

ASS. REC. BY:

REF:

CC3/CT1 2200 9570 / Lea3

39K

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: SHB 53320at Workshop m/s STRINGSof W. WOODLUMS Ind PR 09Insured: CTI

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: _____ days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SHB 53320 Yr Regn: 2016 / MAY

Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or _____

Make: TOYOTA PRIMS TAXI SARG C.C. 1798Colour MALON A/C: Insured / Std / NI / NASp. Reading 583843 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: 3T0KN364105767915Gen. Cond: Good / Fair / Poor / BurntSteering: Order / Jammed / Leaked / Burnt orBrake: Order / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 195/55R15

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or SAILUN

Front _____ Rear _____

R/Bal. 6 mm R/Bal. 6 mmL/Bal. 6 mm L/Bal. 6 mmD.O.A. 28/09/22 D.O.I. 28/09/22Survey held at STRINGS

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

O/S Frt

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

Date/Time, File Pass to?

☐ : Preli. Report

Days Of Repair: _____

1) _____
Date/Time, File Return to?☐ : Final Report

Resurvey No. of Trip: _____

2) _____

Add Fee:

☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

S + RS. \$ _____

Photos

Others

TOTAL

Report Format: _____

Lump Sum / L.B. / C. _____

Case Details

Case Reference Number :

TAX/09/22/2075

Type of Repair : Accident Repair

Vehicle Registration Number :

SHB5332D

Company Type : Strides Taxi Pte Ltd

Estimation ID : EST-19450-ID

Assigned By : Taxi Claims Manager

Team

Insurance Company Name : China Taiping Insurance (Singapore) Pte Ltd

Accident Date and Time : 28/09/2022 12:30 AM

Vehicle Age(In Months) : -

Documents / Photographs

[View Documents / Photographs](#)

Total Documents: 0

Estimation Details

Spare Part's Cost Detail

BOM Type	Costing Type	Portion	Material Number	SMRT Recommendation							Surveyor Approval				Remarks
				Part Name	Qty	List Price Per Unit(\$)	List Price(\$)	Dis(%)	Final Price(\$)	Repair/ Replace	Surveyor Quantity	Surveyor Final Price(\$)	Repair/Replace		
One Time Key In	Main			FENDER FRT/RH	1	916.30	916.30	25.00	687.22	Replace	1	687.22	Replace	✓	bt
One Time Key In	Main			NAME PLATE (HYBRID)	1	59.20	59.20	25.00	44.40	Replace	1	44.40	Replace	✓	nt
One Time Key In	Main			FENDER PROTECTOR FRT/RH SIDE	1	129.90	129.90	25.00	97.43	Replace	0	0	Not Give	✓	X11
One Time Key In	Main			FENDER SEAL TO COWL SIDE RH	1	17.50	17.50	25.00	13.13	Replace	0	0	Check	✓	?
One Time Key In	Main			FENDER LINER FRT/RH	1	195.40	195.40	25.00	146.55	Replace	1	146.55	Replace	✓	der
One Time Key In	Main			FENDER LINER PAD, FR WHEEL RH	1	56.30	56.30	25.00	42.22	Replace	0	0	Check	✓	?
One Time Key In	Main			FENDER APRON SUB FRT/RH	1	724.00	724.00	25.00	543.00	Replace	1	0	Repair	✓	R
One Time Key In	Main			WHEEL DISC. FRONT	1	1,978.60	1,978.60	25.00	1,483.95	Replace	1	0	Repair	✓	R
One Time Key In	Main			TYRE	1	126.74	126.74	0.00	126.74	Replace	0	0	Not Give	✓	X11
One Time Key In	Main			SHOCK ABSORBER FRT/RH	1	475.80	475.80	25.00	356.85	Replace	0	0	Not Give	✓	X11
One Time Key In	Main			SHOCK ABSORBER MOUNTNG FRT,RH/LH	1	254.90	254.90	25.00	191.18	Replace	0	0	Not Give	✓	X11

