



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

| Vehicle Owner Particulars     |                                      |
|-------------------------------|--------------------------------------|
| Owner ID Type:                | Singapore NRIC                       |
| Owner ID:                     | 885H                                 |
| Vehicle Details               |                                      |
| Vehicle No.:                  | SKW5013D                             |
| Vehicle to be Exported:       | No                                   |
| Intended Deregistration Date: | 17 Feb 2022                          |
| Vehicle Make:                 | VOLKSWAGEN                           |
| Vehicle Model:                | GOLF A7 1.4 TSI AT 5G13GZ SR HID     |
| Primary Colour:               | Black                                |
| Manufacturing Year:           | 2015                                 |
| Engine No.:                   | CXS146651                            |
| Chassis No.:                  | WVWZZZAUZFW356438                    |
| Maximum Power Output:         | 90.0 kW (120 bhp)                    |
| Open Market Value:            | \$22,642.00                          |
| Original Registration Date:   | 30 Oct 2015                          |
| First Registration Date:      | 30 Oct 2015                          |
| Transfer Count:               | 3                                    |
| Actual ARF Paid:              | \$13,699.00                          |
| Intended PARF Rebate Details  |                                      |
| PARF Eligibility:             | Yes                                  |
| PARF Eligibility Expiry Date: | 29 Oct 2025                          |
| PARF Rebate Amount:           | \$8,904.00                           |
| Intended COE Rebate Details   |                                      |
| COE Expiry Date:              | 29 Oct 2025                          |
| COE Category:                 | A - Car up to 1600cc & 97kW (130bhp) |
| COE Period(Years):            | 10                                   |
| QP Paid:                      | \$57,301.00                          |
| COE Rebate Amount:            | \$21,195.00                          |
| Total Rebate Amount:          | \$30,099.00                          |

The information contained herein is correct as at 17 Feb 2022

OK

$$\text{dp: } 12.5k \\ \underline{12}$$

$$= 1042$$

$$3 \text{ yrs } 9/45$$

$$1042 \times 45 = 46890$$

$$46890 + 6849.5 = 53739.5 \\ = 54k$$

$$54k - 30099 = 23901$$

## Golf 1.4A TSI Sunroof Used Vehicle List (4 vehicles)

| Car Model                        | Price    | Depreciation | Reg Date    | Eng Cap  | Mileage   | Company      | Availability |
|----------------------------------|----------|--------------|-------------|----------|-----------|--------------|--------------|
| Volkswagen Golf 1.4A TSI Sunroof | \$45,800 | \$12,800 /yr | 14-May-2015 | 1,395 cc | 90,206 km | LSY Motoring | Available    |

Full Loan At Only Monthly \$1.2k Plus, We Provide Lowest Interest Rate. Loan And High Trade In Are Available. Ex-Bankruptcy Or Bad Credit Can Apply, Grab And Gojek, Fast And Easy Loan Approval! All Our ...

Office No. - -

Adrian - 82999993 | Yap - 83287973 | Claudia Nah - 84981900

|                                      |          |              |             |          |            |                  |           |
|--------------------------------------|----------|--------------|-------------|----------|------------|------------------|-----------|
| Volkswagen Golf 1.4A TSI EQP Sunroof | \$50,000 | \$11,690 /yr | 27-Oct-2015 | 1,395 cc | 115,000 km | Motorist Pte Ltd | Available |
|--------------------------------------|----------|--------------|-------------|----------|------------|------------------|-----------|

Well Maintained Unit, High Loan Available With Lowest Interest Rates. Trade In Welcome. Call/WhatsApp/SMS To Book An Appointment To View This Beauty. Viewing Strictly Appointment Based.

Office No. - 65898800

Yousuff - 92388554 | Eugene Yeo - 93851086

|                                      |          |              |             |          |           |                   |           |
|--------------------------------------|----------|--------------|-------------|----------|-----------|-------------------|-----------|
| Volkswagen Golf 1.4A TSI EQP Sunroof | \$50,999 | \$12,970 /yr | 13-Jul-2015 | 1,395 cc | 43,000 km | Car Buddy Pte Ltd | Available |
|--------------------------------------|----------|--------------|-------------|----------|-----------|-------------------|-----------|

Looking For Value Buy With Current COE Prices? 1 Owner, Low Genuine Mileage Of 6,500Km Done Yearly. Sporty Continental Hatch With Sunroof. Dark Blue With Tanned Brown Leather Upholstery. Keyless Entry...

