

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 : 06.06.2022

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 : SKC 3016P / SMA 6862E AND OTHER ON 18.05.2022

We are the authorized repair workshop for the owner of motor vehicle no: **SKC 3016P**, which was involved in the captioned accident with your insured vehicle no: **SMA 6862E**. 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) | \$ 12,840.00 |
| 2) Loss of Use (10days + 1 Sundays X S\$60) | \$ 660.00 |
| 3) GIA Search Fee | \$ 2.00 |
| | <u>\$ 13,502.00</u> |

We enclosed herewith the following documents to support the claims:

- | | |
|----------------------------------|------------------------------------|
| a) Final Repair Invoice | b) Car Rental Invoice / Agreement |
| c) GIA Search Result | d) Letter of Authorisation, etc... |
| e) GIA Report | f) Police Report |
| g) I/C & Driving Licence | h) Insurance Certificate |
| i) 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 : 22983

Date : 06.06.2022

Vehicle No : SKC 3016P

Make/Model : HYUNDAI ELANTRA 1.6

Chassis/Eng# :

Accident Date : 18.05.2022

Claim No :

Reference : 0522 -22983

Policy No :

| | Amount |
|-------------------------------|--------------|
| To proceed on lump sum repair | S\$ 12000.00 |

E. & O. E.

Total : S\$ 12000.00

GST @ 7% : S\$ 840.00

Amount Due : S\$ 12840.00



for FASTECH AUTO PTE LTD

All Invoices are subjected to GST


INSURER ENQUIRY

Find
insurer

Vehicle reg. no.

SMA6862E

Date of Accident

18/05/2022 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance **AIG Asia Pacific Insurance Pte....**Period of Insurance **27/07/2021 - 26/07/2022**Requested By **ALLAN TANG (KIM CHWEE AUT...**Requested Date **19/05/2022 09:52**

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, WINNIE TOH SHU HSIEN ("the third party claimant")
of 190 BUKIT BATOK WEST AVENUE 6 #13-41 S (650190) (address),
owner of SKC 3016P (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. SKC 3016P that was
damaged pursuant to the accident which occurred on 18-05-2022 (date) along
AYE TOWARDS TUAS (BEFORE CLEMENTI ROAD) (location)
involving vehicle no/s SMA 6862E ("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 19 day of MAY (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 | 19/05/2022 13:45 (SGT) |
| Date of Accident | 18/05/2022 18:00 (SGT) |
| Exact Location of Accident | Singapore |
| Additional Location Information | AYE TOWARDS TUAS(BEFORE CLEMENTI ROAD) |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SKC3016P |
|-----------------------------|----------|

INSURED/POLICYHOLDER

| | |
|--------------------------|----------------------|
| Is company? | No |
| Name Of Registered Owner | WINNIE TOH SHU HSIEN |
| NRIC No | SXXXX969B |
| Email Address | melvyn473@gmail.com |
| Mobile Phone No | (Phone) +65-92705496 |
| Alternative Phone No | +65-92705496 |

VEHICLE PARTICULARS

| | |
|--|---------------------------------|
| Manufacturer | Hyundai |
| Model | Elantra |
| Variant | ELANTRA 1.6 AT ABS D/AB 2WD 4DR |
| 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 | 1591 |

INSURANCE COMPANY

| | |
|---------------------------|-----------------------|
| Name of Insurance Company | AXA Insurance Pte Ltd |
| Type of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | - |
| Cover Note Number | - |

DRIVER

| | |
|----------------|---------------------|
| Name of Driver | GOH ZHI WEI, MELVYN |
| NRIC No | SXXXX946H |



| | |
|--|---|
| Date Of Birth | 29/09/1982 |
| Occupation | Indoor |
| Date Of Driving Pass | 12/06/2003 |
| Driving experience | 18 YEARS AND 11 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-90402010 |
| Alt. Phone Number | - |
| Email Address | melvyn473@gmail.com |
| Address | 190 BUKIT BATOK WEST AVENUE 6 #13-41 SPORE 650190 |
| Address complement | - |
| Postcode | - |
| Is the driver the policyholder? | No |
| If No, Relationship of the Driver with the Insured | Spouse |
| 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 | 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) | 3 |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No |

