D19 | 5862/SMRT | EL



JusEquity Law Corporation

ADVOCATES & SOLICITORS • COMMISSIONER FOR OATHS

133 New Bridge Road #10-03 Chinatown Point Singapore 059413 Telephone (65) 6536 9339, (65) 6253 1812, Fax: (65) 6536 5368 (Litigation) Email: claims@juseq.com.sg Website: www.juseq.com.sg

Our Ref:

JEQ/190947/0919/REV (AN)

Writer's Name:

Micheal Yap

Your Ref:

SHF335H

18 March 2020

MS FIRST CAPITAL INSURANCE LTD

36 Robinson Road #16-01, City House Singapore 068877

Attn: Motor Claims Dept

BY HAND WITHOUT PREJUDICE

SMRT TAXIS PTE LTD

60 Woodlands Industrial Park E4 Singapore 757705

Dear Sirs

BY CERTIFICATE OF POSTING WITHOUT PREJUDICE

PROPERTY DAMAGE CLAIM ARISING FROM ACCIDENT INVOLVING VEHICLES FBM8437D AND SHF335H AT JUNCTION OF BUANGKOK GREEN AND YIO CHU KANG ROAD ON 07 SEPTEMBER 2019.

We act for Mr. Adel Chan ZhiMeng, the owner of motor vehicle no.FBM8437D, in his claim for damages as a result of the above accident.

We are instructed that on the 07 September 2019, the driver of your insured motor vehicle no. SHF335H so negligently drove, managed and controlled the said motor vehicle that he caused or permitted the same to collide into our client's motor vehicle no. .FBM8437D.

The said collision was solely caused by the negligence of the driver of your insured motor vehicle no. SHF335H.

As a result of the said collision, our client has suffered loss and damage which are set out hereunder as follows: -

A Damages

Cost of repair

Rental charges

3,450.00

400.00

CONFIDENTIALITY CAUTION

This message is intended only for the use of the individual or entity to whom it is addressed and contains information that is privileged and confidential. If you, the reader of this message, are not the intended recipient, you should not disseminate, distribute or copy this communication. If you have received this communication in error, please notify us immediately by telephone and return the original message to us at the above address at our expense. Thank you.

John Jamos Jacos S/26

B Disbursements

a. Automobile Inspection Report	\$ 490.00
b.LTA search fee	\$ 7.49

C Cost with GST (at this stage) \$ 749.00

We enclose herewith copies of the following documents in support of our client's claim: -

\$ 5096.49

- a) GIA report with sketch plan lodged by the rider of our clients' vehicle;
- b) LTA Search Result;
- c) Official receipt from Stark Holding Inn Bike Leasing Pte Ltd;
- d) Final repair bill from Revology Bikes Pte Ltd;
- e) Automobile Inspection Report & Invoice from Prudent Adjustors Services;
- f) Sixty (60) colour/ non-colour photographs depicting the damage to our client's motor vehicle no. FBM8437D.

Please note that if you are insured and you wish to claim under your insurance policy, you should immediately pass this letter and all enclosed documents to your insurer.

Please note that you as insurers / owner should send to us an acknowledgement of receipt of this letter within 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against your insured(s) / you without further notice to you.

Please also note that if you have a counterclaim against our clients arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.

Yours faithfully

Enc.

cc client

BIKES AND TEA PTE. LTD.

CO REG NO.: 201912500Z 25 KAKI BUKIT ROAD 4 #01-43

SYNERGY@KB SINGAPORE 417800 CONTACT: 91469264

CUSTOMER : ADEL CHAN ZHIMENG

CONTACT : 92735452

MAKE/MODEL: HONDA CB150R MANUAL

INVOICE NO.

: BT20030001

DATE.

: 5/12/2019

REGN NO

: FBM8437D

S/N	DESCRIPTION			UNIT PRICE	AMOUNT
1 1	DESCRIPTION LUMP SUM REPAIR FBM8437D		1	\$3,450.00	\$3,450.00
		TOTAL :			\$3,450.00
		DEPOSIT :			- 11
		AMOUNT DUE :			\$3,450.00



BIKES AND TEA PTE. LTD.

TERMS & CONDITIONS

All cheque should be made payable to "BIKES AND TEA PTE. LTD."

All cheque received are subjected to clearance

THANK YOU FOR YOUR BUSINESS!