Office No. - -

Aizat - 92319670 | Shaun Tan - 98226706 | Ron - 93388969

|                                      |          |              |             |          |           |                    |           |
|--------------------------------------|----------|--------------|-------------|----------|-----------|--------------------|-----------|
| Volkswagen Golf 1.4A TSI EQP Sunroof | \$53,888 | \$13,630 /yr | 30-Jul-2015 | 1,395 cc | 79,500 km | Statesman Auto LLP | Available |
|--------------------------------------|----------|--------------|-------------|----------|-----------|--------------------|-----------|

100% Loan Available, Maintain By Reputable Workshop Since Day 1, OCD Owner, Clean Pure White With Rare Volcano Brown Interior, One Of The Best Hatchbacks One Can Own, So Much Of Power With Fun Handling...

Office No. - -

Mustaffa - 81136007 | Dillon - 82984886 | Jeremy Lim - 91908775 | Alnin - 87774422

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# 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              | 29/01/2022 11:15 (SGT)            |
| Date of Accident                | 26/01/2022 21:55 (SGT)            |
| Exact Location of Accident      | Singapore                         |
| Additional Location Information | SERANGOON RD BEFORE WHAMPOA SOUTH |
| Country/State of Loss           | Singapore                         |

## DETAILS OF OWN VEHICLE

|                             |          |
|-----------------------------|----------|
| Vehicle Registration Number | SKW5013D |
|-----------------------------|----------|

### INSURED/POLICYHOLDER

|                          |                       |
|--------------------------|-----------------------|
| Is company?              | No                    |
| Name Of Registered Owner | ANG TECK KANG         |
| NRIC No                  | SXXXX885H             |
| Email Address            | ANGTECKKANG@GMAIL.COM |
| Mobile Phone No          | (Phone) +65-91168096  |
| Alternative Phone No     | (Home) +65-91168096   |

### VEHICLE PARTICULARS

|                                                                              |                           |
|------------------------------------------------------------------------------|---------------------------|
| Manufacturer                                                                 | Volkswagen                |
| Model                                                                        | Golf                      |
| Variant                                                                      | -                         |
| Exact purpose for which vehicle was being used at time of accident           | Private use               |
| Are you claiming under your own insurance policy for repair to your vehicle? | No - Claiming third party |
| Vehicle Category                                                             | Private car               |
| Transmission                                                                 | Auto                      |
| CC                                                                           | 0                         |

### INSURANCE COMPANY

|                           |                                        |
|---------------------------|----------------------------------------|
| Name of Insurance Company | NTUC Income Insurance Co-operative Ltd |
| Type of Coverage          | Comprehensive                          |
| Fleet Policy              | No                                     |
| Policy Number             | 5122049606                             |
| Cover Note Number         | -                                      |

### DRIVER

|                |               |
|----------------|---------------|
| Name of Driver | ANG TECK KANG |
| NRIC No        | SXXXX885H     |

|                                                              |                                 |
|--------------------------------------------------------------|---------------------------------|
| Date Of Birth                                                | 25/11/1989                      |
| Occupation                                                   | Indoor                          |
| Date Of Driving Pass                                         | 06/10/2008                      |
| Driving experience                                           | 13 YEARS AND 3 MONTHS           |
| Gender                                                       | Male                            |
| Mobile Number                                                | (Phone) +65-91168096            |
| Alt. Phone Number                                            | (Home) +65-91168096             |
| Email Address                                                | ANGTECKKANG@GMAIL.COM           |
| Address                                                      | BLK 226 SERANGOON AVE 4 #09-133 |
| Address complement                                           | -                               |
| Postcode                                                     | 550226                          |
| Is the driver the policyholder?                              | Yes                             |
| If No, Relationship of the Driver with the Insured           | -                               |
| Does Driver Own Other Vehicles?                              | No                              |
| Vehicle Registration Number of Other Vehicle Owned by Driver | -                               |
| Insurance Company of Other Vehicle Owned by Driver           | -                               |

