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: 18.03.2023

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: SGX 846S / SNJ 8018D ON 07.03.2023

We are the authorized repair workshop for the owner of motor vehicle no: SGX 846S , which was involved in the captioned accident with your insured vehicle no: SNJ 8018D . 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.

		\$ 7,394.00
3)	GIA Search Fee	\$ 2.00
2)	Loss of Rental	\$ 480.00
1)	Cost of Repair (inclusive of GST)	\$ 6,912.00

We enclosed herewith the following documents to support the claims:

a) Final Repair Invoice

c) GIA Search Result

e) GIA Report

g) I/C & Driving License

i) Vehicle Registration Log Card

b) Car Rental Invoice / Agreement

d) Letter of Authorisation, etc...

f) Police Report

h) Insurance Certificate

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

Tax Invoice: 23408

AIG Asia Pacific Insurance Pte Ltd

Chartis Building

78 Shenton Way #07-16

Singapore 079120

Attn: Motor Claim Department

Date

:15.03.2023

Vehicle No

:SGX 846S

Make/Model TOYOTA SIENTA 1.5G A

Chassis/Eng#

Accident Date : 07.03.2023

Claim No

Reference

0323 -23408

Policy No

Amount

To proceed on lump sum repair

S\$

6400.00

E. & O. E.

Total: S\$

6400.00

GST @ 8% : S\$

512.00

Amount Due: \$\$

6912.00

for FASTECH AUTO PTE LTD



Cash/Cheque No.

DAWN ENTERPRISES

21 SELETAR WEST FARMWAY 1 SINGAPORE 798125 TEL: 6383 2661 FAX: 6484 2836

REG. NO. 430058/00D

No. 20903

OFFICIAL RECEIPT

8 No MONO VA ROO ZWON B. MoW. Pate,

11 3 1 1

Received from

the sum of Dollars

DAWN ENTERPRISES

AND WAR AND TO BE AND TO BE





21 Seletar West Farmway 1 Singapore 798125 Tel: 63832661 Fax: 64842836

Reg No.430058/00D

RENTAL AGREEMENT

Nº 38687

DATE 7/3/33

HIRER'S PARTICUL	ARS		DRIVER'S PARTICULA	RS		
Name Shahendre	Redzuan Bin	Mohamed Noor	Name		<u> </u>	
Address 446 Tamp	ines St 42 #06	-36	Address			
Singapore			-			
I/C or Passport No. S82:	96767 Country		I/C or Passport No	Count	ry	
Occupation		-20	Occupation			
Date of Birth	Age		Date of Birth	Age		
Driving Licence No.	Date Pass	ed	Driving Licence No.	Date F	Passed	
Tel: (HP)	(Residence)		Tel: (Office)	(Reside	nce)	
	IMPORTANT NOTES:		CHARGES			
No Insurance Coverage if the This vehicle is licenced to call Hirer is liable to pay first sof earning while damaged vehicles.	ne driver is below 24yrs old or less passengers passengers as excess all enicle is under repair.		A Day at \$170,00	per days	00.08A £	
4 For usage to Malaysia suject	at to higher excess all claims of S\$:		Day at \$	per week		
6 No refund will be given for v 7 No refund will be given for p	etrol left in vehicle		Day at \$	per monur		
Vehicles to be return during 10 No Service on Public Holida	•	111111	TOTAL AMOUNT		\$ 480.00	
SKZ 8565	2 Don	MODEL	AMOUNT PAID		\$ 480.00	
			BALANCE DUE			
Date	Time	Mileage	Days Extension From	То		
7/5/2						
11/3/25			Amount Deposit (refundable)	\$		
FROM	7/3/23		то	3/23		

I/we have read and understood the terms and conditions above and hereby agreed to abide

Hirer's Signature

Driver/Gurantor's Signature

DAWN ENTERPRISES

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SNJ8018D

Date of Accident

07/03/2023

Reset

% RESULT & RECEIPT

TP Insurer Enquiry Insurance AIG Asia Pacific Insurance Pte.... Period of Insurance 25/10/2022 - 24/10/2024 Requested By ALLAN TANG (KIM CHWEE AUT... Requested Date 07/03/2023 14:07

Payment details

Request Amount: **\$\$1.85** GST Amount: **\$\$0.15**

Total Amount Due (GST Inclusive): \$\$2

General Insurance Association

Records Management Centre GST Registration No: **M400017735**



AUTHORIZATION TO ACT (AIG Asia Pacific – EXPRESS THIRD PARTY CLAIM)

