

ASS. REC. BY: P. Khan

REF: CS/CTI 20009600/Riy #3

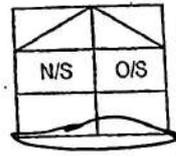
650F

ASSIGNMENT

From: _____ Date: _____
Estimated Cost: _____
OD / TP / WS / TP RES / OD RES / EVA / INV / MV
To Inspect Vehicle No: SMH 6424A
at Workshop m/s TC AUTO CLINIC
of 25, LEWA KCB 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: 57K
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: SMH 6424A Yr Regn: 2019 / Jan
Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or _____
Make: NISSAN NOTE 1.2 CVT c.c. 1198
Colour: GREY A/C: Insured / Std / NI / NA
Sp. Reading: 1024 T/Radio: Insured / Std / NI / NA
Eng/No: _____
C/No: JMITAAE12 20982557
Gen. Cond: Good / Fair / Poor / Burnt
Steering: In order / Jammed / Leaked / Burnt or _____
Brake: In order / Jammed / Leaked / Burnt or _____
Modi: Nil / S/Rim / STD A/Rim or _____
Tyre Size: F: 185/65R15
R: _____
BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
TOYO / YOKO or CONTINENTAL
Front R/Bal. 6 mm Rear R/Bal. 6 mm
L/Bal. 6 mm L/Bal. 6 mm
D.O.A. 04/09/2020 D.O.I. 09/09/2020
Survey held at TC AUTO CLINIC
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

Date/Time, File Pass to? : Preli. Report
 : Final Report
Date/Time, File Return to?

Days Of Repair: _____
Resurvey No. of Trip: _____

Add Fee: : Site Insp (\$ _____)
 : Interview (\$ _____)
 : Tech. Invs (\$ _____)
 : Weekend (\$ _____)

Survey Fee:

Transportation: _____	TOTAL
_____ S + RS. _____ SI	
Photos _____	
Others _____	

Report Format: _____
Lump Sum / I.E.H. (\$) _____

TC AUTOCLINIC PTE LTD
25 LENG KEE ROAD
SINGAPORE 159097

ESTIMATE : ACCIDENT/BODY REPAIRS
WORKSHOP : LENG KEE
CONTACT NO : 67038511
REFERENCE : 116/IC/TCAC/SAY/2020
DATE : 05-SEP-2020

CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD
3 ANSON ROAD
#16-00 SPRINGLEAF TOWER
S(079909)
TEL : 63896111
FAX : 62247175

OWNER'S NAME : MR LIM BING LIANG MAX (LIN BINGLIANG)
ADDRESS : BLK 29 GHIM MOH LINK
#38-320
S(270029)
TELEPHONE NO :

TYPE OF CLAIM : DIRECT SETTLEMENT / THIRD PARTY CLAIM
POLICY NO : 1900010807-01
VEHICLE NO : SMH6424A
MODEL CODE : TDWARDZE12EDAY520Z
MODEL/YEAR : NISSAN NOTE 1.2 (V) MY 2018
ENGINE NO : HR12260323J
CHASSIS NO : JN1TAAE12Z0982557
MILEAGE : 7618 KM
DATE IN : 05/09/2020
LIABILITY : 0.00
EXCESS CLAUSE : 0.00
ESTIMATE BY : SAYEDINAH
ACCIDENT DATE : 04/09/2020

AUTOCLINIC PTE LTD
 LENG KEE ROAD
 SINGAPORE 159097

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE REGN NO SMH6424A

S/NO	JOB CODE	NATURE OF JOB	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATION
1	RSI	REPLACE REVERSE SENSOR, NECESSARY ADJUSTMENT & FUNCTION TEST	55.00	/
2	SEALI	APPLY SEALANT TO ALL AFFECTED PANEL JOINTS & RESEAL NECESSARY AREA	100.00	/
3	ZZ/001	CONDUCT TP CLAIM CNTAIPINGDATE:04/09/2020 TIME: 1750 LOCATION:SLIP RD TO AYE CITY N BOUNA VISTA RD		
4	ZZ/002	REPAIR/REPLACE REAR BUMPER,RR ENDPANEL,RR TAILGATE LH RR FENDER & RH RR FENDER	1400.00	840
5	ZZ/003	RESPRAY REAR BUMPER,ENDPANEL, TAILGATE, LH RR FENDER AND RH RR FENDER	1250.00	750
6	ZZ/004	REMOVE/REFIX REAR WINDSCREEN	150.00	/
7	ZZ/005	SUPPLY/INSTALL REAR WINDSCREEN TINTED FILM	144.00	? /
8	ZZ/006	CHECK ALL LIGHTING AFTER REPAIR	48.00	/
9	ZZ/007	SUPPLY AND INSTALL REVERSE CAMERA	240.00	?
TOTAL LABOUR CHARGES			3387.00	