Should you have any enquiries concerning this invoice, please contact us at +65 9146 9264



STARK HOLDINGS INN BIKE LEASING PTE LTD STARK HOLDINGS INN CAR LEASING PTE LTD 149 SHUNLI INDUSTRIAL PARK KAKI BUKIT AVENUE 1 SINGAPORE 416009 HP/NO:92201069

OFFICIAL RECIEPT:

Date: 11_/09/19

Received from:	ADENE CHAN	SHIME	ø		5\$ 400
The Amount of:	tour Hun	oreo	ONLY		
Being Payment of:_	MOTOR 1014E	RENT	tok	IWEEK	¥
AT27 NOTE					

(By:Management)

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

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

ACCIDENT STATEMENT

Date Of Report

09/09/2019 13:00

Date Of Accident

07/09/2019 16:45

Exact Location Of Accident

BUANGKOK GREEN / YIO CHU KANG ROAD

SINGAPORE Country/State of Loss

DETAILS OF OWN VEHICLE

Vehicle Registration Number

FBM8437D

Insured/Policyholder

Name Of Registered Owner

ADEL CHAN ZHIMENG

NRIC No

S9133674Z

Email Address

NOEMAIL

Mobile Phone No

(LOCAL) +65-92735452

Alternative Phone No

OFFICE-92735452

Vehicle Particulars

Manufacturer

HONDA

Model

CB150R MANUAL

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?

NO

If No, Please state action to be taken

THIRD PARTY

Vehicle Category

MOTORCYCLE

Insurance Company

Name of Insurance Company

NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage

THIRD PARTY FIRE AND/OR THEFT

Fleet Policy

NO

Policy Number

5100164131-01 TPFT

Cover Note Number

Driver

ADEVE CHAN ZHIWEI

NRIC No

S9133675H

Date Of Birth

Name of Driver

22/08/1991

Occupation

INDOOR

Date Of Driving Pass

06/12/2018

Driving Experience

0 YEAR AND 9 MONTH

Gender

MALE

(LOCAL) +65-96280095

Mobile Number Fax Number

Contact Number

EMail Address

NOEMAIL

Address

BLK 984D #16-27 BUANGKOK LINK

Postcode

537984

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

SIBLING

Vehicle Registration Number of Driver's Own

Vehicle

2

Insurance Company of Driver's Own Vehicle

1.5

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 this accident?

NO

2

Number of vehicles (including own vehicle)

vernoie)

involved in the accident

YES

Was any body injured in the Accident?
Was any injured conveyed to hospital by

NO

ambulance?

Was any other material or property damaged?

YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

.

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

HOUGANG NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 60 HOUGANG AVE 9, POSTCODE: 538775, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 1800-4890999 - FAX NO: 63128989

Was notice of intended Prosecution given?

NC

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT ATTACHED

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

SHF335H

Vehicle Make/Model/Colour

TOYOTA / PRIUS HYBRID 1.8 CVT

Details Of Properties

Vehicle Category

TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

ADEVE CHAN ZHIWEI

Approximate Age

28

Injuries Sustain

BACK PAIN

Injured person in which vehicle?

FBM8437D

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

Sketch Plan

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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
 - (r) 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
 - (III) 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)

- 9 SEP 2019

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Singapore 415933
Tel: 67416697 Fax: 67492305
REmaik anak basing negations.

Name: NRIC/FIN No.:

Sketch Plan #2

DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT	she Bylangkok Green Road
Re	for 10	
	NITOR KELIN 1	
,		
DECLARATION // We declare the foregoing partic // Policyholder's Signature Oate & Time.	Driver's Signature (If driver is not the policyholder) Date & Time: 9 SEP 2019	23 Kaki Bukit Ave 4 Singapore 415933 Tel: 67416697 Fax: 67492305 Email: vackb@singnet.com.sg Reporting Centre Personnel's Signature Name: NRIC/FIN No:

Individual Statement



No. of Pedestrians Injured: NIL



Police Station Of Origin. Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No. 1800-4890999 1 of 3 Report No. T/20190907/2150

