Date In: 10001000	Jeb description	11	Date & Time Complete	d D	one pi.
1000 1000 1000					
Rei No: 1 198 1914 2100 1144	SAS e-filing			+	
Veh No: 8627604	E-mail (within Shrs,				
D.O.A: 15/07/2021	i-Motor Claim F				
OD : TP ! Reporting Only	I-Motor W/O (Wi		P 4hrs)		
OD . (1) / Repeting and	i-Photo Uploade			-	
	Assessment/Surve				
TP Insurer:	Ass't Report by F	ax / Hand to	Owner/Wksp	-	
Preferred Wksp / INC Assign Wksp / QW: (			Tol:	Fax:	
TP Particulars: Veh No: GIG	7 92567	. INC(	)/Non-INC(	). <u>·</u>	1
Owner / Driver: (	+ 7 - 0		Tel:		)
Policy No: ( Peri	od: (		Cover Type: (		)
Confirmed by : (	1	Date:		30-100%]	
			%; P: 21-79%. P:	22 23279	
I car of reegindadora (	Turion, Tara	)/NO(			
Excess: (\$ ) Loading: \$1,00	00()/\$2,000(	) 	NEW COLORS OF THE PARTY OF THE		
seneral Remarks	CONTROL CONTROL	dential & Str	ctly NO refer of rep	elrer.	
Seneral Remarks: ( ) Walk-In Customer : Customer's infor	mation strictly Conin		7 11 11 11	,	
( ) Total Loss Case : to e-mail Insure		): To	wing Co: (		• )
Drive-In ( ) / Towed-In ( ); Invoice	: YES( )/ NO			WARY TO Y	Done by · ·
(emarks: * (INC hotline, 6788 6616)			Dates: ime your	1943	-
1) Apply for Transfort Allowance ( )/C	Courtesy Car ( )		-		
2) QC Check / Post Repair Inspection	( )	<del></del>	· · · · · ·		
3) Upload Resurvey Photo [Repair Cost > \$3	( )	<del></del>	<u> </u>		
Injurý:					
	1				15.77 (1.50mm) 10. 100. 100.
					er ner ver
				(1000/15P	CONTRACTOR STATE
					indrag.
	•				grander van en en Grander
					Coccession
Date/Time Actions					Ant(S) Ant(S)
	, 13	500 M. S. 244 C. W. S. S. S. S.	paration Ghecklis		Aut (5) Amt (1)
MANOZIONS		1) AR: Accider 2) DA: Damage	t Reporting (530); Assessment (5100);	INC (\$30)	Amt(S) Amt(S)
Actions:  Actions:  MANOSAL  Jamanus Particulars:	,	1) AR: Accider 2) DA: Damag 3) TF: Towing	t Reporting (\$30); Assessment (\$100); Fee	INC (\$30) \$40/\$45 \$120	Ant (S) Amt (S)
Actions:  Actions:  MANOSAL  Jamanus Particulars:	,	1) AR: Accider 2) DA: Damag 3) TF: Towing 4) FT: Follow-	t Reporting (330); Assessment (\$100); Fee Chrough Survey Resurvey	INC (\$30) \$40/\$45 \$120	Ant (5) Ant (5)
Date/Tume Actions:  MANUSCO  Itumant's Particulars:	,	1) AR: Accider 2) DA: Damag 3) TF: Towing 4) FT: Follow- 5) FT: Follow- For claiming 6) TR: Re-inst	t Reporting (330); Assessment (5100); Fee Through Survey Through Survey (Resurve; against INC Only (Wef 10 cotion	INC (\$30) \$40/\$45 \$120 () \$30 Jon 2005) \$75	Amt(3) Amt(3)
Dark/Time Actions  Line and a Particulars action of the contact No:	,	1) AR: Accider 2) DA: Darneg 3) TF: Towing 4) FT: Follow 5) FT: Follow For claiming 6) TR: Re-insp	t Reporting (330);  Assessment (\$100);  Fee  Through Survey Through Survey (Resurve;  against INC Only (wef 10 cotion  + SMRT Survey	INC (\$30) \$40/\$45 \$120	Ant (S) Ant (S) Add Bil
Dark/Time Actions  Line and a Particulars action of the contact No:	,	1) AR: Accider 2) DA: Darnsg 3) TF: Towing 4) FT: Follow 5) FT: Follow For cleimins 6) TR: Re-insp 7) N1: Idao D 8) NTUC Addi	t Reporting (330);  Assessment (\$100);  Fee  Through Survey Through Survey (Resurve)  against INC Only (wef 10 cotion  + SMRT Survey  lional Services:-	INC (\$30) \$40/\$45 \$120 \$) \$30 Jan 2005) \$75 . \$160	Amr (5) Amr (1)
Particulars:  river/Owner:  ontact No:  amaged Portion:	,	1) AR: Accider 2) DA: Darrage 3) TF: Towing 4) FT: Follow- 5) FT: Follow- For cleiming 6) TR: Re-insp 7) N1: Idao DA 8) NTUC Addi OD* *N5: Courte	t Reporting (330);  t Assessment (\$100);  Fee  Through Survey Through Survey (Resurve)  steinst INC Only (wef 10  cotion  + SMRT Survey  tional Services:-  sy Cor/Tpt Allowance Co-ordination	INC (\$30)  \$40/\$45  \$120  \$30  Jon 2005)  \$775  \$5160	
Date/Time Actions  MANOSA  Enumant's Particulars  river/Owner:  ontact No:		1) AR: Accider 2) DA: Darrag 3) TF: Towing 4) FT: Follow 5) FT: Follow For claiming 6) TR: Re-insp 7) N1: Idao D 8) NTUC Addi OD: *N5: Courte *N6: Repair	t Reporting (330); Assessment (5100); Fee Through Survey Through Survey (Resurve) against INC Only (wef 10 cotion A + SMRT Survey lional Services:  sy Car / Tpt Allowance Co-ordination coair Inspection	INC (\$30)  \$40/\$45  \$120  \$30  Jan 2005)  \$75  . \$160  \$55  \$10  \$25	
Date/Time: Actions.  Actions.  Liumant's Particulars.  Priver/Owner:  Contact No:  Camaged Portion:		1) AR: Accider 2) DA: Darrag 3) TF: Towing 4) FT: Follow 5) FT: Follow For claiming 6) TR: Re-insp 7) N1: Idao D 8) NTUC Addi OD: *N5: Courte *N6: Repair *N6: Repair	t Reporting (330);  Assessment (5100);  Fee  Through Survey Through Survey (Resurve)  steinst INC Only (wef 10  cotion  4 + SMRT Survey  tional Services:-  sy Cer / Tpt Allowanue  Co-ordination  epair Inspection  collect Excess Coordinatio  TP (N-10 INC) against INC	INC (\$30)  \$40/\$45  \$120  \$30  Jan 2005)  \$775  . \$160  \$55  \$510  \$525	



