

NATIONAL Assessment Centre Services

(Ref: 1-2000)

SN0822C0006

Date In: 02/12/2022 12/46	Job description	Date & Time Completed	Done by
Ref No: NBS/C71220/2082/Y	SAS e-filing		
Veh No: SJP 6514T	E-mail (within 3hrs, A/C 2hrs)		
D.O.A: 28/11/2022 13:00	I-Motor Claim Form		
OO: TP / Reporting Only	I-Motor W/O (within 24hrs, A/C 2hrs)		
	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Whse		

Preferred Wksp / NO Assign Wksp / QW: (Tel:	Fax:
TP Particulars: Veh No: J8V-691	INC () / Non-INC ()	
Owner / Driver: (Tel:	
Policy No: () Period: ()	Cover Type: ()	
Confirmed by: (Date:	Time:
Insured/Driver Liability: () % (Note: Est. Status (WO): N: 0-20%, P: 21-79%, P: 80-100%)		
Year of Registration: ()	Warranty: YES () / NO ()	
Excess: (\$)	Loading: \$1,000 () / \$2,000 ()	

General Remarks:

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repeller.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()

Remarks: () (INC Hotline: 0788 0016)	Date & Time Completed	Done by
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo (Repair Cost > \$3000) ()		

Injury: ()

Date/Time: ()

Actions: ()

Invoice Preparation Checklist:	Fee Charged	Fee Charged
1) AR: Accident Reporting (\$300)		
2) DA: Damage Assessment (\$1000) INC (\$50)		
3) TP: Towing Fee \$40/\$45		
4) FT: Follow-Through Survey \$120		
5) FT: Follow-Through Survey (Resurvey) \$30		
6) TR: Re-inspection \$75		
7) NI: NI/DA + DMRT Survey \$140		
8) NTUC Additional Services		
9) NI: NI/DA + DMRT Survey \$140		
10) NI: NI/DA + DMRT Survey \$140		
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1.2/3

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	02/12/2022 12:46 (SGT)
Reported by	Both
Date of Accident	28/11/2022 13:00 (SGT)
Exact Location of Accident	Jalan Serampang, Taman Sri Tebrau, Johor Bahru, Johor, Malaysia
Additional Location Information	ALONG KSL CITY JOHOR BAHRU
Country/State of Loss	Malaysia

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJP6574T
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	CHEA SIN (XU XIN)
NRIC No	SXXXX230E
Email Address	kennycha@yahoo.com.sg
Mobile Phone No	(Phone) +65-90189119
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Rush
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	1495

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNA00084722203

DRIVER

Name of Driver	CHEA SIN (XU XIN)
NRIC No	SXXXX230E
Date Of Birth	15/07/1973

* Occupation	Indoor
Date Of Driving Pass	13/05/1998
- Driving experience	24 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90189119
Alt. Phone Number	-
Email Address	kennycha@yahoo.com.sg
Address	63 PASIR RIS GROVE #01-07
Address complement	-
Postcode	518216
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	Yes
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)	5
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	-

FOREIGN VEHICLE 1

Vehicle Registration Number	JSV691
Vehicle Category	Private car

PASSENGER 1

Name	JERRY CHEA REE
Gender	Male

PASSENGER 2

Name	JESY CHEA HEE
Gender	Female

PASSENGER 3

Name	JESMIN CHEA MIN
Gender	Female

PASSENGER 4

Name	GUO SUPING
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	TRAFIK JOHOR BAHRU
Was notice of intended Prosecution given?	No

* If yes, against whom?

* CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN AND TRAFIK JOHOR BAHRU (S)/025219/22

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	JSV691
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	SIN CHIA HUEI
Passport No/FIN	8XXXXXXX5181
Contact Number	(Phone) +60-127272954
Address	-
Address complement	-
Postcode	-
Insurance Company Name	Liberty Insurance Pte Ltd
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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 NRIC/ID card)

Sketch Plan

(A) SJP6574T

(B) JSV691

JAKAL SERAMPANG
(JOHOR BAHRU)

Describe Circumstance of the Accident

on 28/11/2022 at around 1pm. I was drive car plate No. SJP6574T along KSL City to Singapore. when I drive along Jalan Seremban I stop for a u-turn. Suddenly motor car JSV691 Hit me from Behind. My Car damage from bumper, bonnet, sensor, spare tire and others Not Confirm.

