditions.



Customer Sign & Chop

Lee Brothers Automotive Pte Ltd



# CARZ RENTAL PTE. LTD.

1 Kaki Bukit Avenue 6, #02-47 Autobay,  
Singapore 417883

Tel: (65) 6509 5521 Fax: (65) 6509 5523

LEE BROTHERS

GBF4636J

## VEHICLE RENTAL AGREEMENT

ROC NO: 201312119K

RA NO: 4001

<b>Hirer Particulars -</b>		Veh. No. <u>GBJ4054S</u>		Replace veh. No.			
Name	<u>CHUA TAH PENG</u>	Make / Model	<u>TOYOTA HIACE</u>	Auto/Manual			
Address	<u>BK 565 HOUGANG ST 51</u>	Date/Time Out	<u>05/03/2021 @ 1320.</u>	KM Out			
	<u>#05-488 S(530565)</u>	Date/Time In	<u>18/03/2021 @ 1143.</u>	KM In			
NRIC/Passport	<u>S7413554D</u>	Mobile	<u>96888319</u>	Estimated Date/Time Return			
Tel (O)		Fax		Rental charges -			
				S\$	S\$		
<b>Authorised Driver's Particulars -</b>							
Name		Hours	@	Per Hour			
Address		Days	@	Per day	<u>2080</u>		
		Weeks	@	Per Week			
		Months	@	Per Month			
N /Passport		Nationality		Sub-Total			
Date of Birth		Occupation		Less Discount			
D/Licence No.		Mobile		Sub-Total			
Expiry Date		Tel (O)		<b>Optional Charges -</b>			
Country of Issue		Tel (H)		Delivery	@		
(A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES		Collection	@	Per Trip			
<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>FRONT</p> </div> <div style="text-align: center;"> <p>LEFT</p> </div> <div style="text-align: center;"> <p>RIGHT</p> </div> </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: center;"> <p>REAR</p> </div> </div>		Others		Sub-Total			
						Add 7% GST	
						(A) Estimated Total Rental	
		<b>Extension -</b>					
		Extension Rental		X			
Surcharge (Malaysia)		X					
P.A.I.		X					
		X					
<b>Others -</b>							
Misc :							
Cash/Nets/Cheque/VISA/MC Card No:							
				Sub-Total			
				Add 7% GST			
				(B) Extension/others Total			
				(A) + (B) Grand Total Rental Charges			
				Less Prepayment			
				<b>Balance Due</b>	<u>2080</u>		
<b>Physical Damage Excess</b>		<b>Hirer's Acknowledgement</b>					
Singapore	S\$						
Malaysia	S\$						
Young, Elderly & Inexperience driver	S\$						
(Additional)							
<b>IMPORTANT NOTE:</b>							
1. Only persons aged 24 and above or below 65 with 2 years or more driving experience, authorized, licensed and signing this agreement may drive the vehicle.		<p>The hirer hereby read and understood all terms and conditions stated on this page and overleaf :</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="text-align: center;"> <p>Hirer Signature/Co's Stamp/Date</p> </div> <div style="text-align: center;"> <p>for Carz Rental Pte. Ltd. Authorised Signature/Date</p> </div> </div>					
2. In case of accident, the Hirer shall report to rental office immediately. If there is any bodily injury, a police report must be made within 24 hours.							
3. Vehicle is strictly for SINGAPORE USE ONLY, and may not be driven out of Singapore without prior consent of <b>Carz Rental Pte. Ltd.</b>							
4. Unauthorised drivers, drivers who did not fulfill the above requirement are liable for the full cost & other losses suffered by <b>Carz Rental Pte. Ltd.</b> should the vehicle is damaged or stolen.							

> Back to OneMotoring



Land Transport Authority  
10 Sin Ming Drive  
Singapore 575701  
GST Registration No. : M4-0006529-2

Print Date/Time : 05 Mar 2021 / 13:34:55

Receipt Date/Time : 05 Mar 2021 / 13:34:55

### Tax Invoice/Receipt

Receipt No. : ITNET-00000-210305-001893

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
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Result of Insurance Enquiry - ES2773E

As at 05 Mar 2021/11:20:00

Insurance Co: AXA INSURANCE PTE LTD

1	Insurance Enquiry - ES2773E Enquiry Fee 20210305133350946216	7.00	0.49	7.49
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<b>Sub-Total</b>	7.00	0.49	7.49
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<b>Total Before Rounding</b>	7.00	0.49	7.49
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<b>Rounding Difference</b>			0.04
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<b>Total Amount Payable</b>			7.45
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Paid By