# 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 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 aforesaid.

### **ACCIDENT STATEMENT**

Date of Submission 16/07/2021 12:08 (SGT) Date of Accident 15/07/2021 17:45 (SGT) Exact Location of Accident AYE, Singapore Additional Location Information **TOWARDS CLEMENTI AVENUE 6** Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number **SLG2760Y** 

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner YEO SOO HUAT NRIC No SXXXX880C **Email Address** yeolawrence@yahoo.com Mobile Phone No (Phone) +65-97236118 Alternative Phone No +65-97236118

#### VEHICLE PARTICULARS

Manufacturer Mitsubishi Model Attrage Variant Exact purpose for which vehicle was being used at time of Private use Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Private car Transmission Auto CC 1193

#### **INSURANCE COMPANY**

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number .... 2100483452-04 Cover Note Number

#### DRIVER

Name of Driver YEO SOO HUAT NRIC No SXXXX880C

Date Of Birth Occupation Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address complement Postcode	04/10/1953 Indoor 16/08/1978 42 YEARS AND 11 MONTHS Male (Phone) +65-97236118 +65-97236118 yeolawrence@yahoo.com 548 YIO CHU KANG ROAD #03-02 THOMSON GROVE 787070
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver	- No
Insurance Company of Other Vehicle Owned by Driver	-
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident	Collision - Head to Rear
Weather Conditions Road Surface	Clear
Road Surface	Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?  Number of vehicles involved in the accident  Was anybody injured in the Accident?  Was any injured conveyed to hospital by ambulance?  Was any other vehicle or property damaged?  Number of Passengers (Including Driver)  Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No 2 Yes No Yes 1
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given? If yes, against whom?	Yes Ang Mo Kio South Neighbourhood Police Centre (Phone) +65-18004519999 (Fax) +65-65535679 81 Ang Mo Kio Ave 3 Singapore 569929 No
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO SKETCH PLAN AND POLICE REPORT T/2	20210716/2018
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?	Yes No No
DETAILS OF OTHE	R VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category	GBG9256J 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)	-
manage (moderning billyol)	

# INJURED PERSONS DETAILS

### INJURED 1

Name of injured person Address	YEO SOO HUAT
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	NECK PAIN
Injured person in which vehicle?	SLG2760Y
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 <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>.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' 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	e / Date & Driver's Sign	nature (If driver is not the polic	yholder) / Date Win	1600/2021 essed by Reporting Centre
Sketch Plan	AVE 700	AROS CHIMMIN	1 Albaneur 6	
A			3 4B	G 27604 G 9256J
3				

