## **CHOO MOTOR SPRAY PAINTER**

1 Kaki Bukit Ave 6 #01-39 Autobay Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 22736900M

Date: 13.06.2022

India International Insurance Pte Ltd 64 Cecil Street #04-05 IOB Building Singapore 049711

Attn: Motor Claim Department

Dear Sir/Madam,

## ACCIDENT INVOLVING VEHICLES: SNB 4988Y / GBF 6286Y ON 25.04.2022

We are the authorized repair workshop for the owner of motor vehicle no: SNB 4988Y , which was involved in the captioned accident with your insured vehicle no: GBF 6286Y . 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.

		\$ 16,108.00
3)	LTA Search Fee	\$ 7.45
	Loss of Rental	\$ 2,550.00
	Cost of Repair	\$ 13,558.00

We enclosed herewith the following documents to support the claims:

a) Final Repair Invoice

c) LTA Search Result

e) GIA Report

g) I/C & Driving Licence

i) Vehicle Registration Log Card

b) Car Rental Invoice / Agreement

d) Letter of Authorisation, etc...

f) Police Report

h) Insurance Certificate

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,

Tang Jun Zhong
For Choo Motor Spray Painter

## **TAX INVOICE**

## **CHOO MOTOR SPRAY PAINTER**

1 Kaki Bukit Ave 6 #01-39 Autobay Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 22736900M

India International Insurance Pte Ltd 64 Cecil Street

#04-05 IOB Building Singapore 049711

Attn: Motor Claim Department

Tax Invoice: 22942

Date :13.06.2022 Vehicle No :SNB 4988Y

Make/Model : HYUNDAI CN7 AVANTE 1.6

Chassis/Eng# :

Accident Date : 25.04.2022

Claim No

Reference :0422 -22942

Policy No

Amount

S\$ 13558.00

To proceed on parts by parts repair inclusive of knoking, spray painting labour charges and etc.

E. & O. E.

Total: S\$

13558.00

for CHOO MOTOR SPRAY PAINTER

## **DYNAMIC CAR RENTAL**

1 Kaki Bukit Ave 6 #01-46 Autobay

Singapore 417883

Tel No: 6741 7244 / 6746 5405 Fax No: 6745 8520 / 6746 5786

Co. Reg No: 52928467K

To: KESAVANANDA KRISHNA CHITRADA

Invoice

: DCR-2022-05-10

Date : 13.05.2022

Agreement No : 22270

Payment Terms: LOD

**DESCRIPTION** 

**AMOUNT** 

Rental charges for vehicle: SMM 3489G ( 0422-22942 )

