

FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay

Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 200006262D

Date : 25.04.2022

AIG Asia Pacific Insurance Pte Ltd

Chartis Building

78 Shenton Way #07-16

Singapore 079120

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES : SMZ 5348Z / SLG 5850B ON 28.03.2022

We are the authorized repair workshop for the owner of motor vehicle no: **SMZ 5348Z** , which was involved in the captioned accident with your insured vehicle no: **SLG 5850B** . The vehicle owner has requested and authorized us to assist him in presenting his/her claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving, we are submitting these claims for your consideration on behalf of the owner/claimant.

1) Cost of Repair (inclusive of GST)	\$ 19,260.00
2) Loss of Use (13 days + 2 Sunday X \$60)	\$ 900.00
3) GIA Search Fee	\$ 2.00
	<u>\$ 20,162.00</u>

We enclosed herewith the following documents to support the claims:

- | | |
|------------------------------------|----------------------------------|
| a) Final Repair Invoice | b) GIA Search Result |
| c) Letter of Authorisation, etc... | d) GIA Report |
| e) Police Report | f) I/C & Driving Licence |
| g) Insurance Certificate | h) Vehicle Registration Log Card |

Kindly look into the matter and let us hear from you on the settlement of our customer's claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/claimant.

Thank you.

Yours faithfully,



Jason Tang (jason@fastechauto.com.sg)

For FASTECH AUTO PTE LTD

TAX INVOICE

FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay

Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 200006262D

AIG Asia Pacific Insurance Pte Ltd

Chartis Building

78 Shenton Way #07-16

Singapore 079120

Attn : Motor Claim Department

Tax Invoice : 22894

Date : 25.04.2022
Vehicle No : SMZ 5348Z
Make/Model : TOYOTA SIENTA
Chassis/Eng# :
Accident Date : 28.03.2022
Claim No :
Reference : 0322 -22894
Policy No :

	Amount
To proceed on lump sum repair	S\$ 18000.00

E. & O. E.

Total : S\$ 18000.00

GST @ 7% : S\$ 1260.00

Amount Due : **S\$ 19260.00**



for FASTECH AUTO PTE LTD


INSURER ENQUIRY

Find
insurer

Vehicle reg. no.

SLG5850B

Date of Accident

28/03/2022 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance **AIG Asia Pacific Insurance Pte....**Period of Insurance **21/06/2021 - 04/10/2022**Requested By **ALLAN TANG (KIM CHWEE AUT...**Requested Date **28/03/2022 12:29****Payment details**Request Amount: **S\$1.87**GST Amount: **S\$0.13**Total Amount Due (GST Inclusive): **S\$2****General Insurance Association**

Records Management Centre

GST Registration No: **M400017735**



AUTHORIZATION TO ACT
(AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)

I, Guan Transport ("the third party claimant")
of 139 Marsiling Road #07-2040 Singapore 730139 (address),
owner of SMZ 5348Z (vehicle no.) hereby authorize
Fastech Auto Pte Ltd
("the workshop") to act for me with respect to my claim for repair costs and/or
rental and/or loss of use ("claim") for my vehicle no. SMZ 5348Z that was
damaged pursuant to the accident which occurred on 28.03.2022 (date) along
BKE towards City (Before Exit 7) (location)
involving vehicle no/s SIA 5850B ("the accident").

I further authorize the workshop to settle the above mentioned claim in a
manner that they deem fit and the workshop is further authorized to receive
payment further to settlement of my claim with payment cheque/s being made in
favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my
behalf is on a without prejudice and without admission of liability basis insofar
as the driver/owner/insurers of the other vehicle/s is concerned.