PASSENGER 1

| | |
|--------------|----------------------|
| Name | WINNIE TOH SHU HSIEN |
| Gender | Female |

PASSENGER 2

| | |
|--------------|--------------------|
| Name | TAY LI HUI, AMELIA |
| Gender | Female |

DETAILS OF POLICE ACTION

| | |
|---|----|
| Was the accident reported to the police? | No |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

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 | SMA6862E |
| Vehicle Manufacturer | - |



| | |
|---|-------------|
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Private car |
| 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) | - |

DETAILS OF OTHER VEHICLE PROPERTY 2

| | |
|---|-------------|
| Vehicle Registration Number | SJN9526Z |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Private car |
| 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 | GOH ZHI WEI, MELVYN |
| Gender | - |
| Phone No | - |
| Address | - |
| Address Complement | - |
| Post Code | - |
| Approximate Age Years Old | - |
| Injuries Sustained | - |
| Injured person in which vehicle? | SKC3016P |
| Were seat belts worn? | Yes |
| Was this injured conveyed to hospital by ambulance? | No |

INJURED 2

| | |
|---|----------------------|
| Name of injured person | WINNIE TOH SHU HSIEN |
| Gender | - |
| Phone No | - |
| Address | - |
| Address Complement | - |
| Post Code | - |
| Approximate Age Years Old | - |
| Injuries Sustained | - |
| Injured person in which vehicle? | SKC3016P |
| Were seat belts worn? | - |
| Was this injured conveyed to hospital by ambulance? | - |

INJURED 3

| | |
|------------------------|--------------------|
| Name of injured person | TAY LI HUI, AMELIA |
| Gender | - |
| Phone No | - |



| | |
|---|----------|
| Address | - |
| Address Complement | - |
| Post Code | - |
| Approximate Age Years Old | - |
| Injuries Sustained | - |
| Injured person in which vehicle? | SKC3016P |
| Were seat belts worn? | - |
| Was this injured conveyed to hospital by ambulance? | - |

Describe Circumstances of the Accident

On 18.05.2022 at about 18:15 pm. I was travelling along AYE towards TUAS (Before Clementi Road). 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 3 vehicles chain collision.

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



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

REPORT OF A TRAFFIC ACCIDENT

| | | | | | |
|--|------------|------------------------------|---|--------------------|----------------------------|
| Date/Time Report Made: 19/05/2022 21:47 | | Vide Report No.: | | Station Diary No.: | |
| Informant's Particulars | | | | | |
| Name of Informant: WINNIE TOH SHU HSIEN | | | Address: 190 BUKIT BATOK WEST AVENUE 6 #13-41 SINGAPORE 650190 | | |
| ID Type / ID No.: NRIC NO / S7607969B | | | Contact No.: Home/Office: Mobile: 92705496 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: winn.ie@hotmail.com | | |
| Sex: Female | Age: 46 | Date of Birth: 14/03/1976 | Type of Informant: Vehicle Owner | | |
| Race: Chinese | | | Language: English | | Institution / School Name: |
| Occupation: | | | Driving Licence Information: Class: Date of Expiry: | | |

| | | | | |
|--|------------------|------------------------------------|--|-------------------------------------|
| General Information of the Accident | | | | |
| Type of Accident: | Injury Others | Drink Drive: No | Date/Time of Accident: 18/05/2022 18:00 | Type of Location: Straight Road |
| Location: AYER RAJAH EXPRESSWAY | | | | |
| Weather: Sunny | | 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 |
| SJN9526Z | Car | | | | Slightly Damaged | 0 |
| SKC3016P | Car | | | | Seriously Damaged | 2 |