2,550.00

Rental Period from 26.04.2022 to 13.05.2022

E. & O. E.

Total

\$

2,550.00

JIN EE

for Dynamic Car Rental

# Dynamic Car Rental

1 KAKI BUKIT AVENUE 6, #01-46/48/50 AUTOBAY, SINGAPORE 417883.

TEL: (+65) 6741 7244, 6746 5405 FAX: (+65) 6745 8520, 6746 5786

Co. Reg. No. 52928467K

## RENTAL TERMS AND CONDITIONS

No. 22270

	Kesayananda Krishna Chitrada			REG. No.	MAKE	KE MODEL:	
	450 0	orporation Road	ABER SAMBOOM YASIBA YASI	SMM34896	DIES	ASTURBUNCTION OF VICES	E 1/4 1/2 3/4
	# 02-0	08	one bernsone supporte our	KM IN		DATE & TIME IN 13.05.2022	a 8:45am
		ore 649810.		OUT COUT		26.04, 2022	@ 14:00 PM
	haed light one sole.	Pala estados terma e dinve	composition of the day of the same	DRIVEN	ulav am	TIME USED	
-	NAMED DRIVER	/O e/II-ot-espon alabamin-	PND Sits upenary allostice is ni-ti es	of the follow bas god	lanc yies		00.4-10)
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	PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	17	DAYS	@ss 150.00	\$2550.00
	ADD NAMED DRIVER	official extracts from Asses	s brus a bitaly and ut agemula the	v roomer) on a seek v	VEEKS	@S\$	
	DRIVING LICENCE NO	DATE OF EXPIRY	PLACE OF ISSUE	MC	ONTHS	@S\$	e tsrift X
	PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	BY INITIALLING, RE AGREES TO PAY AD FOR COLLISION DAM	D FEE	SUB-TOTAL	0 (8)
-	IMPORTANT NOTES: This vehicle is licenced to carry 04	i nassangar anly	Termen Jageor Tereo, yas m	WAIVER (C.D.W.)	MAGES	-2002-00-100gg 1610H	80.20
	No refund will be given for vehicle No refund will be given for period I Hirer is liable to pay loss of earning	returns early.		reals to lossestation son		TOTAL RENTAL	\$2550.00
	Vehicle return during office hour or	and traffic summonese.	геран.	management and to		DELIVERY FEE	STY IC
	No service on public holiday and Sunday. Geographical areas: Singapore & West Malaysia. Driver must be: a) 18 years old and above.			V		COLLECTION FEE	
	b) Holding a valid relevant class of	by the person to whom it is hired	to and the additional driver named in the	PER DAY PER WI		PER MONTH \$	H 91T
1	ADDITIONAL CONDITIONS:		ecos byen of ema elesnogee ha	BY INITIALLING, RE		of shall permit the C	6 907
	COMPREHENSIVE COVERED E) "Section I – Used in S'pore only : 8 "Section II – Used in S'pore only : 8 "Wiscreen Excess In S'pore : SGD	SGD 2000.00	sed outside S'pore : SGD 4000.00 Ised outside S'pore : SGD 3000.00 cess Outside S'pore : SGD 100.00	AGREES TO PAY ADD FEE FOR PERSONAL ACCIDENT INSURANCE (P.A.I.)			
	THIRD PARTY COVERED EXCES "Hirer must bear all costs to the da" "Section II – Used in S'pore only : 8	mages of the return vehicle		X		isi ad lon libra ham idau lo ili nostag isi adi of detalo hama	
	"Hirer must bear all costs to the dar "Section II – Used outside S'pore :	mages of the return vehicle. SGD 3000.00		PER DAY PER WE		PER MONTH S	et boe V adT - St
11	YOUNG AND INEXPERIENCE DR Hirer or any authorized driver who i 18 month or less driving experience	is aged 22 years old (on the date of	of accident) and below or possess only	PREPAYMENT	is no	TOTAL CHARGE	Notice .
1	COMPREHENSIVE COVERED EX Section I - Used in S'pore only: S	GD 6000.00 Section I – Us	sed outside S'pore : SGD 12,000,00	CHECK	eny ore	DEPOSIT	58, 011 .81 Vine of
1	Section II – Used in S'pore only : S'W/screen Excess in S'pore : SGD	SGD 6000.00 *Section II – U 100.00 *W/screen Exc	sed outside S'pore : SGD 12,000.00 less Outside S'pore : SGD 100.00	CASH	is same	Includes	gA cart.
1 "	IHIRD PARTY COVERED EXCESS Hirer must bear all costs to the dar Section II – Used in S'pore only: S	mages of the return vehicle	EDRIVER)	RECEIPT NO.	o nem	NETT CHARGE	Mineral Windress
	Hirer must bear all costs to the dar Section II - Used outside S'pore : t	mage of the return vehicle. SGD 12,000.00		unia don sook taminah.		ave balk inequesina	40 00 00 00 00 00 00 00 00 00 00 00 00 0
	Hirer is responsible for any cos FHIRD PARTY DAMAGE / INJ			AMOUNT DUE / REFU	IND	ality description agree	
1	HAVE READ THE TERMS A DF THIS RENTAL AGREEME	AND CONDITIONS ON BOT ENT AND AGREE THEREOR	H SIDES E.	engenent statt fremeen	ma to el gélarica	second quantities on the armer of the total	en and a second
5	SIGNED BY THE PARTIES HE	ERETO ON THE	shull be liquie to pay all repair a	DAY OF	90 to 82	nsedo or aliar sene.	More 8
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	Om. 1c	. Winds		Listing to land be	71		
1	The second contract of	AND RESIDENCE OF THE PARTY OF T		X			
	RENTER'S	DRIVER'S SIGNATU	RE	D	VNAM	IC CAD DENTA	

### > Back to OneMotoring



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time:

26 Apr 2022 / 13:26:56

Receipt Date/Time:

26 Apr 2022 / 13:26:56

## Tax Invoice/Receipt

Receipt No.: ITNET-00000-220426-002002

Previous Receipt No.:

Previous Receipt No. :				
S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - GBF6286Y As at 25 Apr 2022/19:30:00 Insurance Co: INDIA INT'L INS PTE LTD  Insurance Enquiry - GBF6286Y Enquiry Foo				
Enquiry Fee 20220426132619583290		7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	20220426132627297	Direct Debit: el	NETS Debit et Banking)	7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

## THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

ТО	: India International Insurance Pte Ltd.
10	. Thaid Theilialialial Tuearance Lie Fig.
RE	: ACCIDENT INVOLVING VEHICLE NO. SNB 4988Y GBF 6386Y
	ALONG PIE towards TUAS (Before Toh Guan Exit)
	ON 25.04.2022
I/We,	Kesayananda Krishna Chitrada
	No./ROC No.) <u>\$7665716E</u>
	O Corporation Road # 02-08 Singapore 649810
	vehicle no. SNB 4988Y in consideration of M/s CHOO MOTOR SPRAY
	R repairing my/our vehicle SNB 4988Y at my/our instruction and hereby
authorise	M/s CHOO MOTOR SPRAY PAINTER to demand claim settlement whatever
amount so	ettled/payable by the Insurance Company and/or third party or to commence legal
proceeding	igs, if necessary, under my name, for the cost of repairs, car rental and/or loss of use,
etc. and to	their appointing solicitor to act for me/us in respect of the said accident/claim and
all claime	ed and/or settled shall belong to them absolutely.
T/777 0 .1	
	her agree and undertake to indemnify them against the above-mentioned claim cost
wnich ma	y arisen therewith.
	of Owner:
a.	
Signature	of Owner:

SY0A224Q0002 / YEW TEE AUTOMOBILE TECH PTE LTD [417800] ENTRY DATE & TIME: 26/04/2022 17:02 (SGT) SUBMITTED BY: TOH LEI MING VERSION: 1 (26/04/2022 17:02 (SGT))

## SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>
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 26/04/2022 17:02 (SGT) Date of Accident 25/04/2022 19:05 (SGT) **Exact Location of Accident** Toh Guan Rd, Singapore

Additional Location Information PIE TOWARDS TUAS(BEFORE TOH GUAN EXIT) Country/State of Loss

Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SNB4988Y

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner KESAVANANDA KRISHNA CHITRADA NRIC No SXXXX716E **Email Address** MASTERMOVECHESS@GMAIL.COM Mobile Phone No (Phone) +65-98536552 Alternative Phone No (Home) +65-98536552

#### VEHICLE PARTICULARS

Manufacturer Hyundai Model Avante Variant

Exact purpose for which vehicle was being used at time of

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

Vehicle Category

Transmission

Private car Auto

No - Claiming third party

#### **INSURANCE COMPANY**

Name of Insurance Company NTUC Income Insurance Co-operative Ltd Type of Coverage Comprehensive Fleet Policy No **Policy Number** 5123817966 Cover Note Number

#### DRIVER

Name of Driver KESAVANANDA KRISHNA CHITRADA NRIC No SXXXX716E

Date Of Birth 04/05/1976 Occupation Indoor Date Of Driving Pass 12/09/2014 Driving experience 7 YEARS AND 7 MONTHS Gender Mobile Number (Phone) +65-98536552 Alt. Phone Number (Home) +65-98536552 Email Address MASTERMOVECHESS@GMAIL.COM Address 450 CORPORATION ROAD #02-08 SINGAPORE 649810 Address complement Postcode 649810 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 - Head to Rear Weather Conditions 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) 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? No Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour

Commercial vehicle

Vehicle Category

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?

Refer to the p	olice report.	(810F/ actorde)	
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eclare the foregoing part	iculars are true in	every respect.	
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, K. Web	Oh-le P	N2	
nolder's Signature / Date	& Driver's Sig & Time	nature (If driver is not the policyholder) / Dat	e Witnessed by Reporting Centre Personnel

#### SKETCH PLAN

#### **IMPORTANT NOTICE**

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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)

Lunderstand, 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.

M. K. K. Mar

Policyholder's Signature / Date & Time

Ch. L. Kinha-

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

N

Witnessed by Reporting Centre

Sketch Plan

A: 9NB 4988Y
B: GBF 6396Y





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

2 of 3 Report No. T/20220426/7018

#### CONTINUATION OF REPORT

Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date		
SNB4988Y	NTUC Income Insurance Co-Operative Limited	5123817966	26/08/2021	25/08/2022		

Details of Perso	n Involved			TOTAL SE	9095000	
Any Pedestrian I	nvolved: No					
No. of Pedestrian	No. of Pedestrians Injured: NIL Use of F					sing: NA
Driver						
Name	KESAVANANDA KRISHNA CHITRADA			ID No	э.	S7665716E
Related Vehicle	SNB4988Y (Car)			Cont	act No.	98536552
Hospital/Clinic	NIL			Class Drivir Licen Expir	ng ice &	Class: 2B,3 Date of Expiry: NIL
Date	25/04/2022		Date	·	·	/2022
No. of Days gran	ted Medical Leave	04	Degree o	of	Slight	

### Brief Details.

I was traveling along PIE towards Tuas, while I'm coming near to Toh Guan Exit, the front vehicle slow down and stop, I followed, suddenly a Van ( GBF6286Y ) did not stop and collided into the rear of my car.

I feel pain at my Neck and body area after the accident, I visited Tayka Medical Family Clinic and was given 4 days MC.