Date/Time Report M 07/09/2019 20:06	lade:	Vide Report No		1	Station Diary No. 151
Informant's Particu	Hare	THE STATE OF STREET	THE PARK	YE TOTAL	a di
Name of Informant. ADEVE CHAN ZHIV	VEI	Address: APT BLK 984D E 537984	BUANGKOK LIN	K #16-27 S	INGAPORE
ID Type / ID No.: NRIC NO / S913367	5H	Contact No. Home/Office: Mobile: 96280095			
Nationality SINGAPORE CITIZE		Email:			
Sex Age: Male 28	Date of Birth: 22/08/1991	Type of Informan Rider	it:		
Race. Chinese		Language: English		stitution / S	chool Name:
Occupation SELF EMPLOYED		Driving Licence In Class. 2B		ate of Expir	у.
Accident:	thers	Drive:	Accident: 07/09/2019	16:45	
Accident: Location: Along Road 1 BUANGKOK GREEN FIO CHU KANG ROA SUANGKOK green towa Weather: Clear	I AD	. No.		Road	Speed Limit:
Accident:	I AD ards yio chu kang	road Road Surface Dry Traffic Control:		Road Traffic Mode Anyor	c Volume
Accident: Location: Along Road 1 BUANGKOK GREEN YIO CHU KANG ROA buangkok green towa Weather: Clear Traffic Flow: Type of Collision. Between Moving Veh	I AD ards yio chu kang icles - Head To R	road Road Surface Dry Traffic Control:	. 07/09/2019	Road Traffic Mode Anyor ambu No	c Volume rate ne conveyed by lance
Accident: Location: Along Road 1 BUANGKOK GREEN FOR CHU KANG ROAD	I AD ards yio chu kang icles - Head To R volved Make	road Road Surface Dry Traffic Control:		Road Traffic Mode Anyor ambu No	c Volume rate ne conveyed by lance No of Passenge
Accident: Location: Along Road 1 BUANGKOK GREEN YIO CHU KANG ROA Duangkok green towa Weather: Clear Traffic Flow: Type of Collision. Between Moving Veh	I AD ards yio chu kang icles - Head To R volved Make	road Road Surface Dry Traffic Control: Rear	. 07/09/2019	Road Traffic Mode Anyor ambu No	c Volume rate ne conveyed by lance No of Passenge 0

Use of Pedestrian Crossing, NA

Individual Statement





Police Station Of Origin. Hougang N.P.C

Report No. 1/20190907/2150

2 of 3

60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

CONTINUATION OF REPORT

Name	ADEVE CHAN ZHIWEI FBM8437D (Motorcycle) CENTRAL 24HR CLINIC (HOUGANG)		ID No.	Class 2B Date of Expiry: NIL	
Related Vehicle			Contact No.		
Hospital/Clinic			Class of Driving Licence & Expiry Date		
Date Treatment	07/09/2019	Date Dis		9/2019	
No. of Days gran	ted Medical Leave 03	Degree	of Injury NIL		
Driver	\$14条48.00 PRO 100 THAN	Should be the	美有条款的第 位		
Name	Chan Hiang Khui		ID No	S1164728F	
Related Vehicle	SHF335H (Taxi)	Marie Marie Carlos	Contact No.	83210561	
Hospital/Clinic	NIL	And the second s	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry NIL	
Date Treatment		Date Dis	scharge NIL		
No. of Days gran	ted Medical Leave NIL	Degree	of Injury NIL		

On 07/09/2019 at about 1645hrs, I was riding my motorcycle bearing FBM8437D along Buangkok Green on the extreme left lane. While I was at the filter lane to make a left turn on to yio chu kang road. I slowed down as there was on going traffic. Suddenly, I felt an impact on the rear of my motorcycle. I got off my motorcycle and discovered that the taxi bearing SHF335H that was driving behind me collided onto me No one was injured at the point of time. No police or ambulance attended. Due to the collision, the rear headlight of my motorcycle was seriously dented in. After exchanging particulars, I left.

After the accident, I felt pain at my back area as such I went to central 24hr clinic (Hougang) and was issued a 3 days MC from 07/09/2019 to 09/09/2019 MC no: 0000436207.

I am lodging this report for insurance claims.

Individual Statement





Police Station Of Origin Hougang N P C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

Report No. 1/2/019/09/07/2150

CONTINUATION OF REPORT

Sk	etch	P	an

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: F / Sgt 2 LEE JIA YI	Signature Of Informant
Signature Of Interpreter: Not applicable	Date/Time: 07/09/2019 20:06
Officer In Charge Of Case: TP / AEIT / SSI 2 YEO GEAK ENG CECILIA Contact No 65476404	Classification Of Case:
Authentication Stamp	Nan



Tan Mei Ling has successfully logged out.

Your last login date and time was 09 Sep 2019, 16:11:58.

To return to ONE.MOTORING, please click here

For security reasons, please CLEAR YOUR CACHE after each session.

Session Transaction History

S/No.1=	Asset Type \$	Asset ID‡	Asset Owner ID	Transaction Type:	Transaction Amount(S\$)	Log Date/Time:
1	Vehicle	SHF335H	*	18.19 Enquire Veh Owner Info (Others) by Law Firm	7.49	09 Sep 2019 / 16:13:06

Enquire Vehicle & Owner Information (Vehicle No. SHF335H As At 07 Sep 2019 / 16:45:00)

Law Firm Search Details

Search Reason:

Insurance claim in relation to traffic accident

Law Firm Case No.:

JEQ/FBM8437D/REV/PI

Current Owner Details

Owner ID Type:

Company

Owner ID:

198905369K

Owner Name:

SMRT TAXIS PTE. LTD.

