

(08/11/13) wef
ASS. REG. BY: Rome

REF:

CS/LPC 21004462/Rvf3

755R

ASSIGNMENT

From:

Date:

Estimated Cost:

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: XE 43586

at Workshop m/s: BW 04-26
of 10, Burah St (West Connect Block)

Insured:

LPC

Policy No. Z/20/VC00/107949

Claims No. 20/21/21/VC00/022408

Sum Insured:

Excess:

1500

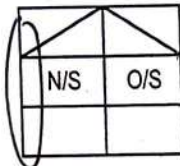
(Client's Record)

Make of Veh:

90824904-AN4M3

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.



Bal. or Market Value:

10SK

IDAC Accident Rpt:

Consistent? : Yes or No

GIA / PR Seen:

Consistent? : Yes or No

Est. Repairs:

days

Res.: Yes or No

Lum Sum:

%

3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date:

Person Contacted:

Date / Time

Action / Instruction

Repair Init - 81K
09/04/21@5.43pm revert to Ong Li Li by email.

5/4/22

LS 21,750 (red 16,736.93, 43%)

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2) 5/4/22-typist

Days Of Repair: 20

Resurvey No. of Trip: 1

Add Fee:

☐

: Site Insp (\$

☐

: Interview (\$

☐

: Tech. Invs (\$

☐

: Weekend (\$

Survey Fee:

Transportation:

S + RS, SI

Photos

Others

Report Format: OD

Lump Sum / T.B.I: (\$ 21,750)

\$34,086.96



BIG WHEELS PTE LTD

WORKSHOP ADDRESS: NO. 10 BUROH STREET #04-26
WEST CONNECT BUILDING SINGAPORE 627564
EMAIL: ADMIN@BIGWHEELS.SG
COMPANY & GST REGISTRATION NO: 201824297N

Sales Quotation

CUSTOMER : Call Lade Enterprises Pte Ltd
102F Pasir Panjang Road #02-02,
Citilink Warehouse Complex,
Singapore 118 530
ATTN : Mr. Chua

QUOTATION NO : SQ/CL/4358
DATE : 05 APR 2021
VEHICLE : XE4358G
MODEL : SCANIA P400

S/N	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
ORIGINAL PARTS				
1.	Windscreen <i>cr</i>	1	\$S\$1,660.56	\$S\$1,660.56
2.	Cab Corner LHS, Outer <i>scr</i>	1	\$S\$1,203.16	\$S\$1,203.16
3.	Cab Corner LHS, Inner ?	1	\$S\$123.42	\$S\$123.42
4.	Space Frame ?	1	\$S\$2,751.33	\$S\$2,751.33
5.	Door Frame LHS <i>bt</i>	1	\$S\$4,877.03	\$S\$4,877.03
6.	Door Stop ?	1	\$S\$503.98	\$S\$503.98
7.	Door Glass LHS <i>bro</i>	1	\$S\$512.78	\$S\$512.78
8.	Window Winder LHS ?	1	\$S\$1,857.90	\$S\$1,857.90
9.	Window Motor LHS ?	1	\$S\$1,026.34	\$S\$1,026.34
10.	Door Handle LHS <i>scr</i>	1	\$S\$253.00	\$S\$253.00
11.	Door Lock LHS ?	1	\$S\$463.38	\$S\$463.38
12.	Boarding Step Structure LHS <i>scr</i>	1	\$S\$1,150.60	\$S\$1,150.60
13.	Step Plate <i>scr</i>	1	\$S\$132.00	\$S\$132.00
14.	Step Plate, Lower <i>scr</i>	1	\$S\$93.50	\$S\$93.50
15.	Step Well Case Cover LHS <i>scr</i>	1	\$S\$378.37	\$S\$378.37
16.	Casing LHS <i>scr</i>	1	\$S\$93.50	\$S\$93.50
17.	Cover LHS <i>de</i>	1	\$S\$132.00	\$S\$132.00
18.	Mudguard Front LHS <i>scr</i>	1	\$S\$619.16	\$S\$619.16
19.	Mudguard Front RHS <i>scr</i>	1	\$S\$619.16	\$S\$619.16
20.	Mudguard Seal Front LHS ?	1	\$S\$219.57	\$S\$219.57
21.	A Pillar LHS <i>mis</i>	1	\$S\$275.00	\$S\$275.00
22.	Casing LHS ?	1	\$S\$49.50	\$S\$49.50
23.	Side Mirror Assy, LHS <i>scr</i>	1	\$S\$1,595.00	\$S\$1,595.00
24.	Sun Visor, Lower <i>cr</i>	1	\$S\$1,595.00	\$S\$1,595.00
25.	Sun Visor, Top <i>cr</i>	1	\$S\$511.50	\$S\$511.50
26.	Bracket, Kerb Observation Mirror <i>cr</i>	1	\$S\$49.50	\$S\$49.50
27.	Close Proximity Mirror (Door) <i>mis</i>	1	\$S\$132.00	\$S\$132.00
28.	Lock Bracket ?	2	\$S\$132.00	\$S\$264.00
29.	Headlamp w/ Signal & Wire LHS <i>cr/prize?</i>	1	\$S\$688.53	\$S\$688.53
30.	Cabin Shock Absorber, Rear ?	2	\$S\$752.49	\$S\$1,504.98
31.	Side Wall Structure LHS <i>bt</i>	1	\$S\$2,389.38	\$S\$2,389.38
32.	Roof Panel <i>tom</i>	1	\$S\$3,817.36	\$S\$3,817.36
33.	Roof Panel LHS <i>bt</i>	1	\$S\$1,167.28	\$S\$1,167.28
34.	Door Trim <i>bt</i>	1	\$S\$865.88	\$S\$865.88
35.	Sun Visor	1	\$S\$511.31	\$S\$511.31