20210305133409111	Direct Debit: eNETS Debit (Internet Banking)	7.45
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Total	7.45
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Cash Change	0.00
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Tendered Amount	7.45
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Excess Refundable Amount	0.00
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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:

To: AXA INSURANCE PTE LTD

RE: ACCIDENT INVOLVING VEHICLE NO.: GBF 4636J AND ES2773E  
AT/ALONG SLE TOWARD MANDALAY  
ON 05/03/2021

I/We, SOON CHUAN ANN CO of (NRIC No./ROC NO.)  
23024800D of 3014A UBI ROAD / #01-01 S(408703)  
owner of vehicle no. GBF 4636J in consideration of M/S Lee Brothers Automotive Pte. Ltd  
repairing my/our vehicle GBF 4636J at my/our instruction and hereby authorise  
M/S Lee Brothers Automotive Pte. Ltd to demand claim settle receive 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 further agree and undertake to indemnify them against the above mentioned claim costs  
which may arise therewith.



Signature of Owner: \_\_\_\_\_

Date: \_\_\_\_\_

SS1Y21360002 / SME MOTOR PTE LTD  
 ENTRY DATE & TIME: 06/03/2021 11:16 (SGT)  
 SUBMITTED BY: Chia Pei Ying  
 VERSION: 1 (06/03/2021 11:16 (SGT))



## 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	06/03/2021 11:16 (SGT)
Date of Accident	05/03/2021 11:20 (SGT)
Exact Location of Accident	SLE, Singapore
Additional Location Information	TOWARDS MANDAI
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF4636J
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SOON CHUAN ANN CO
Company Reg No	2XXXXX800D
Email Address	scasing@singnet.com.sg
Mobile Phone No	(Phone) +65-67458828
Alternative Phone No	(Office) +65-67458828

#### VEHICLE PARTICULARS

Manufacturer	Nissan
Model	NV200
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle

#### INSURANCE COMPANY

Name of Insurance Company	EQ
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCPHQ20-004186
Cover Note Number	-

#### DRIVER

Name of Driver	CHUA TAH PENG
NRIC No	SXXXX554D
Date Of Birth	29/04/1974
Occupation	Outdoor



Date Of Driving Pass	29/08/1994
Driving experience	26 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96888319
Alt. Phone Number	-
Email Address	chuatahpeng@gmail.com
Address	BLK 565 HOUGANG ST 51 #05-488
Address complement	-
Postcode	530565
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	-
Insurance Company of Other Vehicle Owned by Driver	-

## GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

## OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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

VEHICLE C SLOWED DOWN. I SLOW DOWN TOO. SUDDENLY, VEHICLE B HIT ONTO MY VEHICLE REAR. DUE TO THE IMPACT, IT PUSHES MY VEHICLE FORWARD AND HIT ONTO VEHICLE C.

## 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	ES2773E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-98756303
Address	-
Address complement	-
Postcode	-



Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

**DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number	GBH483Z
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	VEHICLE C
No. Of Passenger (Including Driver)	-

**INJURED PERSONS DETAILS**

## INJURED 1

Name of injured person	CHUA TAH PENG
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	-
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 lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
- (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature  
Date & Time:

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

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

PLEASE E-MAIL REPORT TO = SALES@LEEBROTHERS.COM.SG.

# SKETCH PLAN



A = GBF 4636 J

B = ES 2773 E

C = GBH 483 Z

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

VEHICLE C SLOW DOWN, I SLOW DOWN TOO. SUDDENLY VEHICLE B HIT ONTO MY VEHICLE REAR. DUE TO THE IMPACT, IT PUSHES MY VEHICLE FORWARD AND HIT ONTO VEHICLE C.

## DECLARATION

I hereby declare that the information provided is true and correct.



Policyholder's Signature  
Date & Time:

x *Chun*  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

Reporting Officer's/Personnel's Signature  
(Name):  
Date & Time:



**SINGAPORE  
POLICE FORCE**



T/20210308/7035

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

1 of 3

Report No. T/20210308/7035

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 08/03/2021 16:13		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: CHUA TAH PENG			Address: 565 HOUGANG STREET 51 #05-488 SINGAPORE 530565		
ID Type / ID No.: NRIC NO / S7413554D			Contact No.: Home/Office: Mobile: 96888319		
Nationality: SINGAPORE CITIZEN			Email: chuatahpeng@gmail.com		
Sex: Male	Age: 46	Date of Birth: 29/04/1974	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: Driver		Driving Licence Information: Class:		Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 05/03/2021 11:20	Type of Location: Straight Road
Location:  SELETAR EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
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
ES2773E	Car					0
GBF4636J	Van					0
GBH483Z	Van					0