Registered Address Type: Private Residential (Condo Apt or House) / Shopping / Office Complexes

Registered Block/House

No.:

Registered Street Name: WOODLANDS INDUSTRIAL PARK E4

Registered Unit No.:

Registered Building Name:-

Registered Postal Code: 757705

Current Vehicle Details

Vehicle No.:

SHF335H

Make Description/Model: TOYOTA / PRIUS HYBRID 1.8 CVT

Insurance Company Name: MS FIRST CAPITAL INSURANCE LIMITED

PRUDENT ADJUSTORS SERVICES

BLOCK 607 ELIAS ROAD #05-192 SINGAPORE 510607 BUSINESS REGN. No. 53193457L Hp 96699986

VEHICLE DAMAGE INSPECTION REPORT

Mr.

Adel Chan Zhimeng

Apt Blk 984D Buangkok Link #16-27

Singapore 537984

Our Ref

: PA/FBM8437/0919/tpw

Date

: 05 December 2019

REFERENCES

Claim Type Vehicle No.

Make

Model

Front

Rear

Reg. Date

: Third Party

: FBM 8437 D

: Honda

: CB150R Manual

: 23 April 2018 : Black/Silver

Color

: 270km Odometer

Date of Accident

Date of Assignment

Date of Inspection Date of Re-inspn

Chassis No

Engine No

: 07 September 2019

: 11 September 2019

: 11 September 2019 : 13th & 16th September 2019

: MLHKC288XJ5013829

: Block

TYRE CONDITION

Make

Dunlop

Dunlop

Size 110/70-17 150/60-17 Thread Balance

6mm 8mm

GENERAL DESCRIPTION OF DAMAGE (PHOTOGRAPHS ATTACHED)

The vehicle sustained damage at rear portion.

Please refer to photographs and assessment of repairs for details

Enclosed (60) photographs depicting damages and after repaired

INSPECTION AND ADJUSTMENT

Original Quotation

: \$4,170.40

Revised Assessment

\$3,450.00 Lump sum

Survey conducted at: Revology Bikes Pte Ltd

In accordance to your instruction, we have not authorized repairs.

In normal circumstances, repairs to the vehicle would take approximately Five (5) days to complete.

This survey was conducted on a "WITHOUT PREJUDICE" basis.

The workshop has agreed to undertake the repair on a lump sum basis, and or the use of ex-stock Reconditioned parts whichever is possible

PRUDENT ADJUSTORS SERVICES

BLOCK 607 ELIAS ROAD # 05-192 SINGAPORE (510607) BUSINESS REGN. No. 53193457L Hp 96699986

INVOICE

Mr.

Adel Chan Zhimeng

Apt Blk 984D Buangkok Link #16-27

Singapore 537984

Invoice No

: PA/19120003/tpw

Our Ref

: PA/FBM8437/0919/tpw

Date

: 05 December 2019

Claim '	Гуре	Third Party	Date of Accident	: 07 September 2019
Vehicle	e No.	FBM 8437 D	Date of Inspection	: 11 September 2019
N	15			
No		scription		Amount (S\$)
1	1	rvey fees inclusive of		\$490.00
		ansportation and		
	Pho	otographs (60) copies		
			Total	\$490.00
	Sin	gapore Dollar: Four Hundr	red And Ninety Only	
All pay	ments n	nade payable to : Prudent A	Adjustors Services	

Prudent Adjustors Services

PRUDENT ADJUSTORS SERVICES

Vehicle No: FBM 8437 D

Our Ref: PA/FBM8437/0919/tpw

ADJUSTMENT ON REPAIR COST AND REPLACEMENT OF PARTS

				Original	Revised
S/N	Description Material	Qty	Condition	Quotation	Quotation
1	Rear mudguard	1 pc	Deformed	185.00	185.00
2	Rear rim	1 pc	Warped	750.00	750.00
3	Rear brake disc	1 pc	Warped	380.50	380.50
4	Swing arm assy	1 pc	Dented	850.90	850.90
5	Rear shock absorber	1 pc	Bent	504.00	504.00
				2,670.40	2,670.40
	Add special nett item				
6	Rear wheel bearing	1 pc	Necessary	120.00	80.00
7	Swing arm bushes	1 set	Necessary	180.00	150.00
8	Shock absorber rubber mounting	2 pcs	Necessary	250.00	200.00
				550.00	430.00
	Labour Charges				
	Body chassis repair & alignment			450.00	350.00
	Labour to renew damaged parts			500.00	400.00
				950.00	750.00
	Total parts & labour concluded			4,170.40	3,850.40
		00/ 1	4 0 2 20		
	Lump sum repair adjustment (less 10	0% due to 1	no used parts)		3,450.00

The information contained in this document is privileged and confidential and is intended for the exclusive use of the addressee designation. If you are not the addressee; any enclosure, reproduction, distribution or other dissemination or use of this communication is strictly prohibited. If you have received this document not meant for you, please contact us immediately to arrange for it to return.