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

CONTINUATION OF REPORT

| Details of Vehicle Involved | | | | | | |
|-----------------------------|------|------|-------|-------|-------------------|-------|
| Vehicle No. | Type | Make | Model | Color | Conditio | No of |
| SMA6862E | Car | | | | Seriously Damaged | 0 |

| Details of Vehicle Insurance | | | | |
|------------------------------|---------------------------------|--------------|-----------|-------------|
| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
| SKC3016P | AXA INSURANCE SINGAPORE PTE LTD | | | |

| Details of Person Involved | | | |
|-----------------------------------|----------------------|-----------------------------------|-----------------------------------|
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Vehicle Owner | | | |
| Name | WINNIE TOH SHU HSIEN | ID No. | S7607969B |
| Related Vehicle | SKC3016P (Car) | Contact No. | 92705496 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry | Class: NIL Date of Expiry: NIL |
| Date | 18/05/2022 | Date | 18/05/2022 |
| No. of Days granted Medical Leave | 03 | Degree of | Slight |
| Passenger | | | |
| Name | TAY LI HUI AMELIA | ID No. | S9010877H |
| Related Vehicle | SKC3016P (Car) | Contact No. | NIL |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry | Class: NIL Date of Expiry: NIL |
| Date | NIL | Date | NIL |
| No. of Days granted Medical Leave | NIL | Degree of | NIL |



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

Report No. T/20220519/7039

CONTINUATION OF REPORT

| Driver | | | |
|-----------------------------------|--------------------|--|--|
| Name | GOH ZHI WEI MELVYN | | ID No. S8231946H |
| Related Vehicle | SKC3016P (Car) | | Contact No. 90402010 |
| Hospital/Clinic | NIL | | Class of Driving Licence & Expiry Class: 3 Date of Expiry: NIL |
| Date | NIL | | Date NIL |
| No. of Days granted Medical Leave | NIL | | Degree of NIL |

Brief Details.

I was traveling along AYE towards Tuas before Clementi Road Exit, my husband Goh Zhi Wei Melvyn was the driver.

The vehicle in front of us came to a stop, my husband followed suit. Suddenly, I felt a big impact from the rear of my vehicle.

I got off and found out I was involved in a three vehicle chain collision accident.

I wish to mention that I have another friend on my vehicle.

I visited Healthlife Family Clinic after the accident and was given 3 days MC.

I feel pain in my back.



**SINGAPORE
POLICE FORCE**



T/20220519/7039

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

4 of 4

Report No. T/20220519/7039

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 /
MUHAMMAD NOOR BIN ABDUL RAHMAN
Contact No.: 65476219

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

Date/Time:
19/05/2022 21:47

Classification Of Case:

For Insurance Reporting And
Claim Purposes Only

REPUBLIC OF SINGAPORE

NATIONAL DIGITAL IDENTITY CARD



NAME

WINNIE TOH SHU HSIEN
(WINNIE TU SHUXIAN)

NRIC NO.

S7607969B



DATE OF BIRTH

14 MAR 1976

SEX

FEMALE

NATIONALITY / CITIZENSHIP

SINGAPORE CITIZEN

DATE OF ISSUE

07 APR 2006

ADDRESS

190 BUKIT BATOK WEST

AVENUE 6

#13-41

SINGAPORE 650190

^ Hide details



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8231946H

**For Insurance
Claim**





Name
GOH ZHI WEI MELVYN
(WU ZHIWEI, MELVYN)
吴志伟

Race
CHINESE

Date of birth
29-09-1982

Country/Place of birth
SINGAPORE

Sex
M



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8231946H

Name:
GOH ZHI WEI MELVYN
(WU ZHIWEI, MELVYN)

Birth Date: 29 Sep 1982
Issue Date: 12 Jun 2003

000563640A

5888237



NRIC No. S8231946H

**For Insurance Reporting And
Claim Purposes Only**

Date of issue
22-02-2018

APT BLK 180 BUKIT BATOK WEST AVENUE 6 #13-41
SINGAPORE 650180

NRIC No: S8231946H Date: 31/07/2020


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

PASS DATE
12 Jun 2003

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

NP 428A

Licence No: S8231946H





redefining / insurance

AXA Insurance Pte Ltd
 ☎ 1800 880 4888 (Within Singapore)
 (65) 6880 4888 (International)
 📠 (65) 6880 4740
 ✉ customer.care@axa.com.sg
 🌐 www.axa.com.sg

