> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:		Singapore NRIC		
Owner ID:		140F		
Vehicle Details	A STATE OF THE STATE OF THE STATE OF		A STATE OF	
Vehicle No.:		SKG369U		
Vehicle to be Exported:		Yes		
Intended Deregistration Date:		24 Dec 2022		
Vehicle Make:		MERCEDES BENZ		
Vehicle Model:		GLA180 URBAN EDITION AUTO		.)
Primary Colour:	方商昭喷涤	Grey		
Manufacturing Year:	POON SIANG SEOW	2019	-	1
Engine No.:	Sin Ming Autocity	27091031923189		
Chassis No.:	No. 160 Sin Ming Drive #05-13 Singapore 575722	WDC1569422J669113	- 4	- 7
Maximum Power Output:	Tel: 64537511 Fax: 64538046	90.0 kW (120 bhp)		
Open Market Value:	Email: sitti1@singnet.com.sg	\$25,898.00	_	
Original Registration Date:		07 Jan 2020		
First Registration Date:		07 Jan 2020 —		
Transfer Count:		0 .		1
Actual ARF Paid:		\$28,258.00	R-ME M	3.2
Intended PARF Rebate Detail	Is A LOCAL CONTROL OF THE PARTY.	MAN ASSESSMENT ASSESSMENT	Delty Legisland	
PARF Eligibility:		Yes		
PARF Eligibility Expiry Date:		06 Jan 2030		
PARF Rebate Amount:		\$21,193.00		
Intended COE Rebate Detail		NAME OF TAXABLE PARTY.	THE PERSON NAMED IN	
COE Expiry Date:		06 Jan 2030		
COE Category:		A - Car up to 1600cc & 97kW (130	bhp)	
COE Period(Years):		10		
QP Paid:		\$32,889.00		
COE Rebate Amount:		\$23,137.00	方商昭	噴 漆
Total Rebate Amount:		\$44,330.00 pss	POON SIAN	G SEOW
e information contained herein is	correct as at 23 Dec 2022		Sin Ming Autocity No. 160 Sin Ming #05-13 Singapore Tel: 64537511 Famail: sitti1@sing	Drive 575722

POON STANCE STANCE SIN MINO STANCE ST





PRIVATE CAR POLICY SCHEDULE

Intermediary Code: 11F02709

Policy No. : D22MTPV01000106

S\$ 914.57

S\$ 64.02

S\$ 978.59

This Schedule is issued in accordance and should be read in conjunction with the terms, conditions and exceptions of the

PRIVATE CAR Policy wordings, ref. MTP.30

Insured

NG BOON KHEONG

Address

BLK 604A PUNGGOL ROAD

#12-768

SINGAPORE 821604

Business/Profession

MANAGER

INSURED DETAILS

Date of Birth & Age : 04 AUG 1979 & 42 years old

Driving Experience in : 16 years

Singapore

Identification Type : NRIC(Singaporean)

Marital Status: SINGLE

Gender: Male

Identification No.: S7922140F

PREMIUM DETAILS

Premium (incl. GST)

GST

Premium after applicable discount(s)

Period of Insurance

: 07 JANUARY 2022 00:00 TO 06 JANUARY 2023 23:59 Persons or Classes of Persons entitled to drive : Refer to Certificate of Insurance

Limitations as to use

: Refer to Certificate of Insurance

VEHICLE DETAILS

Vehicle Registration No.

SKG369U

: WDC1569422J669113

Chassis No. Engine No.

27091031923189

Vehicle Make & Model

MERCEDES BENZ GLA180

1.6 1600

Engine Capacity NCD Entitlement

: 50% 2020

Year of Registration

Yes

NCD Protection Estimated value of Vehicle

: Market value at time of loss

Hire Purchase Owner

: TOKYO CENTURY LEASING (S) PTE LTD

Coverage

Comprehensive - ExcelDrive PRESTIGE

Excess

\$ 500 - Section I

Voluntary Excess

N.A

Additional Excess

Young and/or Inexperienced, Drivers

S\$1.500 S\$3 000

Named

Un-named Young and/or Inexperienced Drivers Un-named All Other Drivers

S\$500

'Young Drivers' shall be defined as drivers (including the Insured) who are below 27 years old.

'Inexperienced Drivers' shall be defined as drivers (including the Insured) who have less than 1 year of

driving experience in Singapore roads.

Windscreen Excess

S\$100.00 for each and every applicable claim.