1. Shahendra Redzuan Bin Mo	hamed Nar ("the third party claimant")
of 446 Tampines street 42 # 06-36	
	vehicle no.) hereby authorize
("the workshop") to act for me with resp	ect to my claim for repair costs and/or
rental and/or loss of use ("claim") for my	vehicle no. S6x 8465 that was
damaged pursuant to the accident which	occurred on 07.03.202 (date) along
involving vehicle no/s SNJ 801	075 (location)
involving vehicle no/s SNJ 801	§ 0 ("the accident").
payment furtherto settlement of my claim favour of the workshop. I further acknowledge that any settlem	· · · · · · · · · · · · · · · · · · ·
behalf is on a without prejudice and with	•
as the driver/owner/insurers of the other	, ,
Date thisday of	arch (month) 20 23 (year)
Signed by "the third party claimant"	Signed by "the workshop"
orgined by the time party trainlant	מולוומת הא מוש אתועצווה

SP1823370006 / PROGRESSIVE CAR CARE PTE LTD ENTRY DATE & TIME: 07/03/2023 17:06 (SGT) SUBMITTED BY: Lily Lim Buay Hiang VERSION: 1 (08/03/2023 11:51 (SGT))

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 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 07/03/2023 17:06 (SGT) Reported by Both Policyholder and Actual Driver **Date of Accident** 07/03/2023 12:55 (SGT) **Exact Location of Accident** 1 Bilal Ln, Singapore 469075 **Additional Location Information** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **SGX846S**

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SHAHENDRA REDZUAN BIN MOHAMED NOOR NRIC No S8229676Z **Email Address** shahendraredzuan@gmail.com Mobile Phone No (Phone) +65-98587434 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Toyota Model Sienta 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? Vehicle Category

Transmission CC

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number

Auto & General Insurance (Singapore) Pte. Limited.

No - Claiming third party

Private car

P10773570R00

Auto

1500

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

SHAHENDRA REDZUAN BIN MOHAMED NOOR S8229676Z 11/10/1982 Indoor

Date Of Driving Pass 18/12/2007

Driving experience 15 YEARS AND 3 MONTHS

Gender Male

Mobile Number (Phone) +65-98587434

Alt. Phone Number

Email Address shahendraredzuan@gmail.com Address 446 TAMPINES ST 42 #06-36

Address complement

Postcode 520446

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 - Major/Minor Rd

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?

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 ABDUL RAHMAN ATTAMIMI BIN ABU BAKAR

Gender Male

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

REFER TO ATTACHED STATEMENT RECORDED BY LILY - PROGRESSIVE CAR CARE PTE LTD 67415336

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 Yes

W/OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SNJ8018D
Vehicle Manufacturer	-
Vehicle Model	
Vehicle Variant	3 - 8
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TAY MENG SENG
NRIC No	S1380098G
Contact Number	3
Address	4
Address complement	-
Postcode III III III III III III III III III I	(e)
Insurance Company Name	18 1
Nature Of Damage	(#)
Details of property damaged in accident	
No. Of Passenger (Including Driver)	77.5

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	ABDUL RAHMAN ATTAMIMI BIN ABU BAKAR
Gender	7 148
Phone No	t # 2
Address	(*)
Address Complement	
Post Code	
Approximate Age Years Old	(a)
Injuries Sustained	w ==2
Injured person in which vehicle?	SGX846S
Were seat belts worn?	i (#E
Was this injured conveyed to hospital by ambulance?	*
INJURED 2	
Name of injured person	SHAHENDRA REDZUAN BIN MOHAMED NOOR
Gender	s = 2
Phone No	
Address	•
Address Complement	y ===
Post Code	 Y :⊇9
Approximate Age Years Old	(a)
Injuries Sustained	à 3 - 2
Injured person in which vehicle?	SGX846S
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	2

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 (at insurers) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers' law yers/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;

- (i) investigating the accident and/or my claims,
- (ii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the making 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) at insurer(s) who have insured vehicle(s) involved in this accident and the insurers' law yers/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 law yers/faw firms), which may be sited outside of Singapore, for one or more of the above Purposes.

