

# 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 : 21.12.2022

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 : SNG5765R / GBK1251D ON 13.11.2022

We are the authorized repair workshop for the owner of motor vehicle no: **SNG5765R** , which was involved in the captioned accident with your insured vehicle no: **GBK1251D** . 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)	\$ 3,210.00
2) Loss of RENTAL	\$ 300.00
3) GIA Search Fee	\$ 2.00
	<u>\$ 3,512.00</u>

We enclosed herewith the following documents to support the claims:

- |                                  |                                    |
|----------------------------------|------------------------------------|
| a) Final Repair Invoice          | b) Car Rental Invoice / Agreement  |
| c) GIA Search Report             | d) Letter of Authorisation, etc... |
| e) GIA Report                    | f) Police Report                   |
| g) I/C & Driving License         | 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**

China Taiping Insurance Singapore Pte Ltd

3 Anson Road

#16-00 Springleaf Tower

Singapore 079909

Attn : Motor Claim Department

Tax Invoice : 23255

Date : 19.12.2022

Vehicle No : SNG5765R

Make/Model : HYUNDAI TL TUCSON 1.6

Chassis/Eng# :

Accident Date : 13.11.2022

Claim No :

Reference : 1122 -23255

Policy No :

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	Amount
To proceed on lump sum repair	S\$ 3000.00

E. & O. E.

Total : S\$

3000.00

GST @ 7% : S\$

210.00

Amount Due : S\$

**3210.00**



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. **23007**

Name <b>LOY POH HONG</b>			REG. No. <b>SMM 5332L</b>	MAKE MODEL:	
ADDRESS <b>522 JELAPANG ROAD #12-297 SINGAPORE 670522</b>			DIESEL	PETROL	E 1/4 1/2 3/4 F
			KM IN	DATE & TIME IN <b>16.11.2022 @ 14:05p.m</b>	
			KM OUT	DATE & TIME OUT <b>14.11.2022 @ 14:50pm</b>	
			KM DRIVEN	TIME USED	
NAMED DRIVER <b>CHONG JIN CHENG</b>					
DRIVING LICENCE NO <b>S9116392 F</b>	DATE OF EXPIRY	PLACE OF ISSUE	HOURS	@ \$	
PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	<b>2</b> DAYS	@ \$ <b>150.00</b>	<b>\$ 300.00</b>
ADD NAMED DRIVER			WEEKS	@ \$	
DRIVING LICENCE NO	DATE OF EXPIRY	PLACE OF ISSUE	MONTHS	@ \$	
PASSPORT NO	DATE OF ISSUE	PLACE OF ISSUE	BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR COLLISION DAMAGES WAIVER (C.D.W.)		SUB-TOTAL
<b>IMPORTANT NOTES:</b> This vehicle is licenced to carry 04 passenger only. No refund will be given for vehicle returns early. No refund will be given for period left in vehicle. Hirer is liable to pay loss of earnings while damaged vehicle is under repair. Hirer is liable to pay all parking fee and traffic summonses. Vehicle return during office hour only. No service on public holiday and Sunday. Geographical areas: Singapore & West Malaysia. Driver must be: a) 18 years old and above. b) Holding a valid relevant class of driving license. The vehicle is strictly to be driven by the person to whom it is hired to and the additional driver named in the agreement. The hirer is not allowed to sub-let the vehicle to another party and subletting is not covered.			TOTAL RENTAL <b>\$ 300.00</b>		
			DELIVERY FEE		
			COLLECTION FEE		
<b>ADDITIONAL CONDITIONS:</b> <b>COMPREHENSIVE COVERED EXCESS:</b> *Section I – Used in S'pore only : SGD 2000.00      *Section I – Used outside S'pore : SGD 4000.00 *Section II – Used in S'pore only : SGD 1500.00      *Section II – Used outside S'pore : SGD 3000.00 *W/Screen Excess In S'pore : SGD 100.00      *W/Screen Excess Outside S'pore : SGD 100.00 <b>THIRD PARTY COVERED EXCESS:</b> *Hirer must bear all costs to the damages of the return vehicle *Section II – Used in S'pore only : SGD 1500.00 *Hirer must bear all costs to the damages of the return vehicle. *Section II – Used outside S'pore : SGD 3000.00 <b>YOUNG AND INEXPERIENCE DRIVER</b> Hirer or any authorized driver who is aged 22 years old (on the date of accident) and below or possess only 18 month or less driving experience. <b>COMPREHENSIVE COVERED EXCESS: (YOUNG AND INEXPERIENCE DRIVER)</b> *Section I – Used in S'pore only : SGD 6000.00      *Section I – Used outside S'pore : SGD 12,000.00 *Section II – Used in S'pore only : SGD 6000.00      *Section II – Used outside S'pore : SGD 12,000.00 *W/Screen Excess In S'pore : SGD 100.00      *W/Screen Excess Outside S'pore : SGD 100.00 <b>THIRD PARTY COVERED EXCESS: (YOUNG AND INEXPERIENCE DRIVER)</b> *Hirer must bear all costs to the damages of the return vehicle. *Section II – Used in S'pore only : SGD 6000.00 *Hirer must bear all costs to the damage of the return vehicle *Section II – Used outside S'pore : SGD 12,000.00 <b>Hirer is responsible for any costs to the THIRD PARTY DAMAGE / INJURY claims.</b>			BY INITIALLING, RENTER AGREES TO PAY ADD FEE FOR PERSONAL ACCIDENT INSURANCE (P.A.I.) <b>X</b> PER DAY \$      PER WEEK \$      PER MONTH \$		
			PREPAYMENT      TOTAL CHARGE CHECK      DEPOSIT CASH RECEIPT NO.      NETT CHARGE AMOUNT DUE / REFUND		

