FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 200006262D

Date: 14.06.2022

China Taiping Insurance Singapore Pte Ltd 3 Anson Road #16-00 Springleaf Tower Singapore 079909

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES: SLH 9091T / GBE 1405J AND OTHER ON 11.05.2022

We are the authorized repair workshop for the owner of motor vehicle no: SLH 9091T , which was involved in the captioned accident with your insured vehicle no: GBE 1405J . 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.

		\$ 22,495.00
4)	Towing Charge	\$ 70.00
3)	LTA Search Fee	\$ 2.00
2)	Loss of Rental	\$ 2,200.00
1)	Cost of Repair (inclusive of GST)	\$ 20,223.00

We enclosed herewith the following documents to support the claims:

a) Final Repair Invoice

c) GIA Search Result

e) Towing Charge

g) Police Report

i) Insurance Certificate

b) Car Rental Invoice / Agreement

d) Letter of Authorisation, etc...

f) GIA Report

h) I/C & Driving Licence

j) 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

Tax Invoice: 22966

China Taiping Insurance Singapore Pte Ltd

3 Anson Road #16-00 Springleaf Tower

Singapore 079909

Attn: Motor Claim Department

Date :10.06.2022 Vehicle No SLH 9091T

Make/Model CITROEN DS5 1.6

Chassis/Eng#

Accident Date #11.05.2022

Claim No

Reference 0522 -22966

S\$

Policy No

Amount

18900.00

To proceed on lump sum repair

E. & O. E.

Total : S\$

18900.00

GST @ 7%: S\$

1323.00

Amount Due | S\$

20223.00

for FASTECH AUTO PTE LTD

All Invoices are subjected to GST

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. 22280

Name MOHE	AMED TAUFIK	REG. No. MAKE MODEL:			
ADDRESS	809 TAMPINES		SKU 1627U DIES	SEL PETROL	E 1/4 1/2 3/4 F
	53 SINGAPORE	KM IN KM OUT	DATE & TIME OUT	9.05.2022@17:12 Pm ATE & TIME OUT 1.05.2022@11:45 AM	
			DRIVEN		
NAMED DRIVER					
S7023972H	DATE OF EXPIRY	PLACE OF ISSUE	HOURS	@S\$	
PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	10 DAYS	@S\$ 220.00	\$2200.00
ADD NAMED DRIVER			WEEKS	@S\$	
DRIVING LICENCE NO	DATE OF EXPIRY	PLACE OF ISSUE	MONTHS	@S\$	
PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR COLLISION DAMAGES	GOD TOTAL	
IMPORTANT NOTES: This vehicle is licenced to carry 0			WAIVER (C.D.W.)		A
Hirer is liable to pay all parking fe	l left in vehicle ngs while damaged vehicle is unde se and traffic summonese	r repair.		DELIVERY FEE	\$ 2200,00
Vehicle return during office hour of No service on public holiday and Geographical areas: Singapore 8	Sunday			COLLECTION FEE	
agreement		to and the additional driver named in the ubletting is not covered.	PER DAY PER WEEK \$	PER MONTH \$	
COMPREHENSIVE COVERED 6 *Section I – Used in S'pore only : *Section II – Used in S'pore only *Wiscreen Excess In S'pore : SG	*SGD 2000,00	Used outside S'pore : SGD 4000,00 Used outside S'pore : SGD 3000.00 ccess Outside S'pore : SGD 100.00	AGREES TO PAY ADD FEE FOR PERSONAL ACCIDENT INSURANCE (P.A.I.)		
THIRD PARTY COVERED EXCE 'Hirer must bear all costs to the c 'Section II – Used in S'pore only 'Hirer must bear all costs to the c 'Section II – Used outside S pore	damages of the return vehicle : SGD 1500.00 damages of the return vehicle		PER DAY PER WEEK \$	PER MONTH	
YOUNG AND INEXPERIENCE D	DRIVER o is aged 22 years old (on the date	of accident) and below or possess only	PREPAYMENT	TOTAL CHARGE	
COMPREHENSIVE COVERED B	EXCESS: (YOUNG AND INEXPER		CHECK	DEPOSIT	
*Section I – Used in S'pore only : *Section II – Used in S'pore only : *W/screen Excess In S'pore : SG	: SGD 6000 00 *Section II - 1	Jsed outside S'pore : SGD 12,000.00 Used outside S'pore : SGD 12,000.00 ccess Outside S'pore : SGD 100.00	CASH		
THIRD PARTY COVERED EXCE *Hirer must bear all costs to the c *Section II – Used in S'pore only		CE DRIVER)	RECEIPT NO.	NETT CHARGE	
'Hirer must bear all costs to the costsction II – Used outside S'pore					
Hirer is responsible for any costs to the THIRD PARTY DAMAGE / INJURY claims.			AMOUNT DUE / REFUND		
	S AND CONDITIONS ON BO MENT AND AGREE THEREC				
SIGNED BY THE PARTIES	HERETO ON THE		DAY OF		
X	A'S/DRIVER'S SIGNAT	LIDE	X	AMIC CAR RENT	Al