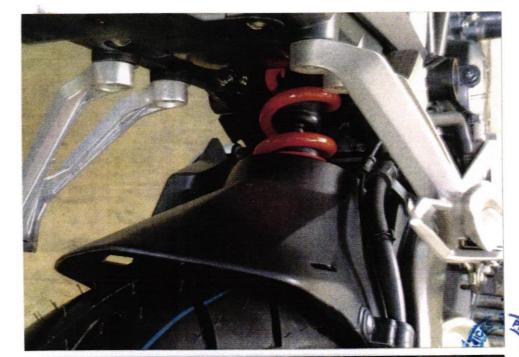
Prudent Adjustors Services Bok Jee Tan

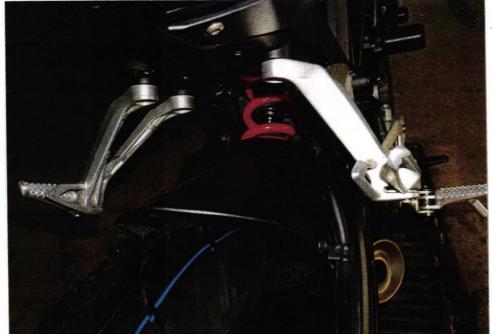
> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	AND THE PROPERTY OF THE PROPER	
Owner ID Type:	Singapore NRIC	
Owner ID: Vehicle Details	674Z	
Vehicle No.:	FBM8437D	
Vehicle to be Exported:	Yes	
Intended Deregistration Date:	11 Sep 2019	
Vehicle Make:	HONDA	
Vehicle Model:	CB150R MANUAL	
Primary Colour:	Black	
Secondary Colour:	Silver	
Manufacturing Year:	2018	
Engine No.:	KC32E0013829	
Chassis No.:	MLHKC288XJ5013829	
Maximum Power Output:	-	
Open Market Value:	\$3,530.00	
Original Registration Date:	23 Apr 2018	
First Registration Date:	23 Apr 2018	
Transfer Count:	1	
Actual ARF Paid: Intended PARF Rebate Details	\$530.00	
PARF Eligibility:	No	
PARF Eligibility Expiry Date:	-	
PARF Rebate Amount: Intended COE Rebate Details	\$0.00	
COE Expiry Date:	22 Apr 2028	
COE Category:	D - Motorcycle	
COE Period(Years):	10	
QP Paid:	\$6,552.00	
COE Rebate Amount:	\$5,241.00	
Total Rebate Amount:	\$5,241.00	