I HAVE READ THE TERMS AND CONDITIONS ON BOTH SIDES OF THIS RENTAL AGREEMENT AND AGREE THEREOF.

SIGNED BY THE PARTIES HERETO ON THE ..... DAY OF .....

**X**

RENTER'S/DRIVER'S SIGNATURE

**X**

DYNAMIC CAR RENTAL

# 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: LOY POH HONG

Invoice : DCR-2022-11-26

Date : 16.11.2022

Agreement No : 23007

Payment Terms : LOD

DESCRIPTION	AMOUNT
Rental charges for vehicle : <u>SMM5332L</u> ( 1122-23255 )	\$ 300.00
Rental Period from <u>14.11.2022</u> to <u>16.11.2022</u> .	
E. & O. E.	Total \$ <u>300.00</u>

KE LI  
for Dynamic Car Rental

INSURER ENQUIRY

## Find insurer

Vehicle reg. no.

GBK1251D

Date of Accident

13/11/2022



Reset

## % RESULT & RECEIPT

### TP Insurer Enquiry

Insurance ..... China Taiping Insurance (Sing...

Period of Insurance ..... 06/01/2022 - 05/01/2023

Requested By ..... ALLAN TANG (KIM CHWEE AUT...

Requested Date ..... 14/11/2022 14:34

#### 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**

DATE : 14.11.2022

TO : CHINA TAIPING INSURANCE SINGAPORE PTE LTD

RE : ACCIDENT INVOLVING VEHICLE NO. SNG 5765R / GBK 1251D

AND OTHERS

ALONG WHITLEY ROAD

ON 13.11.2022

I/We, LOY POH HONG

of (NRIC No./ROC No.) S16301786

of 522 JELAPANG ROAD #12-297 SINGAPORE 670522

owner of vehicle no. SNG 5765R in consideration of M/s FASTECH AUTO PTE LTD repairing my/our vehicle SNG 5765R at my/our instruction and hereby authorise M/s FASTECH AUTO PTE LTD to demand claim settlement whatever amount settled/payable by the Insurance Company and/or third party or to commence legal proceedings, 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 claimed and/or settled shall belong to them absolutely.