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

Sketch Plan

A = SG X 846 S
B = SNJ 80 8 D

Describe Circumstances of the Accident

On 07.03.2023

nd	turnin	9	oils	lane.	Sulla	nly.	havi	2 0	vehic	le (s	e Ius	OBO) comp	out
rom	they	house	1	Bilal	Lone	and	his	aus	cdl	ided	with	my	vehicle	2
SG	× 84	65)								_				
_							_							
		_	-									_		_
_							_					_		
-											_			
eclar	ation													
We dec	lare the f	oregoing	particular	s are true	e in every	respect								,
	W.				8	1								
olicyhol	/ lder's Sig	nature / D	ate &	Driver's		re (II drive	er is not	the polic	yholder)	/ Date		essed by onnel	Reporting	Centre

1255 hrs. I was trevelling along bedok



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00 Singapore 048580 Tel (65) 6224 0010 Fax (65) 6224 0030 Operating Hours : Monday to Friday, 09:00 – 17:00 UEN: \$66550020G / GST Reg. No.: M400017735

<u>IMPORTANT NOTE</u>: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre

	with whom you submitted the Original Report.
	ADDENDUM
A }	PARTICULARS OF PERSON MAKING THE AMENDMENTS:
	Original Report No: SP1823370006 Vehicle Registration No: SGX 846S
	Name(as shown in NRIC): Shahendra Redzuan Bin Mohamed NOOT NRIC/FIN/PassportNo: \$ 82296762
	(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
	Address : 446 TAMPINES STREET 42 # 06-36 Singapore(500446
	Contact (Tel) : 9858 7434Mobile No.:
	Email Address : Shahendrared zuan @ gmail. com
	Date of Accident: 12: 15 hrs
	Place of Accident : 1 Bilai Lane
	Insurance Company: Budget Direct
B)	ADDITIONALINFORMATION / AMENDMENTS:
	I have made a report on the above mentioned accident and would like to include additional information or
	make the following amendments:
	was the accident reported to the police = No -> Yes
	refer to police report : T/20230307 17096
9	

Policyholder / Driver's Signature Date:

Reporting Centre Personnel's Signature

Name:

NRIC/FINNo.:

Date:





Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20230307/7096

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/03/2023 22:02			Vide Report No.:	Station Diary No.:		
Informant's	s Particul	ars				
Name of Informant: SHAHENDRA REDZUAN BIN MOHAMED NOOR			Address: 446 TAMPINES STREET 42 #06-36 SINGAPORE 520446			
ID Type / ID NRIC NO /		8Z	Contact No.: Home/Office:	Mobile: 98587434		
Nationality: SINGAPOR		N	Email: SHAHENDRAREDZUAN@GMAIL.COM			
Sex: Male	Age: 40	Date of Birth: 11/10/1982	Type of Informant: Driver			
Race: Malay			Language: English	Institution / School Name:		
Occupation:			Driving Licence Information: Class: 3 Date of Expiry:			

General Inform	ation of the Acci	dent				
Type of Accident:	Injury Others		Drink Drive: No	Date/Time of Accident: 07/03/2023 12:5	5	Type of Location: Straight Road
Location:						20
BILAL LANE						
Weather:			Surface:			d Speed Limit:
Clear		Dry			20 K	ím/h
Traffic Flow:		Traffic	Control:		Traff	fic Volume:
Two Way		Not Co	ontrolled		No T	raffic
Type of Collision Between Movir	on: ng Vehicles - Head	d To Side			,	one conveyed by ulance:

Details of Vehicle Involved							
Vehicle No.	Туре	Make	Model	Color	Conditio	No of	
SGX846S	Car	TOYOTA	SIENTA 1.5G A	Brown		0	
SNJ8018D	Car	AUDI		White		0	

Details of V	ehicle Insurance		34, vill molecule	SURVIVE N
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date





2 of 3

Report No. T/20230307/7096

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

CONTINUATION OF REPORT

Details of Vehicle Insurance								
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date				
SGX846S	AUTO & GENERAL INSURANCE	P10773570R00	31/08/2022	30/08/2023				
	(SINGAPORE) PTE, LIMITED							

Details of Perso	n Involved	100	0.0	16 19		N 1993 may 1 1 19 12 1
Any Pedestrian II						
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
Driver		enter i gan de la				
Name	SHAHENDRA REDZUAN BIN MOHAMED NOOR			ID No.		S8229676Z
Related Vehicle	SGX846S (Car)			Contact No.		98587434
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL			Class of Driving Licence & Expiry		Class: 3 Date of Expiry: NIL
Date	07/03/2023 Date		07/03/20		3/2023	
No. of Days granted Medical Leave 03			Degree of	f Slight		
Driver					THE .	
Name	TAY MONG SENG			ID No.		S1380098G
Related Vehicle	SNJ8018D (Car)			Contact No.		NIL
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		NIL	Degree of NIL		NIL	

Brief Details,

On 7 March 2023 at about 1255hrs,I was travelling along Bedok Road turning into Bilal Lane. Suddenly a vehicle (SNJ8018D) came out of the house no.1 Bilal Lane and collided with my vehicle (SGX846S). My passenger (Abdul Rahman Attamimi bin Abu Bakar) and i went to the A&E and received 3 days Medical leave (8/3-10/3). Evidence of the incident was captured in my dashcam and has been forwarded to my insurance company.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20230307/7096