The information contained herein is correct as at $11 \, \text{Sep } 2019$





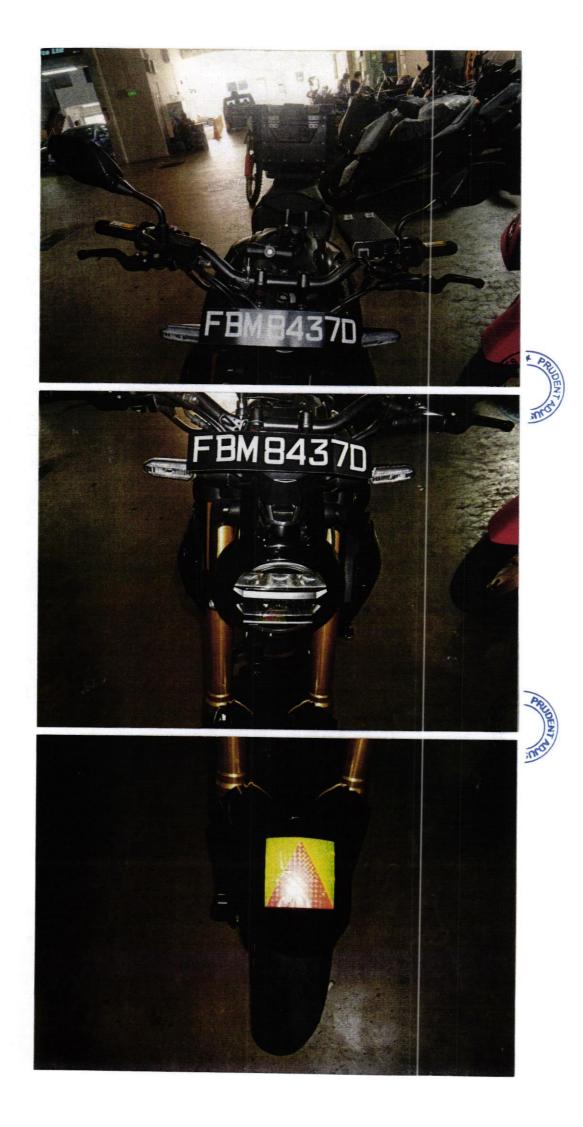


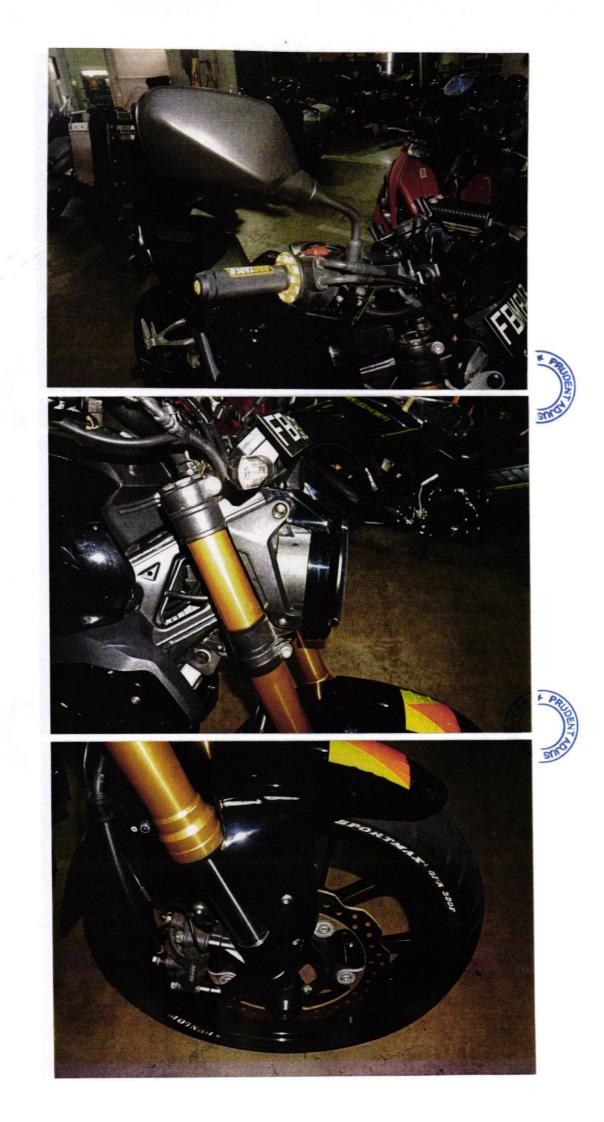


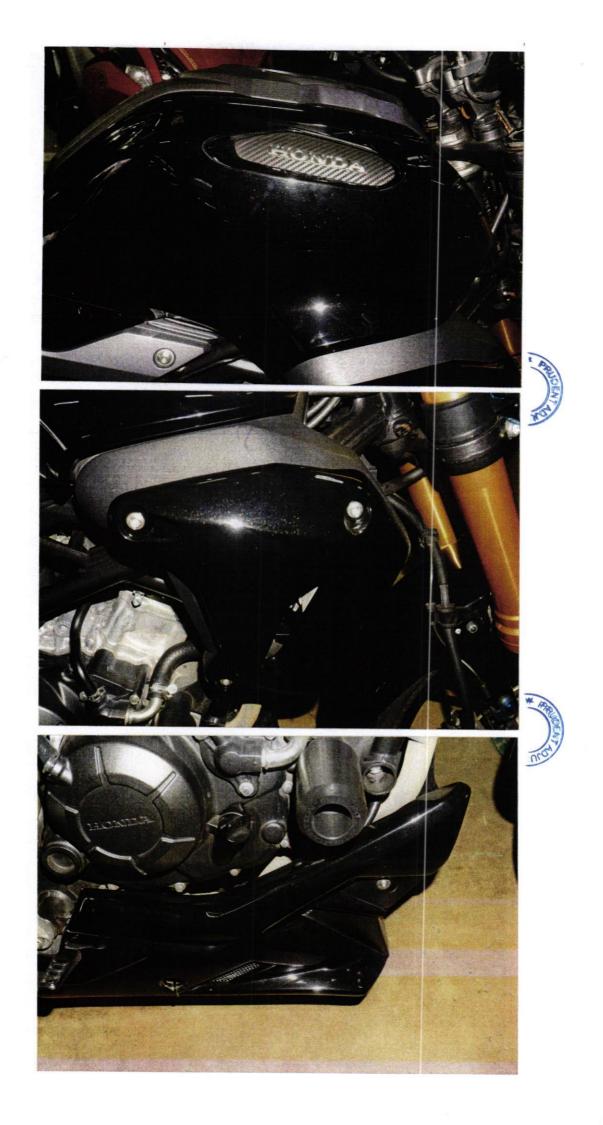




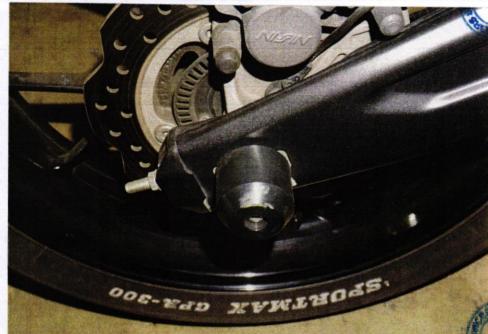