## Describe Circumstances of the Accident

ON 15/07/2021 I WAS DRIVING ALONG AYE
ON 15/07/2021 I WAS DRIVING ALONG AGE. AS I WAS DRIVING IN MY LANE TOWARDS CLEMENTI AVE 6
WHEN THE FRONT VEHICLES SLOWED DOWN I FOLLOW SNIT.
SUPPENLY VEHICLE B COLLIDED INTO MY VEHICLE.
TOPPENELS VEHICLE B COLLINED TO TO THE VEHICLE.
R1166 01.0000 d21-011 to 10
Polick Report 1/202/07/16/2018
/

## Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Personnel

## SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 15-Jul-2021

ACCIDENT TIME: 1745hrs

LOCATION: AYE TOWARDS CLEMENTI AVE 6

VEHICLE NUMBER: SLG2760Y
INSURED NAME: YEO SOO HUAT

NRIC / FIN: S0225880C

CONTACT: 97236118

MAKE: MITSUBISHI

MODEL: ATTRAGE 1.2 CVT

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

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

INSURANCE COMPANY: AIG

TYPE OF POLICY: Comprehensive

POLICY NUMBER: 2100483452-04

EXPIRY DATE: 26-Sep-2021

NAME DRIVER: YEO SOO HUAT

NRIC / FIN: S0225880C

CONTACT: 97236118

DATE OF BIRTH: 04-Oct-1953

DRIVING PASS DATE: 16-Aug-1978

OCCUPATION: Indoor

GENDER: Male

EMAIL ADDRESS: yeolawrence@yahoo.com

ADDRESS OF DRIVER: 584 YIO CHU KANG ROAD #03-02 THOMSON GROVE SINGAPORE 787070

Relationship Of The Driver With The Insured:

Owner

Number Of Passenger Include Driver:

1 Driver

NAME

NRIC/FIN/BC

**GENDER** 

**INJURED** 

YEO SOO HUAT

S0225880C

Male

1

INJURY DETAILS: 1 Driver, 0 Passenger(s)

Insurance Company Of Driver's Own Vehicle:

Weather Conditions: Clear

r Road Surface: Dry

Was Any Foreign Vehicle Involved In This Accident?

No

Convey By Ambulance:

No

Was There Any Video Capture By Car Camera?

No

Was There Accident Reported To The Police?

Yes Police Report Number:

T/20210716/2018

Details Of 3rd Party

Name

NRIC

Contact

No.of Paxs(incl' driver)

Veh B GBG9256J

Not Sure





Report No. T/20210715/2018

Police Station Of Origin Ang Mo Kio South N.P.C and Mo Kio Avenue 3 SINGAPORE 569929

Tel No: 1800-4519999

REPORT OF A TRAFFIC ACCIDENT Vide Report No.: Station Diary No. 31

Date/Time Report Made: 16/07/2021 08:45 Address: BLK 584 YIO CHU KANG ROAD #03-02 SINGAPORE 787070 Informant's Particulars Name of Informant: YEO SOO HOCK Mobile: 97236118 ID Type / ID No.: NRIC NO / S0225880C Contact No.: Home/Office: Nationality: SINGAPORE CITIZEN Email: Type of Informant: Institution / School Name; Date of Birth: Age: Sex: 04/10/1953 67 Driver Male Language: Race: Driving Licence Information: Date of Expiry: Chinese Occupation: Safety Officer Class:

I Infort	nation of the Acciden	t	Date/Time of	Type of Location: Straight Road
Type of	Injury Others	Drink Drive: No	Accident: 15/07/2021 17:40	
Accident:		No	15/0/12021 111	

AYER RAJAH EXPRESSWAY

	Road Surface:	Road Speed Limit:	
Weather:	Dry	Traffic Volume:	
Clear Flow:	Traffic Control:	Heavy	
Traffic Flow: One Way	Not Controlled	Anyone conveyed by	
Type of Collision: Between Moving Vehicles	- Head To Rear	ambulance: No	

Details of V	ehicle Invo	ved	Model	Color	Condition	No of Passenge
Vehicle No.	Туре	Make	IVIOGEI		Seriously	
GBG9256J	Van				Damaged	12
BERT SOL		- WEST INICHI	ATTRAGE	Blue	Seriously	0
SLG2760Y	Car	MITSUBISHI	1.2 CVT	Dias	Damaged	

Details of V	ehicle Insurance	Insurance No	Effective	Expiry Date
Vehicle No.	Insurance Company		27/09/2020	26/09/202
SLG2760Y	AIG ASIA PACIFIC INSURANCE PTE.	210010010201		



police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929 Tel No: 1800-4519999