TRAFIK JOMOR BAHARU (S) / 025219/22

Declaration

I/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
(Name as in NRIC/ID card)



POLIS DIRAJA MALAYSIA

REPOT POLIS

Balai : TRAFIK JOHOR BAHRU(S) Pegawai Penyiasat : R104724
 Daerah : J/BAHRU SELATAN No. Repot Bersangkut : TRAFIK JOHOR
 Kontinjen : JOHOR BAHRU(S)/025219/22
 No. Repot : TRAFIK JOHOR BAHRU(S)/025220/22
 Tarikh : 28/11/2022
 Waktu : 1344 PM
 Bahasa Diterima : B. Malaysia

Butir-butir Penerima Repot :

Nama : MUHAMMAD ARIF BIN MUSTAFHA No. Badan : R220237 Pangkat : KONST/P

Butir-butir Jurubahasa (Jika Ada) :

Nama : --- No. K/P (Baru) : --- No. Polis/Tentera : ---
 No. : --- Bahasa Asal : ---
 Pasport : ---
 Alamat : ---

Butir-butir Pengadu :

Nama : CHEA SIN No. Polis/Tentera : --- No. Pasport : K0949052R
 No. K/P (Baru) : --- Jantina : Lelaki Tarikh Lahir : 15/07/1973
 No. Sijil Beranak : --- Keturunan : Cina Warganegara : SINGAPORE
 Umur : 49 Tahun 4 Bulan
 Pekerjaan : BERNIAGA
 Alamat Tinggal : BLK 63 PESIR RIS FREVE #01-07, 518216 SINGAPORE
 Alamat IbuBapa : ---
 Alamat Pejabat : ---
 No. Tel (Rumah) : --- No. Tel (Pejabat) : --- No. Tel (Bimbit) : 6590189119
 Emel : ---

Pengadu Menyatakan :

PADA 28/11/2022 JAM LEBIH KURANG 1300HRS SEMASA SAYA MEMANDU M/KAR NO SJP6574T DARI KSL CITY HENDAK MENUJU SINGAPORE . APABILA TIBA DI JALAN SERAMPANG , SEMASA ITU SAYA BERHENTI UNTUK MEMBUAT PUSINGAN U DI HADAPAN , TIBA TIBA SEBUAH M/KAR NO JSV691 YANG BERADA DI BELAKANG SAYA TELAH MELANGGAR M/KAR SAYA DIBAHAGIAN BELAKANG. TIADA KECEDERAAN SEMASA KEMALANGAN . KEROSAKAN M/KAR SAYA DIBAHAGIAN (BELAKANG) ADALAH BUMPER , BONET , SENSOR , TAYAR SPARE DAN LAIN LAIN KEROSAKAN BELUM PASTI.SEKIAN LAPORAN DARI SAYA

Tandatangan Pengadu:

Tandatangan Jurubahasa(Jika ada):

Tandatangan Penerima Repot:

ID Pencetak | Tarikh @ Masa Cetak : R104724 | 28/11/2022 02:04:13 PM

SALINAN YANG DISAHKAN BENAR
(HANYA UNTUK TUNJUKAN SIVIL)

.....
KETUA TRAFIK DAERAH, JOHOR BAHRU, JOHOR

5

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 28/11/2022 (dd/mm/yy) Time of Accident: 13:00 (24-HR-FORMAT)
Vehicle No.: SJP6574T Vehicle Make & Model: TOYOTA RUSH 1.5 X AUTO
*Transmission: ☐ Manual ☒ Auto *C.c.: 1495 C.C
Exact location of Accident: ALONG KSL CITY TO JALAN SERAMPANG
Policyholder's Name: CHEA SIN (XU XIN) NRIC/FIN/REG No.: S7326230E
*Policyholder's email address: 63 PASIR RIS GROVE #01-07 SINGAPORE 518216
Driver's Name: CHEA SIN (XU XIN) NRIC/FIN/REG No.: S7326230E
*Driver's email address: kennychea@yahoo.com.sg
Driver's Contact No.: 90189119 Company Contact No (If any): N/A
Date of birth: 15.07.1973 Driving Pass Date: 13.05.1998
Driver's Address: 63 PASIR RIS GROVE #01-07 SINGAPORE 518216
Insurance Company: CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Policy No.: DMPCNA00084722203 Type of Coverage: Comprehensive Third Party / Third Party, Fire & Theft
Relationship between Owner & Driver: (Please CIRCLE one only)
Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify: _____
What do you wish to claim? (Please TICK one only)
☐ Own Insurance ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)
Type of Accident
☐ Chain Collision ☒ Head To Rear ☐ Side Swipe ☐ Other _____
Occupation (nature job) ☒ Indoor ☐ Outdoor *No. of Passengers / Including Driver: 5
*Passanger Name: Jerry Chea Ree Gender: Male / Female 1
*Passanger Name: Jesly Chea Hee, Jesmin Chea Min, Guo Suping Gender: Male / Female 3
Weather condition & Road conditions? (On the day of accident)
☒ Clear & Dry ☐ Raining & Wet ☐ After-Rain & Wet ☐ Drizzling & Wet / Others: _____
Was there any video captured by your car Car camera? ☐ Yes / ☒ No
Any Injuries: ☐ Yes ☒ No (If YES) Injured Person' Name: _____
Injuries Sustain: _____ Injured Person in Which Vehicle: _____
Police Report filed: ☒ Yes / ☐ No (If YES) Which Police Station: TRAFIK JOHOR BAHRU