Total Parts Costs: ~~\$S\$34,086.92~~
\$34,086.96



BIG WHEELS PTE LTD

WORKSHOP ADDRESS: NO. 10 BUROH STREET #04-26

WEST CONNECT BUILDING SINGAPORE 627564

EMAIL: ADMIN@BIGWHEELS.SG

COMPANY & GST REGISTRATION NO: 201824297N

Sales Quotation

CUSTOMER : Call Lade Enterprises Pte Ltd
102F Pasir Panjang Road #02-02,
Citilink Warehouse Complex,
Singapore 118 530
ATTN : Mr. Chua

QUOTATION NO : SQ/CL/4358
DATE : 05 APR 2021
VEHICLE : XE4358G
MODEL : SCANIA P400

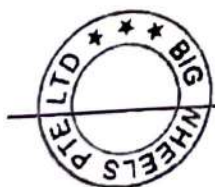
DESCRIPTION	QTY	UNIT PRICE	AMOUNT
LABOUR			
Carry out overall vehicle checking & diagnostic			
Dismantle & install above mentioned spare parts			
Cut & remove dented panel (top, front, side)			
Carry out realignment - panel, cabin			
Pull out and knock vehicle frame, front & side bumper, cab corner, front & side cover			
Remove and rework inner door upholstery			
Knock and straighten pillar, vehicle chassis			
Spray painting of affected areas including cab corner, top & front & side panel (2 colors, exterior & interior)			
Logo writing (LHS door, roof top)			
<i>RASUL</i> <i>Hp 90010068</i> <i>20 days / Lumpsum</i> <i>08/04/21 @ 16.00</i> <i>EXCESS: 1500</i> <i>REPAIR</i> <i>Resy after repair</i>			
	1	S\$4,400	S\$4,400
			<i>3500</i>
Total Labour Costs:			S\$4,400.00
Total w/o GST:			\$38,486.96
GST (7%):			S\$38,486.96 S\$2,694.09
Total Costs:			S\$41,181.05 \$41,181.05

TOTAL: FORTY-ONE THOUSAND ONE HUNDRED EIGHTY-ONE DOLLARS AND TWO CENTS ONLY**

Terms and conditions:

1. All prices are quoted in SG dollar
2. Validity: 30 days
3. The quotation for parts & labour are estimation based on the repair required, if any additional parts & labour are required during the repair that exceed 10% of the total quote we will inform you of the cost for further approval.
4. If you are agreeable with this quotation, kindly endorse and fax back this quotation in order for us to proceed with the repair.

