

ASS. REC. BY:

PASW

REF:

CS/CT120007340/R1/f3

857R

## ASSIGNMENT

From:

Date:

Estimated Cost:

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

To Inspect Vehicle No: SMS 2970H

at Workshop m/s WAGNES

of 249, ALGANDRA RD

Insured:

CTI

Policy No.

Claims No.

Sum Insured:

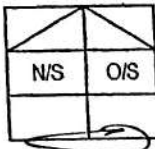
Excess:

(Client's Record)

Make of Veh:

(Policy Condition)

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



Bal. or Market Value:

165K

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:

SMS 2970H

Yr Regn:

2020/FEB

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

Truck / Trailer or

Make:

Vowos 90 TS momentum c.c. 1969

Colour:

Grey

A/C: Insured / Std / NI / NA

Sp. Reading

14980

T/Radio: Insured / Std / NI / NA

Eng/No:

C/No:

W4PS10ADLP080125

Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / SRim / STD A/Rim or

Tyre Size:

F:

245/45R18

R:

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

TOYO / YOKO or

Front

Rear

R/Bal.

6

mm

R/Bal.

6

mm

L/Bal.

6

mm

L/Bal.

6

mm

D.O.A.

23/03/2020

D.O.I.

16/07/2020

Survey held at

WAGNES

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

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

Date / Time

Action / Instruction

Finalised amount of \$ 11,152.32 / 5 days of repair is confirmed

(red: \$6,714.55; 37%)

Date/Time, File Pass to?



Preli. Report

1)



Final Report

Date/Time, File Return to?

2)

Report Format:

Lump Sum / L.B.A. (\$ 11,152.32)

Days Of Repair:

5

Resurvey No. of Trip:

Add Fee:



Site Insp (\$



Interview (\$



Tech. Invs (\$



Weekend (\$

Survey Fee:

Transportation:

\$ + RS. \$

Photos

Others

TOTAL

# SERVICE ESTIMATE

77430 - C00001 SL: SERVICE SALES - PC  
Backho (S) Pte Ltd  
100 Lorong 23 Geylang  
#07-01 D'Centennial

Singapore 388398

Closed by .... : Michelle Ong Siew Be  
Svc Consultant :  
Remarks ..... : Backho (S) Pte Ltd

GST Reg.No:M28920628X  
Inv.No. . : B&P 0 Page 1  
Inv.date. : 23/03/2020  
WIP No. . : 15490  
Veh.In/Out:  
\*Tel.No. . : Mobile: 93235950  
Reg.No. . : SMS2970H  
Reg.date . : 20/02/2020  
Mileage ... : 0  
Chassis No: LVYPS10ADLP080125

Op.No	Description	Mech Qty	Price	Disc%	Pkg	Amount	G
-------	-------------	----------	-------	-------	-----	--------	---

802	TO REPLACE REAR BUMPER, SKID PLATE, REINFORCEMENT, BOOTLID, SENSORS, BRACKETS, EMBLEMS, ETC	0	3200.00	0		<del>3,200.00</del> S 1600	
800	TO PUTTY AND SPRAY PAINT ON REAR BUMPER, BOOTLID, ETC	0	2100.00	0		<del>2,100.00</del> S 1400	
280	TO CHECK WIRING INCLUDE RESETTNG OF ALL ELECTRICAL MODULES	0	495.00	0		495.00 S	
802	TO TRANSFER BOOTLID PARTS	0	350.00	0		<del>350.00</del> S 250	
802	TO REPLACE EXHAUST SYSTEM	0	800.00	0		800.00 S ?	
	BUMPER COVER REAR T5	1.0 EA	1442.10			1,442.10 S	
	TOW COVER REAR S90 1	1.0 EA	75.40			75.40 S	
	BUMPER BRACKET REAR	1.0 EA	80.80			80.80 S	
	BUMPER SPACER LHR SV	1.0 EA	80.80			80.80 S	
	BUMPER SPACER RHR SV	1.0 EA	80.80			80.80 S	

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:

Rasul  
Hp 90010068  
5 days  
16/07/2020 @ 1100  
Reay before paint

# SERVICE ESTIMATE

77430 - C00001 SL: SERVICE SALES - PC

Backho (S) Pte Ltd  
100 Lorong 23 Geylang  
#07-01 D'Centennial

Singapore 388398

Closed by .... : Michelle Ong Siew Be  
Svc Consultant :  
Remarks ..... : Backho (S) Pte Ltd

GST Reg.No:M28920628X  
Inv.No. . : B&P 0 Page 2  
Inv.date. : 23/03/2020  
WIP No. . : 15490  
Veh.In/Out:  
\*Tel.No. . : Mobile: 93235950  
Reg.No. . : SMS2970H  
Reg.date. : 20/02/2020  
Mileage . : 0  
Chassis No: LVYPS10ADLP080125