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



3 of 3 Report No. T/20220426/7018

CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant:  The identity of the person making this report ha been authenticated by Singpass. No signature required.		
Signature Of Interpreter: Not applicable	Date/Time: 26/04/2022 13:42		
Officer In Charge Of Case: TP / TPIB / TAY CHUN KEEN Contact No.: 65476436	Classification Of Case:		

NP168





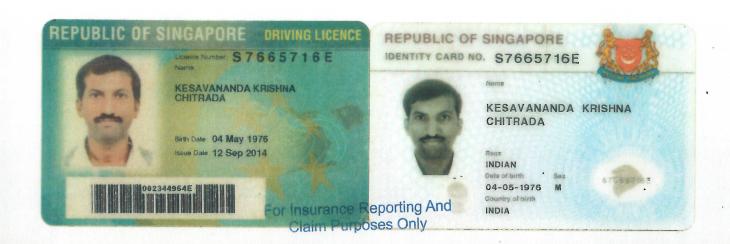
Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20220426/7018

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/04/2022 13:42		Made:	Vide Report No.:	Station Diary No.:		
Informa	nt's Partic	ulars				
Name of Informant: KESAVANANDA KRISHNA CHITRADA			Address: 450 CORPORATION ROAD #02-08 SINGAPORE 649810			
ID Type / ID No.: NRIC NO / S7665716E		16E	Contact No.: Home/Office: Mobile: 98536552			
National INDIAN	ity:		Email: MASTERMOVECHESS@GMAIL.COM			
Sex: Male	Age: 45	Date of Birth: 04/05/1976	Type of Informant: Driver			
Race: Indian			Language: English	Institution / School Name:		
Occupation: Chess Coach			Driving Licence Information: Class: 2B,3	Date of Expiry:		

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 25/04/2022 19:05	Type of Location Straight Road
	EXPRESSWAY			
Weather: Clear		Road Surface: Dry		Road Speed Limit: 90 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collis		To Rear		Anyone conveyed by ambulance:

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
GBF6286Y	Van				Seriously Damaged	0
SNB4988Y	Car	HYUNDAI	CN7 AVANTE 1.6 DOHC CVT S	Red	Seriously Damaged	0



Dr. 7c. Josh





#### 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: 5123817966

Cover: drivo PREMIUM

1. Index mark and Registration Number of Vehicle

: SNB4988Y

Chassis Number

: KMHLN41ETNU213555

2. Name of Policyholder

: KESAVANANDA K CHITRADA

3. Effective Date of Insurance

: 26 Aug 2021

4. Expiry Date of Insurance

: 25 Aug 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 business or profession.

#### This Policy does not cover

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

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

**EXCESS (SECTION 1)** : S\$600 **EXCESS (SECTION 2)** : N/A WINDSCREEN EXCESS : S\$100 **ADDITIONAL EXCESS** : N/A

**UNNAMED DRIVER EXCESS** : PLEASE REFER OVERLEAF

REPAIR AT OWNER'S PREFERRED WORKSHOP : YES INSURE WITH COF : YES NCD PROTECTION : NO **ROADSIDE ASSISTANCE AND WELLNESS COVER** : NO TRANSPORT ALLOWANCE : NO **EXCESS WAIVER** : NO

PRIMARY DRIVER : KESAVANANDA KRISHNA CHITRADA

NAMED DRIVER (1) : N/A NAMED DRIVER (2) : N/A

HIRE PURCHASE COMPANY : MAYBANK SINGAPORE LIMITED

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

: KOMOCO TRADING PTE LTD (00000614810)

Date of Issue

: 21 Sep 2021 17:17 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

**Chief Executive** 

## > Back to OneMotoring

**Enquire PARF/COE Rebate for Registered Vehicle** 

Vehicle Owner Particulars			
Owner ID Type:	Singapore NRIC		
Owner ID: Vehicle Details	716E		
Vehicle No.:	SNB4988Y		
Vehicle to be Exported:	No		
Intended Deregistration Date:	26 Apr 2022		
Vehicle Make:	HYUNDAI		
Vehicle Model:	CN7 AVANTE 1.6 DOHC CVT S		
Primary Colour:	Red		
Manufacturing Year:	2021		
Engine No.:	G4FMMU048847		
Chassis No.:	KMHLN41ETNU213555		
Maximum Power Output:	90.2 kW (120 bhp)		
Open Market Value:	\$18,838.00		
Original Registration Date:	26 Aug 2021		
First Registration Date:	26 Aug 2021		
Transfer Count:	0		
Actual ARF Paid: Intended PARF Rebate Details	\$5,000.00		
PARF Eligibility:	Yes		
PARF Eligibility Expiry Date:	25 Aug 2031		
PARF Rebate Amount:	\$3,750.00		
Intended COE Rebate Details			
COE Expiry Date:	25 Aug 2031		
COE Category:	A - Car up to 1600cc & 97kW (130bhp)		
COE Period(Years):	10		
QP Paid:	\$46,689.00		
COE Rebate Amount:	\$43,563.00		
Total Rebate Amount:	\$47,313.00		

The information contained herein is correct as at 26 Apr 2022