I/We further agree and undertake to indemnify them against the above-mentioned claim cost which may arisen therewith.

Signature of Owner :



Name of Owner :

LOY POH HONG

## 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	14/11/2022 17:16 (SGT)
Reported by	Driver
Date of Accident	13/11/2022 14:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	WHITLEY ROAD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNG5765R
-----------------------------	----------

#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LOY POH HONG
NRIC No	S1630178G
Email Address	LOYPOHHONG@GMAIL.COM
Mobile Phone No	(Phone) +65-81211459
Alternative Phone No	

#### VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Tucson
Variant	
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	Income Insurance Limited
Policy Number / Cover Note Number	5130032786

#### DRIVER

Name of Driver	CHONG JINCHENG
NRIC No	S9116392F
Date Of Birth	01/05/1991
Occupation	Indoor

Date Of Driving Pass	16/04/2013
Driving experience	9 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90671414
Alt. Phone Number	-
Email Address	JINCH3NG@GMAIL.COM
Address	522 JELAPANG ROAD #12-297 S670522
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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)	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	AMELIA PAN MIN
Gender	Female

#### 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

SEE ATTACHED POLICE REPORT

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	VIDEO WITH OWNER

#### DETAILS OF OTHER VEHICLE PROPERTY 1



Vehicle Registration Number	GBK1251D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
NRIC No	S8130502A
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	GBG3264A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	LIM BI SIOW GARY
NRIC No	T0210106D
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	CHONG JINCHENG
Gender	Male
Phone No	(Phone) +65-90671414
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	NECK AND BACK PAIN
Injured person in which vehicle?	SNG5765R
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

##### INJURED 2

Name of injured person	AMELIA PAN MIN
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	BACK AND NECK PAIN
Injured person in which vehicle?	-
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

**SKETCH PLAN**

**IMPORTANT NOTICE**

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any 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. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)  
I understand, acknowledge, agree and consent that:  
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police) for the purpose(s) of:  
(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;  
(ii) investigating the accident and/or my claims;  
(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;  
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or  
(v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")  
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and  
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

△
A
△
B
△
C

A = SNG 5765 R

B = GBK 1251 D

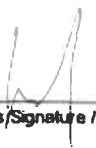
C = GBG 3264 A


**Describe Circumstances of the Accident**

Please Refer Police Report T/2022/11/4/7047 →

**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

3.15 pm  
14/11/22

  
Witnessed by Reporting Centre Personnel



# SINGAPORE POLICE FORCE



T/20221114/7047

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

1 of 3

Report No. T/20221114/7047

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 14/11/2022 13:51		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: CHONG JINCHENG			Address: 522 JELAPANG ROAD #12-297 SINGAPORE 670522		
ID Type / ID No.: NRIC NO / S9116392F			Contact No.: Home/Office: Mobile: 90671414		
Nationality: SINGAPORE CITIZEN			Email: JINCH3NG@GMAIL.COM		
Sex: Male	Age: 31	Date of Birth: 01/05/1991	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Loan Officer			Driving Licence Information: Class: 3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 13/11/2022 14:50	Type of Location: EXPRESSWAY
Location:  WHITLEY ROAD				
Weather: Heavy rain		Road Surface: Wet		Road Speed Limit:
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

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SNG5765R	Car					0

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20221114/7047

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

2 of 3

Report No. T/20221114/7047

**CONTINUATION OF REPORT**

<b>Passenger</b>			
Name	AMELIA PAN MIN	ID No.	9443937/Z
Related Vehicle	SNG5765R (Car)	Contact No.	90079469
Hospital/Clinic	FAMILY CARE CLINIC PTE LTD	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	14/11/2022	Date	NIL
No. of Days granted Medical Leave	03	Degree of	Slight
<b>Driver</b>			
Name	CHONG JINCHENG	ID No.	S9116392F
Related Vehicle	SNG5765R (Car)	Contact No.	90671414
Hospital/Clinic	FAMILY CARE CLINIC PTE LTD	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	14/11/2022	Date	NIL
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