Op.No	Description	Mech Qty	Price	Disc%	Pkg	Amount	G
	BUMPER RETAINER LHR ?	1.0 EA	29.20			29.20	S
	BUMPER RETAINER RHR ?	1.0 EA	29.20			29.20	S
	PARK HOLDER LHR CTR <i>re</i>	1.0 EA	30.50			30.50	S
	PARK HOLDER RHR CTR <i>re</i>	1.0 EA	30.50			30.50	S
	PARK HOLDER LHR CORN <i>re</i>	1.0 EA	48.20			48.20	S
	PARK HOLDER RHR CORN <i>re</i>	1.0 EA	48.20			48.20	S
	PARK HOLDER LHR SIDE <i>re</i>	1.0 EA	27.40			27.40	S
	PARK HOLDER RHR SIDE <i>re</i>	1.0 EA	27.40			27.40	S
	CLIP <i>re</i>	10.0 EA	13.50			135.00	S
	PROTECTING PLATE REA <i>de</i>	1.0 EA	452.40			452.40	S
	BUMPER CLIP S90 17- <i>re</i>	10.0 EA	5.70			57.00	S
	BUMPER BRACKET LHR S ?	1.0 EA	47.60			47.60	S
	BUMPER BRACKET RHR S ?	1.0 EA	47.60			47.60	S
	BUMPER BRACKET LHR E ?	1.0 EA	4.60			4.60	S
	BUMPER BRACKET RHR E ?	1.0 EA	4.60			4.60	S
	CAMERA BRACKET REAR ?	1.0 EA	69.20			69.20	S
	PROTECTION ?	1.0 EA	12.80			12.80	S

# SERVICE ESTIMATE

77430 - C00001 SL: SERVICE SALES - PC

Backho (S) Pte Ltd  
100 Lorong 23 Geylang  
#07-01 D'Centennial

Singapore 388398

GST Reg.No:M28920628X

Inv.No. . : B&amp;P 0 Page 3

Inv.date. : 23/03/2020

WIP No. . : 15490

Veh.In/Out:

\*Tel.No. . : Mobile: 93235950

Reg.No. . : SMS2970H

Reg.date. : 20/02/2020

Mileage . : 0

Chassis No: LVYPS10ADLP080125

Closed by .... : Michelle Ong Siew Be

Svc Consultant :

Remarks ..... : Backho (S) Pte Ltd

Op.No	Description	Mech Qty	Price	Disc%	Pkg	Amount	G
	CAMERA REAR ALL SPA ?	1.0 EA	777.40			777.40	S
	BUMPER RAIL REAR S90 ?	1.0 EA	1330.90			1,330.90	S
	END PIPE RH T5 S90 1 ?	1.0 EA	166.10			166.10	S
	END PIPE LH T5 S90 1 ?	1.0 EA	166.10			166.10	S
	END PIPE CHROME XC90 ?	2.0 EA	129.10			258.20	S
	HEAT SHIELD ?	1.0 EA	353.50			353.50	S
	EXTERIOR ADHESIVE GL <i>rec</i>	2.0 EA	145.00			290.00	S
	ADHESIVE TUBE CHEMIC X	1.0 EA	703.80			703.80	S
	BOOT REAR S90 17- <i>bt</i>	1.0 EA	2088.90			2,088.90	S
	HINGE X	1.0 EA	168.30			168.30	S
	HINGE X	1.0 EA	168.30			168.30	S
	EMBLEM 'VOLVO' REAR <i>rec</i>	1.0 EA	86.90			86.90	S
	EMBLEM 'S90' S90 17- <i>rec</i>	1.0 EA	79.70			79.70	S
	EMBLEM 'T5' XC60 S80 <i>rec</i>	1.0 EA	89.80			89.80	S
	Emblem 'AWD' XC90 16 X	1.0 EA	79.70			79.70	S
	POLESTAR EMBLEM WHIT X	1.0 EA	81.20			81.20	S

Gross Total. 16,695.10

Labour Total 6,945.00  
Parts Total 9,750.10  
Package Total 0.00

Net..... 16,695.10  
GST @ 7.0% 1,168.66  
Total..... 17,863.75  
Paid..... 0.00  
Please Pay.. 17,863.75

GST: S=StdRated; O=OutOfScope; Z=ZeroRated



# SAPORE ACCIDENT STATEMENT

## STANT NOTICE

Complete and submit this Form to Allied World's Authorised Reporting Centre ("ARC") for e-filing.

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

3. This Form must be completed by the Policyholder and/or the Authorised Driver.

4. 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.

5. The issue and acceptance of this Form by Insurance companies is not an admission of policy liability on the part of the insurance companies.