Date this 28 day of March (month) 20 22 (year)



Signed by "the third party claimant"



Signed by "the workshop"

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	28/03/2022 16:55 (SGT)
Date of Accident	28/03/2022 07:40 (SGT)
Exact Location of Accident	BKE, Singapore
Additional Location Information	BKE TOWARDS CITY
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMZ5348Z
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	GUAN TRANSPORT
Company Reg No	5XXXX444D
Email Address	SHENGGUANYEO@GMAIL.COM
Mobile Phone No	(Phone) +65-91265827
Alternative Phone No	(Home) +65-91265827

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Sienta
Variant	
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
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	5121905507
Cover Note Number	

DRIVER

Name of Driver	YEO SHENG GUAN
NRIC No	SXXXX872G

Date Of Birth	03/09/1959
Occupation	Outdoor
Date Of Driving Pass	17/08/1977
Driving experience	44 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91265827
Alt. Phone Number	-
Email Address	SHENGGUANYEO@GMAIL.COM
Address	APT BLK 139 MARSILING ROAD #07-2040
Address complement	-
Postcode	730139
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	OWNER
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	5
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)	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	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
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?	Yes
Reasons for not uploading a video of the accident	WITH OWNER
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLG5850B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Private car
Name of Driver	TAN CHEE HEONG
Contact Number	(Phone) +65-91801230
Address	
Address complement	
Postcode	
Insurance Company Name	AIG Asia Pacific Insurance Pte. Ltd.
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SME5070J
Vehicle Manufacturer	
Vehicle Model	
Vehicle Variant	
Vehicle Colour	
Vehicle Category	Private car
Name of Driver	KHAIRUL
Contact Number	(Phone) +65-87868921
Address	
Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SLN808X
Vehicle Manufacturer	
Vehicle Model	
Vehicle Variant	
Vehicle Colour	
Vehicle Category	Private car
Name of Driver	DEREK
Contact Number	(Phone) +65-82008808
Address	
Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	PC1283M
Vehicle Manufacturer	
Vehicle Model	
Vehicle Variant	
Vehicle Colour	
Vehicle Category	Commercial vehicle
Name of Driver	VISWANATHAN BABU
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	YEO SHENG GUAN
Gender	
Phone No	
Address	
Address Complement	
Post Code	
Approximate Age Years Old	
Injuries Sustained	
Injured person in which vehicle?	SMZ5348Z
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
 3. Information provided must be as truthful and accurate as possible. Any 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.



Signature

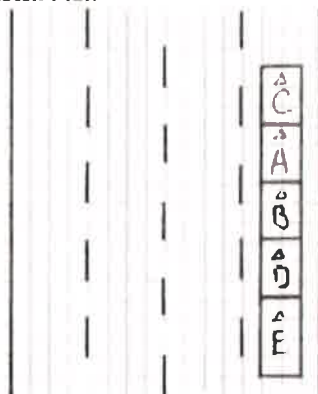
MAC

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



A: SMZ 5348Z
B: SLG 5850B
C: SMC 5070J
D: SLN 808X
E: PC 1283M

Describe Circumstances of the Accident

Refer to the police report (T/20220328/7031) & (T/20220328/7038)

Declaration

We declare the foregoing particulars are true in every respect.



Policy holder's Signature / Date & Time

Shirley

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

MAC

Witnessed by Reporting Centre
Personnel



**SINGAPORE
POLICE FORCE**



T/20220328/7031

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

1 of 3
Report No. T/20220328/7031

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/03/2022 13:37			Vide Report No.:		Station Diary No.:
Informant's Particulars					
Name of Informant: YEO SHENG GUAN			Address: 139 MARSILING ROAD #07-2040 SINGAPORE 730139		
ID Type / ID No.: NRIC NO / S1342872G			Contact No.: Home/Office: Mobile: 91265827		
Nationality: SINGAPORE CITIZEN			Email: SHENGGUANYEO@GMAIL.COM		
Sex: Male	Age: 62	Date of Birth: 03/09/1959	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Supply and distribution/Logistics/Warehousing manager			Driving Licence Information: Class: 2B,2A,2,3,4,5		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 28/03/2022 07:40	Type of Location: Straight Road
Location: BUKIT TIMAH EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 90 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
PC1283M	Bus/Coach/Mi nibus					0
SLG5850B	Car					0
SLN808X	Car					0
SME5070J	Car					0