Thank you & Regards,



Big Wheels Pte Ltd

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

Date:

We confirm acceptance of the above quotation

(Signature & Company Stamp)

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 05/04/2021 13:17 (SGT)
Date of Accident 27/03/2021 01:15 (SGT)
Exact Location of Accident 16 Harbour Dr, Singapore 117401
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number XE4358G

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner Call Lade Enterprises Pte Ltd
Company Reg No 1XXXXX755K
Email Address chua@calllade.com
Mobile Phone No (Phone) +65-62221970
Alternative Phone No +65-62221970

VEHICLE PARTICULARS

Manufacturer Scania
Model P410LA4X2MSZ
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? Yes
Vehicle Category Commercial vehicle
Transmission Auto
CC 12742

INSURANCE COMPANY

Name of Insurance Company Lonpac Insurance Bhd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number Z/20/VC00/107949
Cover Note Number -

DRIVER

Name of Driver Lum Chee Yong Marshall
NRIC No SXXXX319Z

Date of Birth	04/04/1979
Occupation	Outdoor
Date Of Driving Pass	19/03/1998
Driving experience	23 YEARS
Gender	Male
Mobile Number	(Phone) +65-88380300
Alt. Phone Number	-
Email Address	chua@callade.com
Address	Blk 813A, Choa Chu Kang Ave 7, #14-571
Address complement	-
Postcode	681813
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
Does Driver Own Other Vehicles?	Yes
Vehicle Registration Number of Other Vehicle Owned by Driver	FBD6689D
Insurance Company of Other Vehicle Owned by Driver	NTUC Income Insurance Co-operative Ltd

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collided into Property
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other material or property damaged?	No
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?	Yes
Police Station Name	Choa Chu Kang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007659999
Alt. Police Station Phone No	(Fax) +65-67644104
Police Station Address	No 20 Choa Chu Kang Street 52 #01-02 Singapore 689286
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Refer to police report no : T/20210329/2083.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	with traffic police
Was there any audio recorded?	No

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	Lum Chee Yong Marshall
Address	-
Address Complement	-

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

-
-
-
XE4358G
-
Yes

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/PIN No:

Please note that you might be able to submit an Own Damage Claim under your own policy within 14 days.
() Claim Own Damage () Claim Third Party

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was deployed to IPM 623 (XG 455E.G) Trailer (TRD 5435G)
from 1930hrs 26 May to 1300hrs 27 May. At about 0115hrs, I
mounted a lift container (CSN 8103047) for

[Signature]

Refer to police report (T/20210329/2083)

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

Reporting Centre Personnel's Signature
Name:
NR C.F.N. 1

05/04/21

5/4/21

Type text here



SINGAPORE POLICE FORCE



T/20210329/2083

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

1 of 3

Report No. T/20210329/2083

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/03/2021 16:02	Vide Report No.:	Station Diary No.: 73
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Informant's Particulars

Name of Informant: LUM CHEE YONG MARSHALL	Address: APT BLK 813A CHOA CHU KANG AVENUE 7 #14-571 SINGAPORE 681813		
ID Type / ID No.: NRIC NO / S7909319Z	Contact No.: Home/Office: Mobile: 88380300		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 41	Date of Birth: 04/04/1979	Type of Informant: Driver
Race: Chinese	Language: English		Institution / School Name:
Occupation: HAULIER DRIVER	Driving Licence Information: Class: 2B,2A,2,3,4,5		Date of Expiry:

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 27/03/2021 01:15	Type of Location: T-Junction
Location: HARBOUR DRIVE				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Moving Vehicle Against - Lamp Post			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
XE4358G	Lorry				Seriously Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA
No. of Pedestrians Injured: NIL	



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999



T/20210329/2083

2 of 3

Report No. T/20210329/2083

CONTINUATION OF REPORT

Driver			
Name	LUM CHEE YONG MARSHALL	ID No.	S7909319Z
Related Vehicle	XE4358G (Lorry)	Contact No.	88380300
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date Treatment	27/03/2021	Date Discharge	27/03/2021
No. of Days granted Medical Leave	14	Degree of Injury	Serious

Brief Details.

On 27/03/2021 at about 0115hrs, I was driving my Haulier (XE4358G) along Harbour Drive. I then make a right turn at the traffic junction however my vehicle toppled on the left side. Ambulance, police and LTA came to scene and I was subsequently conveyed to National University Hospital.

My Trailer number is TRD5433S, and my PSA container (CSNU8103047) was damaged. I wish to state that my vehicle hit onto a traffic light which caused the traffic light to fell.

I was granted 14 days hospitalized leave. My lorry suffered from a smashed left side window and the left side of my lorry was dented.