Report No. T/20210716/2018

CONTINUATION OF REPORT

No. of Pedestria	na injured: NIL		Use of Pedestrian Crossing: NA			
Name	Naim Bin Othman			ID No.		6912584J
Related Vehicle	GBG9256J (Van)			Contact I	No. 8	8159902
Hospital/Clinic				Class of Driving Licence Expiry D	8 1	Class: NIL Date of Expiry: NIL
Date Treatment			Date Disc	harge 1	VIL	
	ted Medical Leave	NIL	Degree of	Injury 1	VIL_	
Driver Name	YEO SOO HOCK			ID No.		S0225880C
Related Vehicle	SLG2760Y (Car)			Contact No.		97236118
Hospital/Clinic	Unihealth 24hrs Clinic (Toa Payoh)			Class of Driving Licence Expiry	e & Date	Class: NIL Date of Expiry: NIL
ate Treatment	15/07/2021		Date Dis	charge		7/2021
o of Days grant	ed Medical Leave	05	Degree (	of Injury	Sligh	nt.

## Brief Details.

On the above mention date, time and place, I was driving along AYE towards Clementi Ave 6 exit. As the road was congested, as such I slowed down my car. In front of my vehicle there is an distance.

Out of sudden, I saw a oncoming van going on a very high speed. Before I can do anything, the van hit onto the rear of my vehicle.

Although no police or ambulance attended to my scene, I felt pain at the neck after the accident and I went to seek medical treatment on my own and was given 5 days MC



Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929 Tel No: 1800-4519999



1/20210/16/2016

3 of 3 Report No. T/20210716/2018

CONTINUATION OF REPORT

		4 May .	1
	250		uan
-	-		lan

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 <u>report number</u> as reference.

Signature Of Officer Recording The Report: F / SI TAN THIAM HUAT	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 16/07/2021 08:45
Officer In Charge Of Case: TP / AEIT / SSI TAY CHUN KEEN Contact No.: 65476436	Classification Of Case:
Authentication Stamp NP168 Signature Signature	



## CERTIFICATE OF INSURANCE

## CYCLE & CARRIAGE AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder

: Yeo Soo Hock

Period of Insurance

: 27 Sep 2020 To 26 Sep 2021

Engine No.

: 3A92UDH3322

Chassis No.

: MMBSTA13AHH001666

Vehicle No.

: SLG2760Y

Policy No.

: 2100483452-04

Endorsement No.

**Issued Date** 

: 14 Sep 2020

#### ABOUT THE COVER

Make/Model

: MITSUBISHI ATTRAGE 1.2 CVT

Engine Capacity/Tonnage: 1,193.00 CC

Sum Insured : Market Value

First Year of Registration : 2016

Driver Restriction

: NA

Off Peak Car : No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\*:

b) Any other person who is driving on the Policyholder's order or with his/her permission.
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less

Age Condition

: All Age Condition

Mileage Condition

: Unlimited Mileage

Limitation as to use\* :

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

Loss of Use 1500cc - 1600cc

\* Limitations rendered inoperative by Section 6 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Mataysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

#### **EXCESS**

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

Section 2

Property Damage - 50

Windscreen: \$100

Named Driver and Excess (where applicable)

Yeo Soo Hock - \$600 (Own Damage), \$600 (Flood Cover)

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

Cycle & Carriage Body & Paint Centre Add: 209 Pondan Gardens Singapore 609339 65684501

2 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000
3 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 20 Leng Kee Rd Singapore 159094 64708688
4 Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 575733 69328000

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

## IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: DBS BANK LTD

EVic hierary certify that the policy to which this Centificate of Insurance refales is seased in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 183). Part is of gitte Road Transport Act. 1987 (Malaysia). Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules. 1959 (Malaysia).

CYCLE & CARRIAGE - SAGLEE

239 ALEXANDRA ROAD

SINGAPORE 159930

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

# > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID: Vehicle Details	880C
Vehicle No.:	SLG2760Y
Vehicle to be Exported:	Yes
Intended Deregistration Date:	16 Jul 2021
Vehicle Make:	MITSUBISHI
Vehicle Model:	ATTRAGE 1.2 CVT
Primary Colour:	Blue
Manufacturing Year:	2016
Engine No.:	3A92UDH3322
Chassis No.:	MMBSTA13AHH001666
Maximum Power Output:	57.0 kW (76 bhp)
Open Market Value:	\$14,569.00
Original Registration Date:	27 Sep 2016
First Registration Date:	27 Sep 2016
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$5,000.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	26 Sep 2026
PARF Rebate Amount: Intended COE Rebate Details	\$3,750.00
COE Expiry Date:	26 Sep 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$51,506.00
COE Rebate Amount:	\$26,754.00
Total Rebate Amount:	\$30,504.00

The information contained herein is correct as at 16 Jul 2021