**SINGAPORE
POLICE FORCE**



T/20220328/7031

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

2 of 3
Report No. T/20220328/7031

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SMZ5348Z	Car	TOYOTA	SIENTA		Seriously Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLG5850B	AIG MALAYSIA INSURANCE BERHAD			
SMZ5348Z	NTUC Income Insurance Co-Operative Limited			

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	YEO SHENG GUAN	ID No.	S1342872G
Related Vehicle	SMZ5348Z (Car)	Contact No.	91265827
Hospital/Clinic	A LIFE CLINIC PTE LTD	Class of Driving Licence & Expiry	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date	28/03/2022	Date	28/03/2022
No. of Days granted Medical Leave	07	Degree of	Serious

Brief Details.

ON 28.03.2022 AT ABOUT 07:40AM. I WAS TRAVELLING ALONG BKE TOWARDS CITY (BEFORE EXIT 7). THE FRONT VEHICLE SLOWED DOWN AND STOPPED, I FOLLOWED. SUDDENLY I FELT AN IMPACT FROM MY REAR AND MY VEHICLE MOVED FORWARD TO HIT THE FRONT VEHICLE. I WAS INVOLVED IN A 5 VEHICLES CHAIN COLLISION.

I FELT DISCOMFORT AT THE BACK AND NECK ACHE. I PROCEED TO SEEK MEDICAL TREATMENT AT A LIFE CLINIC PTE. LTD. I HAVE 7 DAYS MEDICAL LEAVE.

Pls note this is amendment for (7/20220328/7031)



**SINGAPORE
POLICE FORCE**



T/20220328/7031

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

3 of 3

Report No. T/20220328/7031

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
ANG YI TING, STEPHANIE
Contact No.: 65476414

NP168

Signature Of Informant:

The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
28/03/2022 13:37

Classification Of Case:



**SINGAPORE
POLICE FORCE**



T/20220328/7038

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

1 of 3
Report No. T/20220328/7038

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/03/2022 14:32		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: YEO SHENG GUAN			Address: 139 MARSILING ROAD #07-2040 SINGAPORE 730139		
ID Type / ID No.: NRIC NO / S1342872G			Contact No.: Home/Office: Mobile: 91265827		
Nationality: SINGAPORE CITIZEN			Email: SHENGGUANYEO@GMAIL.COM		
Sex: Male	Age: 62	Date of Birth: 03/09/1959	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Supply and distribution/Logistics/Warehousing manager			Driving Licence Information: Class: 2B,2A,2,3,4,5		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 28/03/2022 07:40	Type of Location: Straight Road
Location: BUKIT TIMAH EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 90 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
PC1283M	Bus/Coach/Mi nibus					0
SLG5850B	Car					0
SLN808X	Car					0
SME5070J	Car					0



**SINGAPORE
POLICE FORCE**



T/20220328/7038

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

2 of 3

Report No. T/20220328/7038

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
SMZ5348Z	Car	TOYOTA	SIENTA		Seriously Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMZ5348Z	NTUC Income Insurance Co-Operative Limited			

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	YEO SHENG GUAN	ID No.	S1342872G
Related Vehicle	SMZ5348Z (Car)	Contact No.	91265827
Hospital/Clinic	A LIFE CLINIC PTE LTD	Class of Driving Licence & Expiry	Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date	28/03/2022	Date	28/03/2022
No. of Days granted Medical Leave	07	Degree of	Serious

Brief Details.

ON 28.03.2022 AT ABOUT 07:40AM. I WAS TRAVELLING ALONG BKE TOWARDS CITY (BEFORE EXIT 7). THE FRONT VEHICLE SLOWED DOWN AND STOPPED. I FOLLOWED. SUDDENLY, I FELT AN IMPACT FROM MY REAR AND MY VEHICLE MOVED FORWARD TO HIT THE FRONT VEHICLE. I WAS INVOLVED IN A 5 VEHICLES CHAIN COLLISION.