Certificate of Insurance

account number
17120

-Motor Vehicles (Third-Party Risks and Compensation) Act. (Chapter 189) - Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 -Road Transport Act, 1987 (Malaysia)
 -Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Policy details

| | | | |
|-----------------------------|--|--------------------|-------------------|
| Policyholder name | WINNIE TOH SHU HSIEN (WINNIE TU SHUXIAN) | Certificate number | GA581216 / 1 |
| Cover | Comprehensive | Chassis number | KMHDH41CMCU221453 |
| Plan name | Essential | Engine number | G4FGBU283598 |
| NCD applicable | 30% | | |
| Vehicle registration number | SKC3016P | | |
| Period of Insurance | from 21/08/2021 to 20/08/2022 (both dates inclusive) | | |
| Finance loan company | Maybank Singapore Limited | | |

Persons or classes of persons entitled to drive*

- (a) The usage of the vehicle by the Policy Holder (Insured) is not covered under this policy.
 (b) Any Named Driver as stated in the Policy:
 1. GOH ZHI WEI MELVYN (WU ZHIWEI, MELVYN)
 (c) Any person who is driving on the Policyholder's order or with their 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.

Limitation as to use*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
 The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, 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; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.
 * Limitations rendered inoperative by Section 8 of the Motor Vehicles (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.

| | | |
|---------------|-------------------------|------------|
| EXCESS | Basic Own Damage Excess | SGD 400.00 |
| | Windscreen Excess | SGD 100.00 |

An Additional Excess is applicable as follows:

1. S\$500 for unnamed *Authorised Driver*
2. S\$500 for declared *Young and Inexperienced Driver*
3. S\$5,000 for undeclared *Young and Inexperienced Drivers*. This additional excess is reduced to S\$2,500 if You have chosen AXA Premium Workshops.

Additional clauses & endorsements to your policy

Nil

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

AXA Insurance Pte Ltd

Authorised signature

Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third-Party Risks and Compensation Act (Cap. 189).
 The Premium Warranty Clause requires the premium to be paid in full within a specific period failing which there would be no liability under the policy, renewal certificate, endorsement etc.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

| | |
|---|---------------------------------|
| Vehicle Owner Particulars | |
| Owner ID Type: | Singapore NRIC |
| Owner ID: | 969B |
| Vehicle Details | |
| Vehicle No.: | SKC3016P |
| Vehicle to be Exported: | No |
| Intended Deregistration Date: | 18 May 2022 |
| Vehicle Make: | HYUNDAI |
| Vehicle Model: | ELANTRA 1.6 AT ABS D/AB 2WD 4DR |
| Primary Colour: | Silver |
| Manufacturing Year: | 2011 |
| Engine No.: | G4FGBU283598 |
| Chassis No.: | KMHDH41CMCU221453 |
| Maximum Power Output: | 95.6 kW (128 bhp) |
| Open Market Value: | \$13,572.00 |
| Original Registration Date: | 11 Aug 2011 |
| First Registration Date: | 11 Aug 2011 |
| Transfer Count: | 4 |
| Actual ARF Paid: | \$13,572.00 |
| Intended PARF Rebate Details | |
| PARF Eligibility: | Forfeited |
| PARF Eligibility Expiry Date: | - |
| PARF Rebate Amount: | \$0.00 |
| Intended COE Rebate Details | |
| COE Expiry Date: | 10 Aug 2026 |
| COE Category: | A - Car (1600cc & below) |
| COE Period(Years): | 5 |
| PQP Paid: | \$23,179.00 |
| COE Rebate Amount: | \$19,602.00 |
| Total Rebate Amount: | \$19,602.00 |
| Message | |
| Please note that the 5-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier. | |

The information contained herein is correct as at 18 May 2022

OK