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

## ACCIDENT STATEMENT

Date and Time of Accident

Date: 23.03.2020 Time: 08:18

Exact Location of Accident

PLE towards Tuas (Near Adam Ex

## DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMS 2970 H

## INSURED / POLICYHOLDER (OWN VEHICLE)

Name of Registered Owner (See Insurance Cert.)

Back-Ho (S) Pte Ltd.

Personal Identification - NRIC (Singaporean/PR)

200805897R

- FIN/Passport Number

- Not Applicable

## VEHICLE PARTICULARS (OWN VEHICLE)

Vehicle Make / Model

Manufacturer Volvo Model S40

Type of Vehicle\*

☒ Saloon ☐ MPV ☐ CRV ☐ Van ☐ Lorry  
☐ Bus ☐ M/cycle ☐ Others, \_\_\_\_\_

Exact Purpose for which vehicle was being used at time of accident

Social

Are you claiming under your own insurance policy for repair to your vehicle?

☐ Yes ☒ No (If No, Pls select: ☒ Third Party ☐ Reporting)

Vehicle Category\*

☒ Private ☐ Commercial ☐ Motorcycle

## INSURANCE COMPANY (OWN VEHICLE)

Name of Insurance Company \*

Alh

Type of Policy

☒ Comprehensive ☐ Third Party Fire & Theft ☐ TP Only

Fleet Policy

☐ Yes ☒ No

Policy Number

2070012470

Motor CI

## DRIVER

☐ Same as Insured above

Name of Driver

KIM DONG AUM

Personal Identification - NRIC (Singaporean/PR)

- FIN/Passport Number

G 6424246 L

Date of Birth

27 dd/ 08 mm/1980/yy

Driving Date Pass

31 dd/ 08 mm/2016/yy

Year of Driving Experience

20 Year(s) Month(s)

Occupation

Construction Manager ☐ Indoor ☒ Outdoor

Gender

☒ Male ☐ Female

Contact Number / Mobile Phone / Fax No.

9323 5950

Class of Driver	198 Jalan Eunos	
Mail Address	#05-30 Tower 13	Postcode (419543)
Was driver an employee of the Insured's Company?	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If No, Relationship of the Driver with the Insured		
Vehicle Registration Number of Driver's Own	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Vehicle Registration Number of Driver's Own Vehicle (if applicable)		
Insurance Company of Driver's Own Vehicle (if applicable)		
<b>GENERAL INFORMATION OF THE ACCIDENT</b>		
Type of Collision (Eg. Chain collision, Head-On collision, Side Swipe, Front to Rear)	Head to Rear	
Weather Conditions	<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Raining <input type="checkbox"/> Others, _____	
Road Surface	<input checked="" type="checkbox"/> Dry <input type="checkbox"/> Wet <input type="checkbox"/> Others, _____	
<b>OTHER INFORMATION</b>		
Was any foreign vehicle involved in this accident?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Was any body injured in the accident?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Was any other vehicle or property damaged?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Was there any video captured by Car Camera?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Number of Passengers (Including Driver)	1	
<b>DETAILS OF POLICE ACTION</b>		
Was the Accident reported to the Police?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, please state which Police Station.)	
Police Station Name		
Police Station Address		
Police Station Contact	Tel No.	Fax No.
Was notice of intended Prosecution given?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, against whom?)	
<b>DETAILS OF OTHER VEHICLE / PROPERTY 1</b>		
Vehicle Registration Number	445 2970H	
Vehicle Make/ Model/ Colour	John 690 Fine Grey	
Details of Properties		
Name of Driver	K Chong Yit Huet Calvin	
Personal Identification - NRIC (Singaporean/PR)	S7713916H	
- FIN/Passport Number		
Contact Number		
Address		
Name of Insurance Company		
Nature of Damage		
No. of Passenger (Including Driver)		
(Note - Please use page 6 if you need to add more vehicles.)		

## SKETCH PLAN

### URGENT NOTICE

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

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 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' 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 w ith 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 w ell as on the external cover of envelopes/mail packages); and/or

(v) complying w ith applicable law in administering, processing, handling and/or dealing w ith 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

Witnessed by Reporting Centre Personnel

### Sketch Plan

Sketch Plan diagram showing a road layout with arrows indicating direction of travel. The diagram is drawn on a grid. The road is labeled "PIE towards TUES" at the top. There are five horizontal arrows pointing right, representing lanes of traffic. Below the arrows, there are two rectangular boxes labeled "B" and "A" with arrows pointing right, indicating a specific area or intersection. To the right of the diagram, there are handwritten notes: "A: SMS 297011" and "B: SFN 2323K".

23/3/2020 8:18 am near PIE Adam road exit  
I had a accident with my car.


The car in front of me had sudden break and I did a  
same but behind of me, Vens car could not stop and  
hit my car from behind.

**IMPORTANT NOTE**

Under General Condition – Conduct of Claim of the Motor Policy, you have to decide within 21 days of occurrence or discovery of damage whether or not to claim under the policy. Please check your policy for more information.