This is the first time such incident happen to me. I am lodging this report for insurance purpose.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999



T/20210329/2083

3 of 3

Report No. T/20210329/2083

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

J /

Sgt 2 DARRYL LIM JUN DE

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Staff Sgt MOHAMED SUFIAN BIN MOHAMED
JUNID

Contact No.: 65476247

Authentication Stamp

NP168

SIGNATURE

Signature Of Informant:

Date/Time:

29/03/2021 16:02

Classification Of Case:

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

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : SW0B21450002 Vehicle Registration No: XE 4358 G1
Name (as shown in NRIC) : LUM CHEE JOH MARSHALL NRIC/FIN/Passport No : SXXXX319 Z
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : BLK 813, CHUA CHIA KANG AVE 7 #14-571 Singapore (681813)
Contact (Tel) : _____ Mobile No.: 88380300
Email Address : chua@callade.com
Date of Accident : 27/03/2021 Time of Accident : 0115 hrs.
Place of Accident : along HARBOUR DRIVE.
Insurance Company : LCHPAC INSURANCE BHD.

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

AMEND ON CLAIM OWN DAMAGES.

Policyholder / Driver's Signature
Date:

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



LONPAC INSURANCE BHD (S98FC5635C)

(Incorporated in Malaysia)
Singapore Office: 300, Beach Road #17-04/07, The Concourse, Singapore 199555.
Tel: (65) 6250 7388 Fax: (65) 8296 3767 Website: www.lonpac.com.sg
GST Reg No.: F0-0005635-C

MZ312

CERTIFICATE OF INSURANCE

Insured's Copy

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION ACT (CAP 189) REPUBLIC OF SINGAPORE.
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES 1960 (REPUBLIC OF SINGAPORE).
ROAD TRANSPORT ACT 1987 (MALAYSIA).
ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA).
THE MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA).

Certificate No. : Z/20/VC00/107949

Type of Cover : COMPREHENSIVE

1. Index Mark and Vehicle Registration Number

SCANIA P410LA4X2MSZ
- XE 4358G

2. Name of Policy Holder

CALL LADE ENTERPRISES PTE LTD

3. Effective date of the Commencement of Insurance for the purpose of the Act.

12/09/2020

4. Date of Expiry of the Insurance

31/07/2021

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/HER 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 IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS. USE FOR THE CARRIAGE OF PASSENGERS (OTHER THAN FOR HIRE OR REWARD) IN CONNECTION WITH THE POLICYHOLDER'S BUSINESS. USE FOR SOCIAL DOMESTIC AND PLEASURE PURPOSES. THE POLICY DOES NOT COVER : (1) USE FOR HIRE OR REWARD OR RACING PACEMAKING RELIABILITY TRIAL OR SPEED TESTING. (2) USE WHILST DRAWING A GREATER NUMBER OF TRAILERS IN ALL THAN IS PERMITTED BY LAW.

Excess : S\$1500.00 (SECTION 1)
S\$2500.00 (SECTION 1) ADDITIONAL EXCESS FOR
YOUNG &/OR INEXPERIENCED DRIVERS
S\$200.00 WINDSCREEN EXCESS

Condition : ACCIDENT REPAIRS AT LONPAC'S AUTHORISED WORKSHOPS
OR DISTRIBUTOR OWNED MOTOR WORKSHOP

* Limitations rendered inoperative by Section 95 of the Road Transport Act 1987 (Malaysia) or Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore are not included under heading.

I/We hereby certify that this covering Note is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and Motor Vehicles (Third-Party Risks and Compensation) Act (Cap 189) Republic of Singapore.

Amek

CHIEF EXECUTIVE
(Singapore Branch)

User ID : estinyeo / niwong
Date issued : 23-07-2020

Page 1 Of 1

19VC000Rev v5.10.0 Z10475 - VM1

Require PARF/COE Rebate for Registered Vehicle

Owner ID Type:	
Owner ID:	Company
	755R
Vehicle No.:	XE4358G
Vehicle to be Exported:	No
Intended Deregistration Date:	09 Apr 2021
Vehicle Make:	SCANIA
Vehicle Model:	P410LA4X2MSZ
Primary Colour:	Multicolor
Manufacturing Year:	2018
Engine No.:	DC13115L017077687
Chassis No.:	YS2P4X20005506211
Maximum Power Output:	-
Open Market Value:	\$105,389.00
Original Registration Date:	12 Sep 2018
First Registration Date:	12 Sep 2018
Transfer Count:	0
Actual ARF Paid:	\$5,270.00
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
COE Expiry Date:	11 Sep 2028
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	10
QP Paid:	\$31,092.00
COE Rebate Amount:	\$23,077.00
Total Rebate Amount:	\$23,077.00

The information contained herein is correct as at 09 Apr 2021

OK