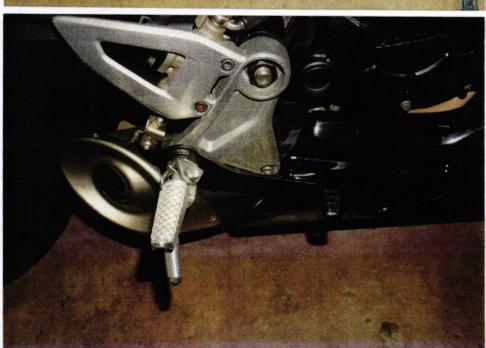




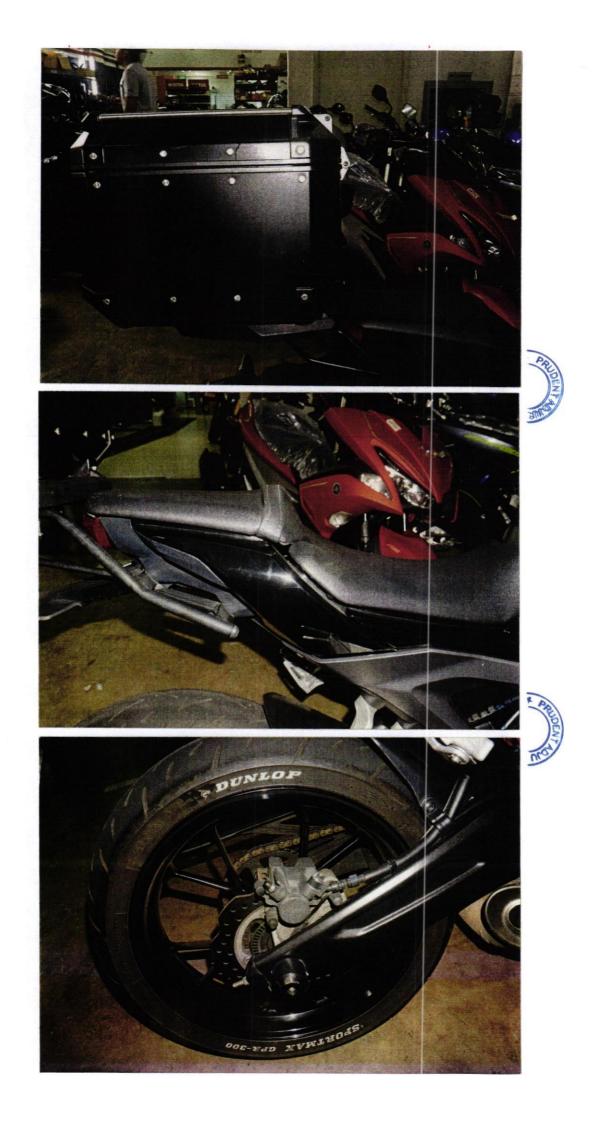




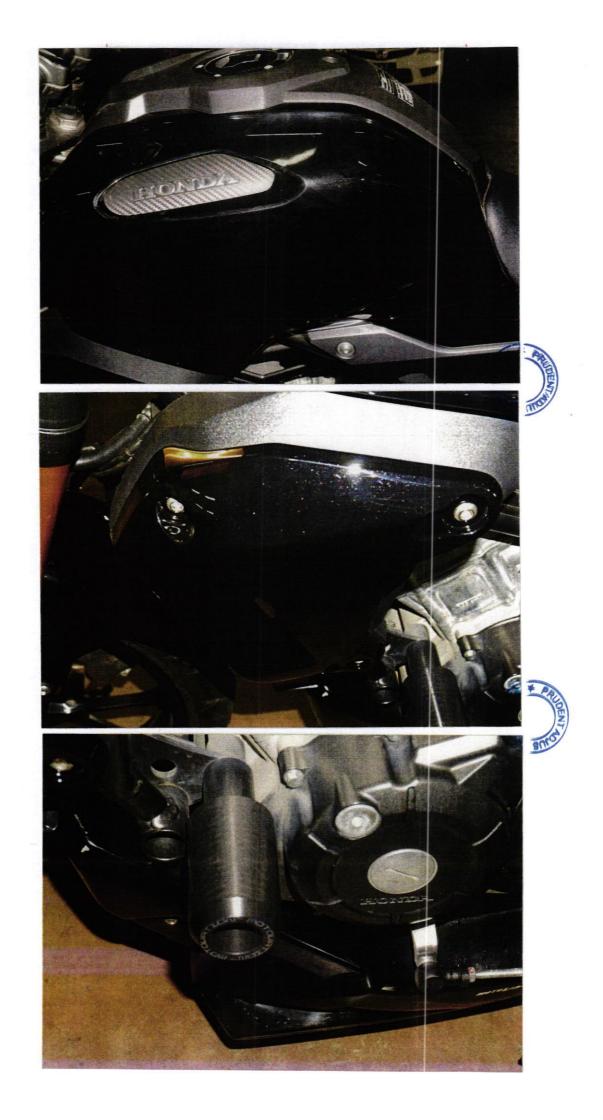














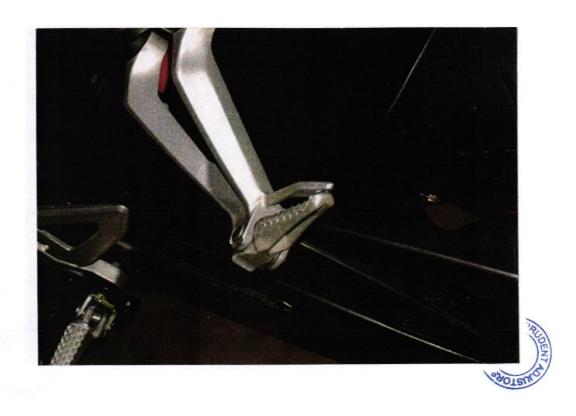








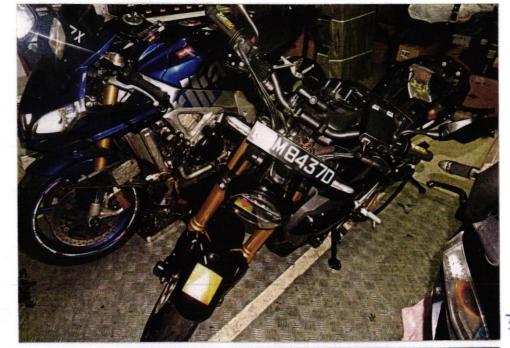