**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 \_\_\_\_\_



## SINGAPORE ACCIDENT STATEMENT

CNIX-4

### IMPORTANT NOTICE

This report correctly the details of the accident to speed up the claims process.  
This report must be completed by the Policyholder and/or the Authorised Driver.  
Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to  
issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.  
Any false reporting may be referred to the Police for investigation.  
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.  
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 Report	23/03/2020 16:20
Date Of Accident	23/03/2020 08:15
Exact Location Of Accident	PIE TOWARDS TUAS (NEAR ADAM EXIT)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMS2970H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	BACKHO (S) PTE LTD
Co Reg No	2XXXXX897R
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93235950
Alternative Phone No	OFFICE-93235950
<b>Vehicle Particulars</b>	
Manufacturer	VOLVO
Model	S90-2.0 T5 MOMENTUM (A)
Exact Purpose for which vehicle was being used at time of accident	SOCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
<b>Insurance Company</b>	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2070012470
Cover Note Number	
<b>Driver</b>	
Name of Driver	KIM DONGBUM
Passport No/FIN	GXXXXX246L
Date Of Birth	29/08/1980
Occupation	INDOOR
Date Of Driving Pass	31/08/2016
Driving Experience	3 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93235950
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

198 JALAN EUNOS  
#05-30 TOWER 13  
419543

Is the Driver an employee of the Insured's Company YES  
Relationship of the Driver with the Insured  
Registration Number of Driver's Own  
Insurance Company of Driver's Own Vehicle

### 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 this accident? NO  
Number of vehicles (including own vehicle)  
involved in the accident 2  
Was any body injured in the Accident? NO  
Was any injured conveyed to hospital by  
ambulance? NO  
Was any other material or property damaged? YES  
I have been approached by unknown person(s)  
soliciting/offering accident claims assistance. NO  
Number of Passengers (Including Driver) 1

### Details of Police Action

Was the accident reported to the police? NO  
If Yes, Please state which Police Station  
Was notice of intended Prosecution given? NO  
If Yes, against whom?

### Circumstances of Accident

REFER TO ATTACHMENT.

### Attachment(s)

Are accident photos available for attachment? YES  
Was there any video captured by Car Camera? YES  
Was there any audio recorded? NO

### DETAILS OF OTHER VEHICLE PROPERTY

Vehicle Registration Number SFN2323K  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver CHONG YIT HUAT CALVIN  
NRIC/Passport Number SXXXX916H  
Contact Number  
Address  
Postcode  
Insurance Company Name CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.  
Nature Of Damage  
No. Of Passenger (Including Driver)

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	897R
Vehicle No.:	SMS2970H
Vehicle to be Exported:	No
Intended Deregistration Date:	16 Jul 2020
Vehicle Make:	VOLVO
Vehicle Model:	S90 T5 MOMENTUM
Primary Colour:	Grey
Manufacturing Year:	2019
Engine No.:	B4204T233156877
Chassis No.:	LVYPS10ADLP080125
Maximum Power Output:	187.0 kW (250 bhp)
Open Market Value:	\$38,681.00
Original Registration Date:	20 Feb 2020
First Registration Date:	20 Feb 2020
Transfer Count:	0
Actual ARF Paid:	\$46,154.00

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	19 Feb 2030
PARF Rebate Amount:	\$34,615.00

COE Expiry Date:	19 Feb 2030
COE Category:	E - Open - all except motorcycle
COE Period(Years):	10
QP Paid:	\$38,000.00
COE Rebate Amount:	\$35,595.00
Total Rebate Amount:	\$70,210.00

The information contained herein is correct as at 16 Jul 2020

OK



## ► Volvo S90 T5 Momentum

[Overview](#)[Financial](#)[Accessories](#)[Similar](#)[Research](#)[Photos](#)[Map](#)

# WEARNES PRE-OWNED

**Price** \$162,000

**Depreciation** \$14,790 /yr  
View models with similar depre

**Reg Date** 22-Nov-2019  
(9yrs 4mths 5days COE left)

**Mileage** 9,000 km

**Manufactured** 2018

**Road Tax** \$1,176 /yr

**Transmission** Auto

**Dereg Value** \$72,999 as of today (change)

**OMV** \$39,504

**COE** \$40,101

**ARF** \$47,306

**Engine Cap** 1,969 cc

**Power** 187.0 kW (250 bhp)

**Curb Weight** 1,695 kg

**No. of Owners** 1

**Type of Vehicle** Luxury Sedan

### Features

250bhp, 350Nm, 4 Cylinder Inline 16 Valve Turbocharged, 0 To 100Km/h At 6.8 Secs, 8 Speed Automatic, FWD, Dynamic Chassis, WHIPS, SIPS, City Safety. View specs of the Volvo S90 (2016)