#### GENERAL INFORMATION OF THE ACCIDENT

|                    |                               |
|--------------------|-------------------------------|
| Type of Accident   | Collision - Change/cross lane |
| Weather Conditions | Clear                         |
| Road Surface       | Dry                           |

#### OTHER INFORMATION

|                                                                                                     |     |
|-----------------------------------------------------------------------------------------------------|-----|
| Was any foreign vehicle involved in the accident?                                                   | No  |
| Number of vehicles involved in the accident                                                         | 2   |
| Was anybody injured in the Accident?                                                                | Yes |
| Was any injured conveyed to hospital by ambulance?                                                  | No  |
| Was any other vehicle or property damaged?                                                          | Yes |
| Number of Passengers (Including Driver)                                                             | 2   |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No  |

#### PASSENGER 1

|        |                |
|--------|----------------|
| Name   | SEAN LAI JEREN |
| Gender | Male           |

#### DETAILS OF POLICE ACTION

|                                           |                                                                                |
|-------------------------------------------|--------------------------------------------------------------------------------|
| Was the accident reported to the police?  | Yes                                                                            |
| Police Station Name                       | Central Division Headquarters                                                  |
| Police Station Phone No                   | (Phone) +65-18002240000                                                        |
| Alt. Police Station Phone No              | (Fax) +65-62200877                                                             |
| Police Station Address                    | 391 New Bridge Road #03-112 Police Cantonment Complex Block A Singapore 088762 |
| Was notice of intended Prosecution given? | No                                                                             |
| If yes, against whom?                     | -                                                                              |

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO 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 | SHA4669U |
|-----------------------------|----------|

|                                         |      |
|-----------------------------------------|------|
| Vehicle Manufacturer                    | -    |
| Vehicle Model                           | -    |
| Vehicle Variant                         | -    |
| Vehicle Colour                          | -    |
| Vehicle Category                        | Taxi |
| Name of Driver                          | -    |
| Contact Number                          | -    |
| Address                                 | -    |
| Address complement                      | -    |
| Postcode                                | -    |
| Insurance Company Name                  | -    |
| Nature Of Damage                        | -    |
| Details of property damaged in accident | -    |
| No. Of Passenger (Including Driver)     | -    |

## INJURED PERSONS DETAILS

### INJURED 1

|                                                     |   |
|-----------------------------------------------------|---|
| Name of injured person                              | - |
| Gender                                              | - |
| Phone No                                            | - |
| Address                                             | - |
| Address Complement                                  | - |
| Post Code                                           | - |
| Approximate Age Years Old                           | - |
| Injuries Sustained                                  | - |
| Injured person in which vehicle?                    | - |
| Were seat belts worn?                               | - |
| Was this injured conveyed to hospital by ambulance? | - |

## SKETCH PLAN

### IMPORTANT NOTICE

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



Policyholder's Signature / Date & Time

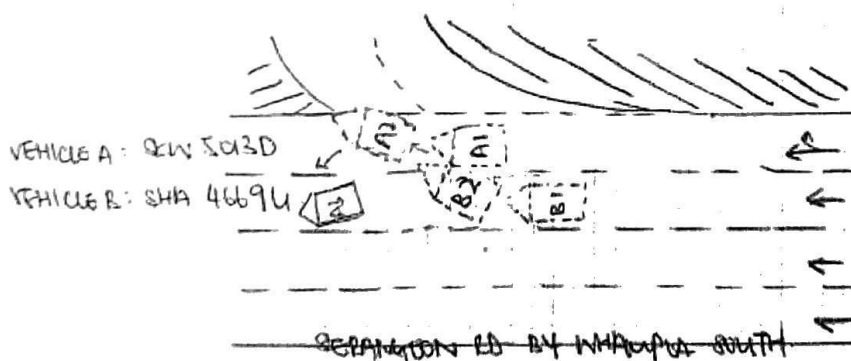


Driver's Signature (If driver is not the policyholder) / Date & Time

SHUYI

Witnessed by Reporting Centre Personnel

Sketch Plan



**Describe Circumstances of the Accident**

Refer to Police Report NO = A/20220128/-619.

### Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &  
Time



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

SHUYI

Witnessed by Reporting Centre  
Personnel

**SINGAPORE  
POLICE FORCE**

A/20220128/7019

3 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20220128/7019

We were discharged in the wee hours the following morning with 3 days MC each for our injuries suffered due to the accident.

|                                                              |                                                                                                                                        |
|--------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| Signature Of Officer Recording The Report:<br>Not applicable | Signature Of Informant:<br>The identity of the person making this report has been authenticated by Singpass. No signature is required. |
| Signature Of Interpreter:<br>Not applicable                  | Date/Time:<br>28/01/2022 13:46                                                                                                         |
| Officer In-Charge Of Case:                                   | Classification Of Case:                                                                                                                |



**SINGAPORE  
POLICE FORCE**



A/20220128/7019

2 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20220128/7019

It was at the point of impact that I realised that SHA4669U had swerved into my vehicle's left portion.

The impact was so huge that my entire vehicle flew to the right and collided with the kerb before my vehicle flipped and landed hard on its roof.

My body bounced around the inside of the vehicle despite being belted and my head hit the roof really hard as the roof of my vehicle was now on the floor.

My vehicle had flipped 180 degrees and the undercarriage was facing the sky.

Sean managed to exit the vehicle whilst I required the assistance of someone outside of my vehicle to leave my vehicle.

After the accident, I immediately felt pain over the top of my head and my neck areas.

Sean also suffered multiple injuries due to the accident.

Ambulance and Traffic Police arrived at scene but at that point in time, I still felt the pain was bearable.

Hence, later the same evening, Sean and I proceeded to Khoo Teck Puat Hospital on our own for treatment.

|                                                              |                                                                                                                                        |
|--------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| Signature Of Officer Recording The Report:<br>Not applicable | Signature Of Informant:<br>The identity of the person making this report has been authenticated by Singpass. No signature is required. |
| Signature Of Interpreter:<br>Not applicable                  | Date/Time:<br>28/01/2022 13:46                                                                                                         |
| Officer In-Charge Of Case:                                   | Classification Of Case:                                                                                                                |



**SINGAPORE  
POLICE FORCE**



A/20220128/7019

1 of 3

**POLICE REPORT (NP299)**

Report No. A/20220128/7019

Police Station Of Origin  
Central Division HQ  
A 391 New Bridge Road #03-112 Police  
Cantonment Complex SINGAPORE 088762  
Tel No 1800-2240000

|                                           |                                                               |                   |
|-------------------------------------------|---------------------------------------------------------------|-------------------|
| Date/Time Report Made<br>28/01/2022 13:46 | Vide Report No.                                               | Station Diary No. |
| Name Of Informant<br>ANG TECK KANG        | Address<br>226 SERANGOON AVENUE 4 #09-133 SINGAPORE<br>550226 |                   |
| ID Type / ID No.<br>NRIC NO / S6942885H   | Contact No.<br>Home/Office: Mobile:<br>91168096               |                   |
| Nationality<br>SINGAPORE CITIZEN          | Email Address<br>ANGTECKKANG@GMAIL.COM                        |                   |
| Occupation<br>Marine Supply               | Sex<br>Male                                                   | Age<br>32         |
| Institution/School Name                   | Date of Birth<br>25/11/1989                                   | Race<br>Chinese   |
| Date/Time Of Incident<br>26/01/2022 21:55 | Location Of Incident<br>SERANGOON ROAD                        |                   |

**Brief details.**

On the stated date and time, I was driving my vehicle SKW5013D along the extreme right lane of Serangoon Road.

Sean Lai was my front passenger and both of us were belted.

Just as I was passing the junction of Whampoa South, a massive impact slammed into the left portion of my vehicle out of the blue.

|                                                              |                                                                                                                                        |
|--------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| Signature Of Officer Recording The Report:<br>Not applicable | Signature Of Informant:<br>The identity of the person making this report has been authenticated by Singpass. No signature is required. |
| Signature Of Interpreter:<br>Not applicable                  | Date/Time:<br>28/01/2022 13:46                                                                                                         |
| Officer In-Charge Of Case:                                   | Classification Of Case:                                                                                                                |