**SINGAPORE  
POLICE FORCE**



T/20210308/7035

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

2 of 3

Report No. T/20210308/7035

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	CHUA TAH PENG	ID No.	S7413554D
Related Vehicle	GBF4636J (Van)	Contact No.	96888319
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

VEHICLE C ( GBH483Z ) SLOW DOWN, I SLOW DOWN TOO. SUDDENLY VEHICLE B ( ES2773E ) HIT ONTO MY VEHICLE REAR. DUE TO THE IMPACT, IT PUSHES MY VEHICLE FORWARD AND HIT ONTO VEHICLE C ( GBH483Z ).



**SINGAPORE  
POLICE FORCE**



T/20210308/7035

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

3 of 3

Report No. T/20210308/7035

**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:  
08/03/2021 16:13

Classification Of Case:



**EQ Insurance Company Limited**

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110  
tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg  
reg no. 1978-00490-N



**CERTIFICATE OF INSURANCE**

ROAD TRANSPORT ACT 1987 (MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)  
(REPUBLIC OF SINGAPORE)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)  
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

**COMMERCIAL VEHICLE PRIVATE (SCH I )  
Comprehensive**

Certificate No.: DMCPhQ20-004186

Form: LCVPI

Excess:

1. Index Mark and Registration Number of Vehicles  
GBF4636J

Section 1 SGD500.00  
YEID-AC Additional SGD3,000.00

2. Name of Policyholder  
SOON CHUAN ANN CO

3. Effective Date of the Commencement of Insurance for the purpose of the Act  
17/11/2020

4. Date of Expiry of Insurance  
16/11/2021

5. Person or Classes of Persons entitled to drive\*

Goods carrying - (MZ300) Authorised Driver. Any of the following :-

1. The Policyholder
2. Any person on the order or with the permission of the Policyholder

EQI Motor Accident  
Hotline

**6311 3211**



\*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 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

6. Limitations as to use\*

1) Use in connection with the Insured's business. 2) Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business. 3) Use for social domestic and pleasure purposes.  
THE POLICY DOES NOT COVER

1) Use for hire or reward or for racing pace-making reliability trial or speed testing. 2) Use whilst drawing a greater number of trailers in all than is permitted by Law. 3) Use for the carriage of passengers for hire or reward. 4) Liability arising from or in connection with the carriage of hazardous materials, high explosives, inflammable liquid or gases including LPG in cylinders.

\*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) or and Amendment, Act or Acts passed in substitution thereof.



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7413554D



Name

CHUA TAH PENG

蔡加平

Race

CHINESE

Date of birth

Sex

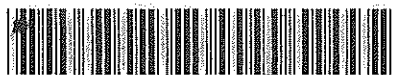
29-04-1974

M

Country of birth

SINGAPORE

S7413554D



3523755

NRIC No. S7413554D



Date of issue

29-04-2004

Address

APT BLK 565 HOUGANG STREET 51  
#05-488  
SINGAPORE 530565

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

PASS DATE

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

29 Aug 1994



NP 0250

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type: Business  
Owner ID: 800D

### Vehicle Details

Vehicle No.: GBF4636J  
Vehicle to be Exported: No  
Intended Deregistration Date: 05 Mar 2021  
Vehicle Make: NISSAN  
Vehicle Model: NV200 1.5 MT ABS AIRBAG 2WD 6DR E5 W/RC  
Primary Colour: Silver  
Manufacturing Year: 2016  
Engine No.: K9KC400D055878  
Chassis No.: VSKYBAM20Z0129542  
Maximum Power Output: -  
Open Market Value: \$20,226.00  
Original Registration Date: 17 Nov 2016  
First Registration Date: 17 Nov 2016  
Transfer Count: 0  
Actual ARF Paid: \$1,012.00

### Intended PARF Rebate Details

PARF Eligibility: No  
PARF Eligibility Expiry Date: -  
PARF Rebate Amount: \$0.00

### Intended COE Rebate Details

COE Expiry Date: 16 Nov 2026  
COE Category: C - Goods Vehicle & Bus  
COE Period(Years): 10  
PQP Paid: \$44,317.00  
COE Rebate Amount: \$25,248.00  
**Total Rebate Amount: \$25,248.00**

The information contained herein is correct as at 05 Mar 2021

OK