Total Spare Part Cost 19,508.91

Surveyor Total 3,262.63

Lump Sum Discount (%) 20.00

Lump Sum Dis (%) 0

Final Spare Part Cost 15,607.13

Final Sur Total 3,262.63

BOM Type	Costing Type	Portion	Material Number	SMRT Recommendation					Dis(%)	Final Price(\$)	Repair/ Replace	Surveyor Approval			Remarks	BOM Type
				Part Name	Qty	List Price Per Unit(\$)	List Price(\$)					Surveyor Quantity	Surveyor Final Price(\$)	Repair/Replace		
One Time Key In	Main			SHOCK ABSORBER BEARING, FRT LH/RH	1	45.00	45.00	25.00	33.75	Replace	0	0	0	Not Give	✓	Xan
One Time Key In	Main			STABILIZER BAR LINK FRT/RH/LH	1	256.40	256.40	25.00	192.30	Replace	0	0	0	Not Give	✓	Xan
One Time Key In	Main			SIDE CHASSIC BRACE FRT/RH	1	119.30	119.30	25.00	89.47	Replace	0	0	0	Not Give	✓	Xan
One Time Key In	Main			STABILIZER BAR FRT	1	397.60	397.60	25.00	298.20	Replace	0	0	0	Not Give	✓	Xan
One Time Key In	Main			STEERING KNUCKLE RH FRT	1	764.30	764.30	25.00	573.22	Replace	0	0	0	Not Give	✓	Xan
One Time Key In	Main			WHEEL HUB FRT	1	722.10	722.10	25.00	541.58	Replace	0	0	0	Not Give	✓	Xan
One Time Key In	Main			LOWER ARM FRT/RH	1	823.20	823.20	25.00	617.40	Replace	0	0	0	Not Give	✓	Xan
One Time Key In	Main			JOINT ASSY, LWR BALL	1	257.20	257.20	25.00	192.90	Replace	0	0	0	Not Give	✓	Xan
One Time Key In	Main			TIE ROD END RH	1	210.20	210.20	25.00	157.65	Replace	0	0	0	Not Give	✓	Xan
One Time Key In	Main			STEERING RACK ASSY	1	2,108.50	2,108.50	25.00	1,581.38	Replace	0	0	0	Not Give	✓	Xan
One Time Key In	Main			CROSS MEMBER FRT	1	3,272.80	3,272.80	25.00	2,454.60	Replace	0	0	0	Not Give	✓	Xan
One Time Key In	Main			DRIVE SHAFT RH	1	1,537.20	1,537.20	25.00	1,152.90	Replace	0	0	0	Not Give	✓	Xan
Standard	Main			BUMPER FRT	1	602.60	602.60	25.00	451.95	Replace	1	451.95	451.95	Replace	✓	de
Standard	Main			CLIPS PIECE, FRT & RR BUMPER	10	4.80	48.00	25.00	36.00	Replace	10	36.00	36.00	Replace	✓	ne
Standard	Main			BUMPER SUPPORT F/RH	1	86.20	86.20	25.00	64.65	Replace	0	0	0	Check	✓	?
Standard	Main			BUMPER ENERGY ABSORBER FRT	1	97.60	97.60	25.00	73.20	Replace	0	0	0	Check	✓	?
Standard	Main			BUMPER REINFORCEMENT FRT	1	567.90	567.90	25.00	425.92	Replace	0	0	0	Check	✓	?
Standard	Main			ARM SUB-ASSY,FR BUMPER LH	1	284.00	284.00	25.00	213.00	Replace	0	0	0	Not Give	✓	Xan
Standard	Main			ARM SUB-ASSY,FR BUMPER RH	1	284.00	284.00	25.00	213.00	Replace	0	0	0	Not Give	✓	Xan
Standard	Main			DEFLECTOR, RADIATOR RH	1	94.30	94.30	25.00	70.73	Replace	0	0	0	Not Give	✓	Xan