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 07/03/2023 22:02
Officer In Charge Of Case: TP / TPIB / TAN JEOK LENG LESLIE Contact No.: 65476151	Classification Of Case:

NP168

REPUBLIC OF SINGAPORE

NATIONAL DIGITAL IDENTITY CARD





or insurance A SHAHENDRA REDZUAN BIN MOHAMED NOOR

NRIC NO. S8229676Z



DATE OF BIRTH 11 OCT 1982

SEX MALE

NATIONALITY / CITIZENSHIP SINGAPORE CITIZEN

DATE OF ISSUE 14 JUN 2013

ADDRESS 446 TAMPINES STREET 42 #06-36 SINGAPORE 520446



DRIVING LICENCE

REPUBLIC OF SINGAPORE



LICENCE NO. S8229676Z



CLASS AND ISSUE DATE

2B • 27 MAR 2004

2A • 16 AUG 2005

2 · 31 OCT 2006

3 • 18 DEC 2007

CERTIFICATE OF MERIT ELIGIBLE

DEMERIT POINTS

CARD SERIAL NO. 001173672F

Hide details





■ Show NRIC



Certificate of Insurance

Comprehensive Car Policy Policy Number: P10773570R00

Motor Vehicles (Third-Party Risks And Compensation) Act 1960 of Singapore, Motor Vehicles (Third-Party Risks And Compensation) Rules of Singapore, Road Transport Act 1987 of Malaysia, Road Transport (Amendment) Act 2019 of Malaysia, Motor Vehicles (Third-Party Risks) Rules, 1959 of Malaysia, or any Amendment, Act or Acts passed in substitution thereof.

Certificate Number P10773570R00 (Comprehensive / Named Driver Plan)

1) Vehicle Registration Number

SGX846S

Chassis Number

NSP1707030093

2) Effective Date / Time of Commencement

31/08/2022 (00:00)

of Insurance for the Purpose of the Act

31/08/2022 (00:00)

3) Date / Time of Expiry of Insurance

30/08/2023 (23:59)

4) Excess (i) Policy (ii) Windscreen

S\$ 600.00 S\$ 100.00

5) Policyholder

SHAHENDRA REDZUAN BIN MOHAMED NOOR

6) Persons or Classes of Persons Entitled to Drive*

Drivers named as a Main / Named Driver in this Certificate of Insurance only.

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 any reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act 1961 of Singapore and its registration under the said Road Traffic Act has not been cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.

Main Driver / Date of Birth

SHAHENDRA REDZUAN BIN MOHAMED NOOR(11/10/1982)

Named Driver(s) / Date of Birth

KHUZAIMAH BTE ABDUL HAGUE (04/06/1984)

7) Limitation as to use*

Use only for social, domestic and pleasure purposes. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or 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.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960 of Singapore and Section 95 of the Road Transport Act 1987 of Malaysia, are not to be included under these headings.

8) Finance Company

NA

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 1960 of Singapore and Part IV of the Road Transport Act 1987 of Malaysia or any Amendment, Act or Acts passed in substitution thereof.

Issued in Singapore on 14/07/2022

Auto & General Insurance (Singapore) Pte. Limited *Trading as Budget Direct Insurance*

Simon Birch Chief Executive Officer

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars				
Owner ID Type:	Singapore NRIC			
Owner ID: Vehicle Details	676Z			
Vehicle No.:	SGX846S			
Vehicle to be Exported:	No			
Intended Deregistration Date:	07 Mar 2023			
Vehicle Make:	TOYOTA			
Vehicle Model:	SIENTA 1.5G A			
Primary Colour:	Brown			
Manufacturing Year:	2016			
Engine No.:	2NR8609856			
Chassis No.:	NSP1707030093			
Maximum Power Output:	80.0 kW (107 bhp)			
Open Market Value:	\$19,773.00			
Original Registration Date:	31 Aug 2016			
First Registration Date:	31 Aug 2016			
Transfer Count:	1			
Actual ARF Paid: Intended PARF Rebate Details	\$9,773.00			
PARF Eligibility:	Yes			
PARF Eligibility Expiry Date:	30 Aug 2026			
PARF Rebate Amount: Intended COE Rebate Details	\$6,352.00			
COE Expiry Date:	30 Aug 2026			
COE Category:	A - Car up to 1600cc & 97kW (130bhp)			
COE Period(Years):	10			
QP Paid:	\$52,503.00			
COE Rebate Amount:	\$18,263.00			
Total Rebate Amount:	\$24,615.00			

The information contained herein is correct as at 07 Mar 2023