The Other Party (S) Details:

1. Driver's Name / IC No: SIN CHIA HUEI 826610015181 Vehicle No: JSV691
Driver's Contact No: 760127272954 Insurance Company: LIBERTY INSURANCE BERHAD
2. Driver's Name / IC No (If Any): _____ Vehicle No: _____
Driver's Contact No: _____ Insurance Company: _____
*Independent Witness (If Any): _____ Contact No: _____
Preferred Workshop Name: _____ Contact No: _____

Motor Private Car

MX1F

R SN

AN0412A

Cov. Type: C

CERTIFICATE OF INSURANCEMotor 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)

CERTIFICATE No.		DMPCSNA00084722203	Engine No.: 3SZ2234605
			Cha. No.: J200E0024856
1. Index Mark and Registration Number of Vehicle	SJP6574T	AUTOSAFE	*****
2. Name of Policy Holder	CHEA SIN		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	01/04/2022 (00:00:00)	Named Drivers Ex Sect. I	\$500.00
		Additional Ex Other than Named Drivers:	
		Ex Sect. I - Age <= 25	\$3,000.00
4. Date of Expiry of Insurance	31/03/2023	Ex Sect. I - Age >= 26	\$500.00
		* Age as at date of accident	
		EX ON WINDSCREEN .	\$100.00
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 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:*			
Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward tuition driving test 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 the Motor Trade.			
Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled.			
One time Waiver of Excess for the first S\$500 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our Authorised Workshops for each Policy Year.			

* 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.

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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Chua Suat Lay Sally
Authorised Officer
Authorised Signatory

Vehicle Registration Details

Vehicle No. SJP6574T	Make/ Model TOYOTA/RUSH 1.5X A	Vehicle Scheme -
Current Propellant Petrol	Chassis No. J200E0024856	Vehicle Type Passenger Station Wagon/Jeep/Land Rover

Owner's Details

Owner Name:
CHEA SIN (XU XIN)

Owner ID Type:
Singapore NRIC

NRIC/Passport/Company Cert No.:
S7326230E

Registered Address
63 PASIR RIS GROVE #01-07 SINGAPORE 518216

Mailing Address:
-

Birth Date
15 Jul 1973

Registration Details

Previous Vehicle No.:
-

Effective Date of Ownership:
09 May 2017

Original Registration Date:
31 Mar 2009

Registration Date:
31 Mar 2009

No. of Transfers:
3

IU Label No.:
1028115037

Vehicle Specifications

Engine No.:
3SZ2234605

Chassis No.:
J200E0024856

Year of Manufacture:

Primary Colour:

2008

White

Secondary Colour:

Passenger Capacity:

-

4

Engine Capacity / Power Rating:

Maximum Power Output:

1495 cc / -

80.0 kW (107 bhp)

Max Unladen Weight:

Maximum Laden Weight:

1150 kg

1425 kg

Vehicle Attachment 1:

Vehicle Attachment 2:

No Attachment

-

Vehicle Attachment 3:

-

Additional Registration Fee (ARF) and COE Information

Open Market Value:

Additional Registration Fee Rate:

\$18,607.00

100.00 %

Actual ARF Paid:

Vehicle Lifespan Expiry Date:

\$18,607.00

No Lifespan

OPC Cash Rebate Eligibility:

QP during COE Bidding Exercise:

No

\$5,116.00

COE No.:

COE Expiry Date:

2009040101003231M

30 Mar 2024

COE Category:

COE Registration Category:

A - Car (1600cc & below)

A - Car (1600cc & below)

Quota Premium (QP) / Prevailing Quota
Premium:

PQP Paid

\$5,116.00 / -

\$12,763.00

QP (Regn Cat):

\$5,116.00

PARF Rebate Details

PARF Eligibility:

PARF Eligibility Expiry Date:

Forfeited

Minimum PARF Benefit:

-

Vehicle Emissions Details

CO2 Emission:

-

CO Emission:

-

HC Emission:

-

NOx Emission:

-

PM Emission:

-

Message:

The vehicle will be de-registered upon expiry of its 5-year COE on 30 Mar 2024. No further renewal will be allowed.

Printed on 02 Dec 2022 10:14:06

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