Total Spare Part Cost 19,508.91

Surveyor Total 3,262.63

Lump Sum Discount (%) 20.00

Lump Sum Dis (%) 0

Final Spare Part Cost 15,607.13

Final Sur Total 3,262.63

12/2 5:17 PM

Face Remarks

SMRT Recommendation											Surveyor Approval			
BOM Type	Costing Type	Portion	Material Number	Part Name	Qty	List Price Per Unit(\$)	List Price(\$)	Dis(%)	Final Price(\$)	Repair/ Replace	Surveyor Quantity	Surveyor Final Price(\$)	Repair/Replace	Remarks
Standard	Main			BUMPER GRILLE SUB-ASSY, LOWER	1	389.90	389.90	25.00	292.42	Replace	0	0	Not Give	Xm
Standard	Main			COVER, FR BUMPER HOLE RH	1	21.40	21.40	25.00	16.05	Replace	0	0	Not Give	Xm
Standard	Main			WIRE, ENGINE ROOM, NO.3	1	318.50	318.50	10.00	286.65	Replace	0	0	Not Give	Xm
Standard	Main			THERMISTOR ASSY	1	142.30	142.30	10.00	128.07	Replace	0	0	Not Give	Xm
Standard	Main			FOG LAMP RH	1	335.60	335.60	10.00	302.04	Replace	0	0	Not Give	Xm
Standard	Main			BRACKET, FR TURN UPPER RH	1	32.30	32.30	25.00	24.22	Replace	0	0	Check	?
Standard	Main			BRACKET, FR TURN CENTER RH	1	76.60	76.60	25.00	57.45	Replace	0	0	Check	?
Standard	Main			BRACKET, FR TURN LOWER RH	1	34.40	34.40	25.00	25.80	Replace	0	0	Check	?
Standard	Main			LENS & BODY, FR TURN RH	1	581.40	581.40	10.00	523.26	Replace	1	523.26	Replace	cm
Standard	Main			EMBLEM FRONT	1	98.70	98.70	25.00	74.03	Replace	1	74.03	Replace	nee
Standard	Main			HOOD END PANEL SEAL	1	80.60	80.60	25.00	60.45	Replace	0	0	Not Give	Xm
Standard	Main			COVER, RADIATOR	1	139.30	139.30	25.00	104.48	Replace	0	0	Not Give	Xm
Standard	Main			GRILLE, RADIATOR	1	389.30	389.30	25.00	291.98	Replace	1	291.98	Replace	di
Standard	Main			GRILLE, RADIATOR LOWER NO.2	1	118.30	118.30	25.00	88.73	Replace	0	0	Not Give	Xm
Standard	Main			BUMPER LIP FRT	1	182.70	182.70	25.00	137.02	Replace	0	0	Not Give	Xm
Standard	Main			BUMPER FRT ABSORBER LOWER	1	159.30	159.30	25.00	119.48	Replace	0	0	Check	?
Standard	Main			UNDER COVER CENTER	1	511.20	511.20	25.00	383.40	Replace	0	0	Not Give	Xm
Standard	Main			UNDER COVER SIDE/RH	1	52.50	52.50	25.00	39.38	Replace	1	39.38	Replace	de
Standard	Main			UNDER COVER SIDE/LH	1	52.50	52.50	25.00	39.38	Replace	0	0	Not Give	Xm
Standard	Main			HOOD PANEL	1	988.50	988.50	25.00	741.38	Replace	1	0	Repair	h
Standard	Main			HOOD HINRE LH	1	63.70	63.70	25.00	47.78	Replace	0	0	Not Give	Xm
Standard	Main			HOOD HINGE RH	1	63.70	63.70	25.00	47.78	Replace	0	0	Not Give	Xm
Standard	Main			HOOD LOCK	1	146.10	146.10	25.00	109.57	Replace	0	0	Not Give	Xm

Total Spare Part Cost 19,508.91

Surveyor Total 3,262.63

Lump Sum Discount (%) 20.00

Lump Sum Dis (%) 0

Surveyor Approval

SMRT Recommendation														Surveyor Approval		Remarks
BOM Type	Costing Type	Portion	Material Number	Part Name	Qty	List Price Per Unit(\$)	List Price(\$)	Dis(%)	Final Price(\$)	Repair/ Replace	Surveyor Quantity	Surveyor Final Price(\$)	Repair/Replace			
Standard	Main			SUPPORT SUB-ASSY	1	1,839.70	1,839.70	25.00	1,379.78	Replace	0	0	Not Give	✓	Xin	
Standard	Main			HEAD LAMP RH	1	1,075.40	1,075.40	10.00	967.86	Replace	1	967.86	Replace	✓	CR?	
Standard	Main			SUPPORT RADIATOR, RH	1	72.00	72.00	25.00	54.00	Replace	0	0	Not Give	✓	Xin	
Total Spare Part Cost									19,508.91	Surveyor Total			3,262.63			
Lump Sum Discount (%)									20.00	Lump Sum Dis (%)			0			
Final Spare Part Cost									15,607.13	Final Sur Total			3,262.63			