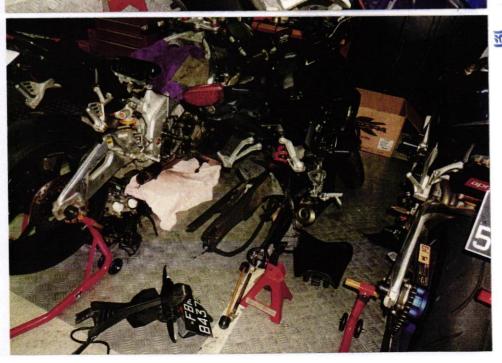
















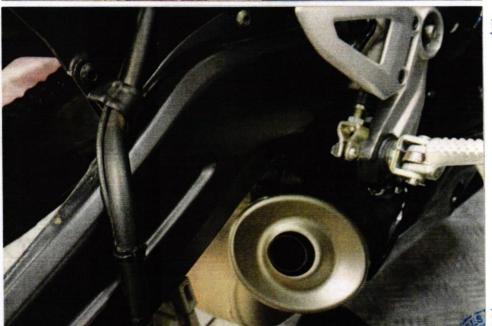




















Re-Survey





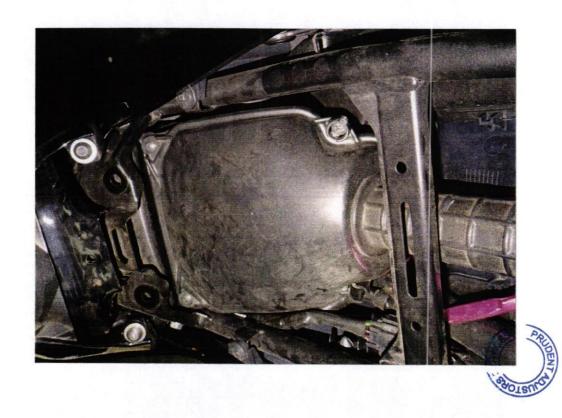




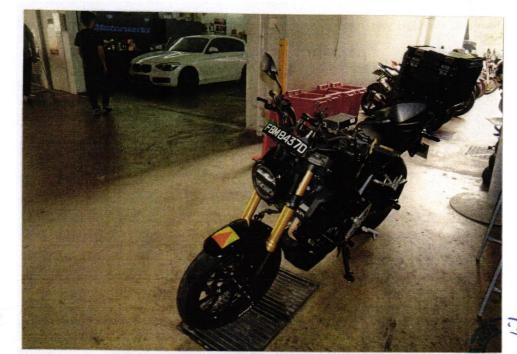
Re-Survey













Re-Survey after repair