On the 13/11/2022 (Sunday) at 2.50 pm, I was driving motorcar no. SNG 5765 R along Pan Island Expressway towards direction of Tuas near Whitley Exit on the second lane. When all of a sudden, a motorvehicle no. GBK 1251 D violently hit my motorcar from behind. As a result of this, I and my wife, Amelia Pan Min (NRIC No. S9443937/Z), who sat beside me felt pain on our neck and lower back because of the violent impact. When I came down to check, I saw another motorvehicle no. GBG 3264 A who had actually hit onto the motorvehicle no. GBK 1251 D.

I and my wife went to seek medical treatment at Family Care Clinic today and was given 3 days MC each for our injuries

I and my wife wish to claim for my personal injuries and consequential loss. I enclosed herewith my MC and my wife MC.



**SINGAPORE  
POLICE FORCE**



T/20221114/7047

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

3 of 3

Report No. T/20221114/7047

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

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

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

Date/Time:  
14/11/2022 13:51

Classification Of Case:



**REPUBLIC OF SINGAPORE**

**NATIONAL DIGITAL IDENTITY CARD**

For Insurance Reporting and  
Claim Purposes Only



NAME

**LOY POH HONG**

NRIC NO.

**S1630178G**



DATE OF BIRTH

**03 MAR 1964**

SEX

**FEMALE**

NATIONALITY / CITIZENSHIP

**SINGAPORE CITIZEN**

DATE OF ISSUE

**25 APR 2019**

ADDRESS

**522 JELAPANG ROAD**

**#12-297**

**SINGAPORE 670522**

^ Hide details



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S9116392F



Name

CHONG JINCHENG

钟 金 成

Race

CHINESE

Date of birth

01-05-1991

Country/Place of birth

SINGAPORE

Sex

M

S9116392F



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S9116392F

Name:

CHONG JINCHENG

Birth Date: 01 May 1991

Issue Date: 16 Apr 2013



002171359E



6832372

NPIC No. S9116392F



Date of issue

07-04-2022

Address

APT BLK 522 JELAPANG ROAD  
#12-297  
SINGAPORE 670522

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

EFFECTIVE DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 16 Apr 2013



Licence No: S9116392F

NP 428A



## 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:** 5130032786

**Cover :** drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SNG5765R**  
Chassis Number : **KMHJ3812VHU445159**
2. Name of Policyholder : **LOY POH HONG**
3. Effective Date of Insurance : **05 Sep 2022**
4. Expiry Date of Insurance : **04 Sep 2023**
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 headings.

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	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
ROADSIDE ASSISTANCE AND WELLNESS COVER	: YES
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: LOY POH HONG
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 : JIN-SHI (HOLDINGS) PTE LTD (00000614399)  
Date of Issue : 05 Sep 2022 11:26 hrs

**For INCOME INSURANCE LIMITED**



**Chief Executive**

> Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	178G
<b>Vehicle Details</b>	
Vehicle No.:	SNG5765R
Vehicle to be Exported:	No
Intended Deregistration Date:	14 Nov 2022
Vehicle Make:	HYUNDAI
Vehicle Model:	TL TUCSON 1.6 GLS T-GDI DCT 2WD
Primary Colour:	Black
Manufacturing Year:	2017
Engine No.:	G4FJHU426785
Chassis No.:	KMHJ3812VHU445159
Maximum Power Output:	130.0 kW (174 bhp)
Open Market Value:	\$21,914.00
Original Registration Date:	30 Mar 2017
First Registration Date:	30 Mar 2017
Transfer Count:	1
Actual ARF Paid:	\$22,680.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	29 Mar 2027
PARF Rebate Amount:	\$15,876.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	29 Mar 2027
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$48,209.00
COE Rebate Amount:	\$21,084.00
<b>Total Rebate Amount:</b>	<b>\$36,960.00</b>

The information contained herein is correct as at 14 Nov 2022

OK