Labour's Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO REPAIR FRONT RH PORTION	1,014.00	500	
Total:			1,014.00	500.00	

Spray Cost Detail



S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TO RESPRAY FRONT BUMPER	378.00	200	
2	Main	TO RESPRAY FRONT BUMPER LOWER GRILLE	180.00	0 Xin	
3	Main	TO RESPRAY FRONT HOOD	378.00	200	
4	Main	TO RESPRAY FRONT SUPPORT PANEL	180.00	0 Xin	
5	Main	TO RESPRAY FRONT FENDER RH	378.00	200	
6	Main	TO RESPRAY APRON PANEL RH	180.00	0 Xin	
7	Main	TO RESPRAY RIM	180.00	50	
Total:			1,854.00	650.00	

Other Cost Detail

S.No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
1	Main	TOWING CHARGE	58.00	0 Xin	request receipt
2	Main	TO WASH AND VACUUM	60.00	0 Xin	
Total:			756.00	100.00	

Sl. No.	Costing Type	Job Scope	SMRT Recommendation(\$)	Surveyor Adjustment(\$)	Remarks
3	Main	TO CHECK WIRING AND SYSTEM FUNCTION	120.00	0 <i>XIN</i>	
4	Main	TO APPLY RUST-PROOFING ON AFFECTED AREA	100.00	40.00	
5	Main	TO DO WHEEL ALIGNMENT / TYRE BALANCING	120.00	60 <i>/</i>	
6	Main	TO REMOVE AND REFIX UNDERCARRIAGE	200.00	0 <i>XIN</i>	
7	Main	TO REPLACE SUNDRY PARTS	100.00	0 <i>XIN</i>	
Total:			756.00	100.00	

Summary

	Estimator Assesment(\$)	Surveyor Assesment(\$)
Total Spare Part Detail	15,607.13	3,262.63
Total Labour Cost	1,014.00	500.00
Total Spray Painting	1,854.00	650.00
Other	756.00	100.00
Overall Total	19,231.13	4,512.63
Lump Sum Repair Option		<input checked="" type="checkbox"/>
Lump Sum Total	19,250.00	4,500.00
Surveyor Approved Amount		4,500.00
No of Repair Days*	6	5
Remarks	-	RESURVEY AFTER REPAIR / LUMP SUM REPAIR REQUEST NBV
Surveyor Name		Rasul
Signature		

Survey Date

28/09/2022

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer

Signature:

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 Actual 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	28/09/2022 14:52 (SGT)
Reported by	Driver
Date of Accident	28/09/2022 08:30 (SGT)
Exact Location of Accident	Choa Chu Kang Rd, Singapore
Additional Location Information	CHOA CHU KANG ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB5332D
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	Strides Taxi Pte Ltd
Company Reg No	1XXXXX369K
Email Address	AUTO-SVCS-TARC@SMRT.COM.SG
Mobile Phone No	(Phone) +65-68662671
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
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?	No - Claiming third party
Vehicle Category	Taxi
Transmission	Auto
CC	1800

INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Policy Number / Cover Note Number	D-22099115MFSH

DRIVER

Name of Driver	CHHI GIAK HWA
NRIC No	SXXXX679I
Date Of Birth	14/03/1959
Occupation	Outdoor

Date Of Driving Pass	23/10/1992
Driving experience	29 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-68662672
Alt. Phone Number	-
Email Address	AUTO-SVCS-TARC@SMRT.COM.SG
Address	11
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	UNKNOWN
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