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: MOHAMED TAUFIK BIN ABDUL AZIZ Invoice : DCR-2022-05-20

Date : 19.05.2022

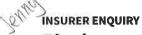
Agreement No : 22280
Payment Terms : LOD

DESCRIPTION	AMOUNT
Rental charges for vehicle : SKU 1627U (0522-22966)	\$ 2,200.00
Rental Period from 11.05.2022 to 19.05.2022	

E. & O. E. Total \$ 2,200.00

JIN EE

for Dynamic Car Rental



Find insurer

Vehicle reg. no.

GBE1405J

Date of Accident

11/05/2022

Reset

% RESULT & RECEIPT

TP Insurer Enquiry Insurance ______ China Taiping Insurance (Sing... Period of Insurance ______ 10/09/2021 - 09/09/2022 Requested By _____ ALLAN TANG (KIM CHWEE AUT... Requested Date ______ 11/05/2022 10:27

Payment details

Request Amount: **\$\$1.87** GST Amount: **\$\$0.13**

Total Amount Due (GST Inclusive): \$\$2

General Insurance Association

Records Management Centre GST Registration No: **M400017735**

DATE	:	11.05.2022
ТО	1	CHINA TAIPING INSURANCE SINGAPORE PTD LTD.
RE	3	ACCIDENT INVOLVING VEHICLE NO. SLH 90917 / GBE 1405] and other. ALONG TOWARDS WOODLANDS ON
I/We,/	MO	HAMED TAUFIK BIN ABDUL AZIZ
of (NRIC	No	./ROC No.)S7023972H
of APT	BL	K 809 TAMPINES AVENUE 4 #03-153 SINGAPORE 520809
owner of	veh	icle no. SLH 90917 in consideration of M/s FASTECH AUTO
PTE LTE	re _l	pairing my/our vehicle SLH 9091T at my/our instruction and hereby
authorise	M/	s FASTECH AUTO PTE LTD to demand claim settlement whatever
amount s	ettle	ed/payable by the Insurance Company and/or third party or to commence legal
		if necessary, under my name, for the cost of repairs, car rental and/or loss of use,
		eir appointing solicitor to act for me/us in respect of the said accident/claim and
all claime	ed a	nd/or settled shall belong to them absolutely.
		agree and undertake to indemnify them against the above-mentioned claim cost risen therewith.
		Mary Control of the C
Signature	of	Owner:
Name of	Ow	mer : MOHAMED TAUFIK BIN ABDUL AZIZ

Cash Sale

Sale

No. 6438

Date FASTECH FASTECH

1110485 Time Start Time End 時間起點 時間終點 Model 墊品 TREMIER KAKI TACORE LANG 1606 H70 Car Reg. No. 汽車註册號碼 From

Note: The receipient of service or his representative is required to follow along to the towing destination, failing which the tow operator shall not be liable for any alleged damage(s) to the car nor missing item(s) from the same.