I FELT DISCOMFORT AT THE BACK AND NECK ACHE. I PROCEED TO SEEK MEDICAL TREATMENT AT A LIFE CLINIC PTE. LTD. I HAVE 7 DAYS MEDICAL LEAVE.

PLEASE NOTE THIS IS AN AMENDMENT FOR (T/20220328/7031).

**SINGAPORE
POLICE FORCE**

T/20220328/7038

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

3 of 3
Report No. T/20220328/7038

CONTINUATION OF REPORTSketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
ANG YI TING, STEPHANIE
Contact No.: 65476414

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
28/03/2022 14:32

Classification Of Case:

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1342872G**

Name: **YEO SHENG GUAN**

Birth Date: **03 Sep 1959**

Issue Date: **02 Oct 2010**

001898629K

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1342872G

Name: **YEO SHENG GUAN**

楊 盛 源

Race: **CHINESE**

Date of birth: **03-09-1959**

Country of birth: **SINGAPORE**

For Insurance Reporting And
Claim Purposes Only

Land Transport Authority

VOCATIONAL LICENCE

Licence No: **S1342872G**

Name: **YEO SHENG GUAN**

Issue Date: **6/10/2010**

Please visit www.lta.gov.sg to check the status of this vocational licence

Sheng Guan

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

		EFFECTIVE DATE
Class 2B	Motorcycles ≤ 200 cc	11 May 1977
Class 2A	Motorcycles between 201 cc and 400 cc	11 May 1977
Class 2	Motorcycles > 400 cc	11 May 1977
Class 3	Motor Cars ≤ 3000kg with ≤ 7 passengers, exclusive of the driver; and other motor vehicles ≤ 2500kg	17 Aug 1977
Class 4	*Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg *Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg	10 Mar 1982
Class 5	Motor vehicles not constructed to carry any load and the unladen weight > 7250kg	15 May 1982

Licence No: **S1342872G**

NP 428A

427587

NPIC No. S1342872G

Date of issue: **14-09-2010**

Address: **APT BLK 139 MARSILING ROAD
#07-2040
SINGAPORE 730139**

For Insurance Reporting And
Claim Purposes Only

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
03	BUS VL	04/03/1996
02	TAXI VL	05/01/1996
04	BUS ATTENDANT	04/03/1996

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5121905507

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SMZ5348Z**
Chassis Number : NHP1707204692
2. Name of Policyholder : GUAN TRANSPORT
3. Effective Date of Insurance : 30 Apr 2021
4. Expiry Date of Insurance : 29 Apr 2022
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#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: CAR HOUSE CAPITAL PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : INSURE LINK PTE LTD (00000614836)
Date of Issue : 04 May 2021 11:24 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive

Insure Link Pte Ltd
2 Kallang Avenue #08-16
CT Hub S(339407)
Off : 6444 4644
Fax: 6444 0040

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Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Business
Owner ID:	444D
Vehicle Details	
Vehicle No.:	SMZ5348Z
Vehicle to be Exported:	No
Intended Deregistration Date:	28 Mar 2022
Vehicle Make:	TOYOTA
Vehicle Model:	SIENTA HYBRID 1.5G CVT 7SEAT
Primary Colour:	Brown
Manufacturing Year:	2020
Engine No.:	1NZR868934
Chassis No.:	NHP1707204692
Maximum Power Output:	73.0 kW (97 bhp)
Open Market Value:	\$27,223.00
Original Registration Date:	30 Apr 2021
First Registration Date:	30 Apr 2021
Transfer Count:	0
Actual ARF Paid:	\$15,113.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Apr 2031
PARF Rebate Amount:	\$11,334.00
Intended COE Rebate Details	
COE Expiry Date:	29 Apr 2031
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$49,640.00
COE Rebate Amount:	\$45,103.00
Total Rebate Amount:	\$56,437.00

The information contained herein is correct as at 28 Mar 2022

OK