Endorsements

Applicable

Endorsement AA1 - ExcelDrive Prestige Plan

Endorsement D1 - Young and/or Inexperienced Drivers

Endorsement E - Excess Clause Endorsement H - Total Loss Endorsement L - Hire Purchase

Endorsement M - Inclusion Of Special Perils Endorsement P6 - Riot And Strike Endorsement Endorsement V - No Claim Discount Protection

Endorsement Z - Loss of Use Benefit

Additional Cover

NIL

SL0M22CN0002 / Lai Huat (Meng Kee) Motor Pte Ltd ENTRY DATE & TIME: 23/12/2022 13:06 (SGT) SUBMITTED BY: LHMK -3 VERSION: 1 (23/12/2022 13:06 (SGT))

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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 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 Reported by Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

23/12/2022 13:06 (SGT) 22/12/2022 15:30 (SGT) Orchard Rd, Singapore

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SKG369U

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

Email Address

Mobile Phone No

Alternative Phone No

No

NG BOON KHEONG

S7922140F

brucengboonkheong@hotmail.com

(Phone) +65-97321638

VEHICLE PARTICULARS

Manufacturer

Model

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 CC

Mercedes

Gla180

Private use

No - Claiming third party

Private car

Auto

1600

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

Sompo Insurance Singapore Pte. Ltd.

D22MTPV01000106

DRIVER

Name of Driver

NRIC No

Date Of Birth

Occupation

NG BOON KHEONG

S7922140F

04/08/1979

Outdoor



Date Of Driving Pass Driving experience

Gender

Mobile Number Alt. Phone Number

Email Address

Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

Vehicle Registration Number of Other Vehicle Owned by Driver

Insurance Company of Other Vehicle Owned by Driver

14/07/1999

23 YEARS AND 5 MONTHS

(Phone) +65-97321638

brucengboonkheong@hotmail.com Blk 604A Punggol Road #12-768

821604

Yes

No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions

Road Surface

Collision - Major/Minor Rd

Clear Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other vehicle or property damaged?

Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

Translator's name

Translator's ID

Translator's phone number

Translator's email

Original language used in the statement

No 2

Yes

No

Yes

1

No

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name Police Station Phone No

Alt. Police Station Phone No.

Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

Bedok Neighbourhood Police Post (Phone) +65-18002419999

(Fax) +65-64431687

Blk 15 Bedok South Road #01-117 Singapore 460015

No

CIRCUMSTANCES OF ACCIDENT

Please refer to the police report.

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera?

Reasons for not uploading a video of the accident

Yes

The video is with the repair workshop, Poon Siang Seow.

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer Vehicle Model

SKU6707P Honda Vezel



Vehicle Variant Vehicle Colour Vehicle Category

Vehicle Category Name of Driver NRIC No

Contact Number

Address

Address complement

Postcode

Insurance Company Name Nature Of Damage

Details of property damaged in accident No. Of Passenger (Including Driver)

-

Private hire TAN TIANG WEE S7635481B

(Phone) +65-91809524

-

-

-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person

Gender Phone No Address

Address Complement

Post Code

Approximate Age Years Old

Injuries Sustained

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

NG BOON KHEONG

Male

(Phone) +65-97321638

-

-

SKG369U

No.

Accident report SL0M22CN0002

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the plaints process.

 This Porth Aust be completed by the Police and of the Actual Driver.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of golicy liability on the part of the insurance companies

Any false reporting may be referred to the Traffic Police Department for investigation.

- is report will be forwarded by the insurers to the G.A. 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
- By the ladgement 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.

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

l understand, acknowledge, agree and consent that

- (a) My insurer, my workshop and the General insurance Association of Singapore (GIA) maybre 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 tirms, 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
- (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

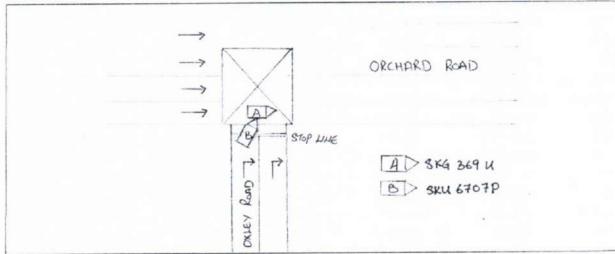
(collectively the Purposes)

- (b) all maurer(s) who have insured vehicle(s) involved in this accident and the Insurers, lawyers law firms, maylare 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

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

Name as - NRICID card SOH JIT HOON

Sketch Plan



LEFER	70	Pouce	REPORT	AMACHMENT	(RePORT No.	7/20221222/2121)
					7.0.	1/202012/2/2/2/)
						*/

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





1 of 4

Report No. T/20221222/2121

Police Station Of Origin: Bedok N.P.C

30 Bedok North Road SINGAPORE 469676

Tel No: 1800-2449999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/12/2022 23:59			Vide Report No.:	Station Diary No.: 167	
Informa	nt's Partici	ulars			
Name of Informant: NG BOON KHEONG			Address: APT BLK 604A PUNGGOL ROAD #12-768 SINGAPORE 821604		
ID Type / ID No.: NRIC NO / S7922140F			Contact No.: Home/Office:	Mobile: 97321638 -	
National SINGAP	ity: ORE CITIZ	EN	Email:		
Sex: Age: Date of Birth: Male 43 04/08/1979			Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: PROJECT MANAGER			Driving Licence Informati Class: 3	on: Date of Expiry:	

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 22/12/2022 15:30	Type of Location T-Junction
Location: ORCHARD R Weather:	COAD	Road Surface:	1	Road Speed Limit:
Clear Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collis	ion: ving Vehicles - Head	d To Side	6	Anyone conveyed by ambulance:

Details of V	entrie mvo	iveu				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
SKG369U	Car	MERCEDES BENZ	GLA180 URBAN EDITION AUTO	Grey	Seriously Damaged	0
SKU6707P	Car	HONDA	VEZEL	Black	Slightly Damaged	0

Details of Vehicle Insurance			
Vehicle No. Insurance Company	Insurance No	Effective	Expiry Date





T/20221222/2121

2 of 4

Report No. T/20221222/2121

Police Station Of Origin: Bedok N.P.C 30 Bedok North Road SINGAPORE 469676

Tel No: 1800-2449999

CONTINUATION OF REPORT

Details of V	ehicle Insurance	Parada and a second		
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKG369U	TENET SOMPO INSURANCE PTE.	D22MTPV0100010 6	07/01/2022	06/01/2023

Details of Person	n Involved		enrollers y			
Any Pedestrian Ir	volved: No		VIOLEN IS	34.000		
No. of Pedestrian			Use of Pedestrian Crossing: NA			
Driver					30	
Name	NG BOON KHEONG		ID No.		S7922140F	
Related Vehicle	SKG369U (Car)		Contact No.		97321638	
Hospital/Clinic	CHANGI GENERAL H		Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL	
Date Treatment	22/12/2022	Date Disch			2/2022	
The state of the s	ted Medical Leave	02	Degree of	Injury	Slight	t
Driver •			ere or a miles			
Name	TAN TIANG WEE			ID No		S7635481B
Related Vehicle	SKU6707P (Car)			Contact No.		91809524
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL		Date Disch	narge	NIL	
	ited Medical Leave	NIL	Degree of	Injury	NIL	

Brief Details.

On the 22/12/22 at about 1530hrs I was driving along Orchard Road. I was on my way to a project site. As I approach junction between the Orchard Road and Oxley Road, suddenly I felt a big impact from the right side of my vehicle. I immediately applied my brakes. I exited from the passenger door of my car as the driver door was jammed. One black Honda Vezel, SKU6707P had hit on the right side of my vehicle. The right side of my vehicle was badly dented and has a lot of scratches. The driver door of my car was jammed.

I spoke to the other driver and exchanged particulars. A police car came however the other driver and I have already shifted our vehicles. I informed the police that everything was fine, and the police left. I did not suffer any physical injuries at that moment. Later today, I felt pain on my right upper chest and I went to Changi General Hospital to seek treatment. I was discharge on the same day and given medical leave for 2 days, 22/12/22 to 23/12/22. I already informed the other driver informing him of my injuries.





3 of 4

Report No. T/20221222/2121

Police Station Of Origin: Bedok N.P.C 30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999

CONTINUATION OF REPORT





4 of 4

Report No. T/20221222/2121

Police Station Of Origin: Bedok N.P.C 30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report: Signature Of Informant: G/ SR STAFF SGT MUHAMMAD FIKRI BIN MOHD FADIL Signature Of Interpreter: Date/Time: Not applicable 22/12/2022 23:59 Officer In Charge Of Case: Classification Of Case: TP / AEIT / SR STAFF SGT FAHKRUL RAZI BIN SUHAIME Contact No.: 65470000



Sin Ming Autocity, No. 160 Sin Ming Drive, #05-13, Singapore 575722. Tel: 6453 7511 Fax: 6453 8046 Email: sitti1@singnet.com.sg Regn. No. 05396600K

Ng Boon Kheong Apt Blk 604A Punggol Road #12-768 Singapore 821604

Dear sir

Estimate cost of repair to vehicle no. SKG369U

To supply

991.41 1. Front fender right OU/ GT 218.77 -2. Front fender arc garish CN PUR 580.12 \$ 80 3. Wheel rim 4. Front door 1794 R 2,249.10 — 123.11 X 5. Front door channel ne 234.20 -6. Front door rubber Dis/70 631.68 2 7. Front door power motor and gear nd/6 831.80 -745 8. Rocker garish R 1,820.10 -9. Rear door Ma 234.20 -10. Rear door rubber May 80.00 -11. Rear door sticker m 90.00 -12. Door rivet20x4.5 ar 229.80 -10% 13. Rear fender arc garish Labour charges NA 100.00 X Rust proofing 1,200.00 Panel beating 1,000.00 6601 Spray painting 10,614.29 Total

> LKK Auto Consultants hence notify the Repairer of the following:

NOT Norhanke

C/Sing & 7000/1
Plesurry After Pains
5 days

- 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:

Date:



Sin Ming Autocity, No. 160 Sin Ming Drive, #05-13, Singapore 575722.

Tel: 6453 7511 Fax: 6453 8046 Email: sitti1@singnet.com.sg Regn. No. 05396600K

The successful and a successful successful and the successful succ

Ng Boon Kheong Apt Blk 604A Punggol Road #12-768 Singapore 821604

Dear sir Supplementary for vehicle no. SKG369U 483

1. Front right door lock

Front door right board
 Total

Mg cm 850.00 - 1,500.00

Your faithfully

ALBERT POON

ear