Tow Driver's Signature

托車司機簽名

Received by

/ Acerseny

Others

Amt Charged

E. & O. E.

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 11/05/2022 12:46 (SGT) Date of Accident 11/05/2022 08:30 (SGT) Exact Location of Accident SLE, Singapore ditional Location Information **TOWARDS WOODLANDS** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private use

Private car

No - Claiming third party

Vehicle Registration Number SLH9091T

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner MOHAMED TAUFIK BIN ABDUL AZIZ NRIC No. SXXXX972H Email Address taufikzz@yahoo.com.sg Mobile Phone No (Phone) +65-90233715 Alternative Phone No +65-90233715

VEHICLE PARTICULARS

Citroen Model Ds5 Variant

Exact purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to

your vehicle?

Vehicle Category

Transmission Auto CC 1560

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive

Fleet Policy

Policy Number 2070012775-02

Cover Note Number

DRIVER

Name of Driver MOHAMED TAUFIK BIN ABDUL AZIZ NRIC No SXXXX972H

Date Of Birth 19/07/1970 Occupation Indoor Date Of Driving Pass 07/11/1994 Driving experience 27 YEARS AND 6 MONTHS Gender Mobile Number (Phone) +65-90233715 Alt. Phone Number +65-90233715 Email Address taufikzz@yahoo.com.sg Address BLK 809 TAMPINES AVENUE 4 #03-153 Address complement Postcode 520809 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 Chain Collision Weather Conditions Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 3 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? No Was notice of intended Prosecution given? No If yes, against whom? 'RCUMSTANCES OF ACCIDENT PLEASE REFER TO SKETCH PLAN 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 **GBE1405J** Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Commercial vehicle Name of Driver Contact Number

Address complement

Address

Postcode	*
Insurance Company Name	China Taiping Insurance (Singapore) 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	SJE8307T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	100 m
Vehicle Colour	3 -
Vehicle Category	Private car
Name of Driver	8#1
Contact Number	2=
Address	(a)
Address complement	8=8
Postcode	8 4 5
Insurance Company Name	826
Nature Of Damage	844
Details of property damaged in accident	826
No. Of Passenger (Including Driver)	

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Gender Phone No	MOHAMED TAUFIK BIN ABDUL AZIZ Male (Phone) +65-90233715
Address	(H)
Address Complement	(*
Post Code	(m)
Approximate Age Years Old	5 <u>≠</u> :
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SLH9091T
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 Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wiful 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' law yers/law (irms, 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;
- (ii) 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 / Date & Driver's Signature (If driver is not the policyholder) / Date & Time Sketch Plan

Sketch

ribe Circu	umstances of the Accident
Or We Slo M	ecolonds theory traffic I was travelling upon subject of the subject caused My Car to feel dis comfort for the confort and will consult doctor.

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

Witnessed by Reporting Centre Personnel



IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Accident Reporting Centre with whom you submitted the Original Report.

	NDUM
PARTICULARS OF PERSON MAKING THE AMENDM	
Original Report No: SUUS 580002	Vehicle Registration No:
Name (as shown in MRIC): MOHAMED BUFIK 3/M	Vehicle Registration No: SLH 90917 PRINT A ZIZ NRIC/FIN/Passport No: 3×××× 97
Vehicle Driver/Vehicle (wher) () Please delete	
Address:	Singapore (
Contact (Tel):	Mobile No.:902337/5
Email Address:	
Date of Accident: 11 05 2012	Time of Accident: 08.80
	Saranas
Insurance Company:	
Insurance Company:	
additional information /amendments:	
INJURNO PARTY WAME TO MOHA	MINED GUFIK BIM ABOUL 4747
Policyholder / Driver's Signature	Reporting Centre Personnel's Signature

GIARM Caddendom From





Report No. L/20220511/7034

POLICE REPORT (NP299)