AFTER I WAS DRIVING OUT FROM PHOENIX ROAD AND FILTERED INTO THE YELLOW BOX JUNCTION, TRYING TO FILTER INTO THE RIGHT LANE OF CHOA CHUA KANG ROAD INSIDE THE YELLOW BOX JUNCTION. THERE WAS A PRIVATE CAR NO. SNB6140M TRAVELLING ALONG THE THIRD RIGHT TURNING LANE COLLIDED ONTO MY FRONT RIGHT FENDER OF MY TAXI INSIDE YELLOW BOX.
THERE WAS A FEMALE INDIAN PASSENGER BUT SHE ALIGHTED AFTER ACCIDENT HAPPENED. SHE WAS NOT INJURED.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SNB6140M
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Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour
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)

Private car
ELAINE TOH YI LIN

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 Actual 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 Traffic Police Department for investigation.**
- 6 This report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- 7 By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes, and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes

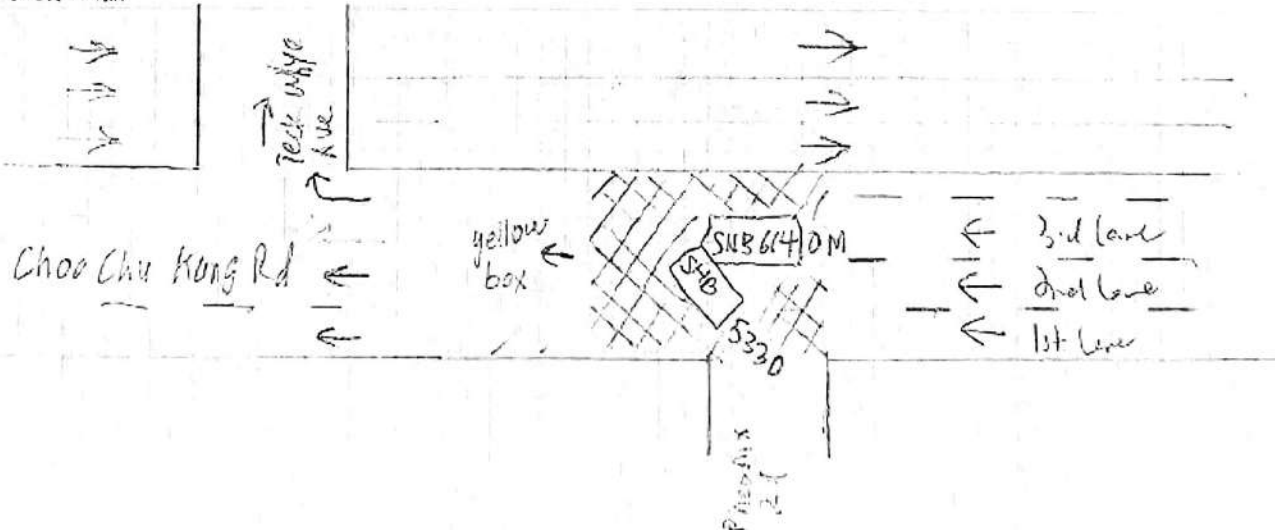


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel
(Name as in NR/CID card)

Sketch Plan



Describe Circumstance of the Accident

Lined area for describing the accident circumstances.

Declaration

I/We declare the foregoing particulars are true in every respect



Police Officer's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel
Name as in N.Y.C. ID card

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company

Owner ID: 369K

Vehicle Details

Vehicle No.: SHB5332D

Vehicle to be Exported: No

Intended Deregistration Date: 30 Sep 2022

Vehicle Make: TOYOTA

Vehicle Model: PRIUS TAXI (SMRT)

Primary Colour: Maroon

Manufacturing Year: 2015

Engine No.: 2ZR65B8295

Chassis No.: JTDKN36U105767915

Maximum Power Output: 100.0 kW (134 bhp)

Open Market Value: \$29,508.00

Original Registration Date: 13 May 2016

First Registration Date: 13 May 2016

Transfer Count: 0

Actual ARF Paid: \$5,000.00

Intended PARF Rebate Details

PARF Eligibility: Yes

PARF Eligibility Expiry Date: 12 May 2024

PARF Rebate Amount: \$3,250.00

Intended COE Rebate Details

COE Expiry Date: 12 May 2024

COE Category: A - Car up to 1600cc & 97kW (130bhp)

COE Period(Years): 8

PQP Paid: \$36,463.00

COE Rebate Amount: \$7,363.00

Total Rebate Amount: \$10,613.00

Message

Please note that the 8-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 30 Sep 2022