Police Station Of Origin Woodlands Division HQ 1 Woodlands Street 12 SINGAPORE 738622 Tel No:1800-4660000

Date/Time Report Made	Vide Rep	ort No.		Station Diary No.
11/05/2022 15:36				
Name Of Informant	Address			
MOHAMED TAUFIK BIN ABDUL AZIZ	809 TAN	IPINES AV	ENUE 4 #03-153	SINGAPORE
	520809			
ID Type / ID No.	Contact	No.		
NRIC NO / S7023972H	Home/O	ffice:	Mobile:	
			90233715	
Nationality	Email Ad	ldress		
SINGAPORE CITIZEN	TAUFIK	ZZ@YAHO	O.COM.SG	
Occupation	Sex	Age	Date of Birth	Race
Civil engineer	Male	51	19/07/1970	Malay
Institution/School Name	Languag	e		
	English			
Date/Time Of Incident	Location	Of Incident		
11/05/2022 08:30 - 11/05/2022 09:00	Travellin	g on my ca	r SLH9091T on S	eletar Expressway
	going to	wards Wood	dlands	

Brief details.

On 11/05/22 at around 8.30-8.45am, I was travelling on my car SLH9091T on SLE towards Woodlands. Quite heavy traffic and I was slowing almost stopping due to a road accident ahead. Suddenly a van GBE 1405J hit the rear of my car. The impact caused my car to move forward and hit the car SJE 8307T infront of me. I was in a state of shocked and feel some discomfort on my neck. I had consulted a doctor for a review on my health.

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 11/05/2022 15:36
Officer In-Charge Of Case:	Classification Of Case:







CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : MOHAMED TAUFIK BIN ABDUL AZIZ

Period of Insurance : 23 May 2021 To 22 May 2022

Engine No. : 10JBHC3045971

Chassis No. : VF7KFBHZTGS502953 Vehicle No.

: SLH9091T

Policy No.

: 2070012775-01

Endorsement No.

Issued Date

: 18 Apr 2021

ABOUT THE COVER

Make/Model : CITROEN DS5 1.6 BlueHDI

Engine Capacity/Tonnage: 1,560.00 CC Driver Restriction · NA

Sum Insured : Market Value

First Year of Registration : 2016

Insuring with COE/PARF : Yes

Person 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

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 than 2 years' driving experience

Off Peak Car : No

Age Condition

: All Age Condition

Mileage Condition

: Unlimited Mileage

itation 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 fuition, 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 Optional

^a Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1

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

Section 2

Property Damage - \$0

Windscreen: \$100

Named Driver and Excess (where applicable)

MOHAMED TAUFIK BIN ABDUL AZIZ - \$600 (Own Damage), \$600 (Flood Cover)

PROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs) Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, You may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HONG LEONG FINANCE LTD

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles(Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0503811000

ALFA AUTOMOTIVE

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

1 COMMONWEALTH LANE #01-24 ONE COMMONWEALTH

SINGAPORE 149544

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIGSGMOBILEAPP

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID: /ehicle Details	972H
/ehicle No.:	SLH9091T
/ehicle to be Exported:	No
ntended Deregistration Date:	11 May 2022
/ehicle Make:	CITROEN
/ehicle Model:	DS5 1.6 BLUEHDI S&S EAT6 S/R
Primary Colour:	White
Manufacturing Year:	2016
Engine No.:	10JBHC3045971
Chassis No.:	VF7KFBHZTGS502953
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$30,430.00
Original Registration Date:	23 Nov 2016
First Registration Date:	23 Nov 2016
Fransfer Count:	1
Actual ARF Paid: ntended PARF Rebate Details	\$24,602.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	22 Nov 2026
PARF Rebate Amount: ntended COE Rebate Details	\$17,221.00
COE Expiry Date:	22 Nov 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$52,668.00
COE Rebate Amount:	\$23,861.00
Total Rebate Amount:	\$41,082.00

The information contained herein is correct as at $11\,\mathrm{May}\,2022$