AUTOCLINIC PTE LTD
 LENG KEE ROAD
 SINGAPORE 159097

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO SMH6424A

S/NO PARTS DESCRIPTION	PARTS NUMBER	DAMAGED PARTS & PRICES		
		NETT	LIST	S/NETT REMARKS
1 FACE-RR BUMPER <i>de /</i>	85022-5WJOH	460.00		
2 PANEL REAR LWR ?	79100-3VA0B	552.80		
3 DOOR BACK TAILGATE <i>St /</i>	K010M-3VAMA	1018.20		
4 EMBLEM-BACK DOO LETTERING <i>nee /</i>	90890-3VA0A	64.90		
5 ORNAMENT-BACK D EMBLEM <i>nee /</i>	90892-3VA0A	79.90		
6 GLASS-TAIL GATE <i>2 photo? nee /</i>	90300-3VA1C	1198.80		
7 ENERGY ABSORBER SPONGE ?	85090-5WJOA	125.30		
8 BRKT BUMPER RH <i>nee /</i>	85220-3VA0C	51.00		
9 BRKT BUMPER LH <i>nee /</i>	85221-3VA0C	51.00		
10 CAMERA BRACKET ?	BRACKET-CAM			20.00
11 REAR W/SCREEN SEALANT <i>nee /</i>	SEALANT - 4			80.00
12 LAMP COMB RR,RH ?	26550-5WK0A	435.80		
13 PLATE-LUGGAGE BOOT INNER GARNISH ?	84992-3VA0A	68.80		
14 A LOCK LIFT REAR TAILGATE ?	90502-1HM1A	128.40		
15 REAR NUMBER PLATE GARNISH ?	90810-3VA5C	255.60		
16 CLIP BUMPER <i>nee /</i>	01553-10501	15.60		
17 LAMP COMB RR,LH ?	26555-5WK0A	435.80		
SUB TOTAL		4941.90	0.00	100.00
LESS DISCOUNT (NETT-20.00%, LIST-30.00%, S/NETT-.00%)		988.38	0.00	0.00
GRAND TOTAL		3953.52	0.00	100.00
OVERALL TOTAL		4053.52		

LEGEND: REMARKS(OK) = APPROVED, REMARKS(X) = NOT APPROVED

AUTOCLINIC PTE LTD
LENG KEE ROAD
SINGAPORE 159097

SUMMARY OF ESTIMATE FOR VEHICLE REGN NO SMH6424A

TOTAL LABOUR CHARGES	3387.00
TOTAL SPARE PARTS CHARGES	4053.52
GRAND TOTAL	7440.52 *

* All charges do not include GST.

SURVEYOR'S PARTICULARS

NAME	:	Rasul - 14p 90010068
SURVEYED DATE	:	09/09/2020 @ 1030
AUTHORIZED DATE	:	
EXCESS CLAUSE	:	0.00
LIABILITY	:	0.00
REMARKS	:	6 days
		Resurvey before paint

PLS NOTE : This estimate is based on visual inspection of the affected vehicle. Should we require further labour charges & spare parts in the process of repairs, we shall inform you accordingly.

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:

Date:

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 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. 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 Report 05/09/2020 11:47
Date Of Accident 04/09/2020 17:50
Exact Location Of Accident SLIP ROAD TO AYE CITY NEAR NORTH BOUNA VISTA RD
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMH6424A

Insured/Policyholder
Name Of Registered Owner LIM BING LIANG ,MAX
NRIC No SXXXX650F
Email Address MAXLIM87@GMAIL.COM
Mobile Phone No (LOCAL) +65-94317786
Alternative Phone No OFFICE-NOPHONE

Vehicle Particulars
Manufacturer NISSAN
Model NOTE-1.2 CVT (A)
Exact Purpose for which vehicle was being used at time of accident LEISURE
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

Insurance Company
Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number
Cover Note Number

Driver
Name of Driver WONG LE JING
NRIC No SXXXX870A
Date Of Birth 19/12/1989
Occupation INDOOR
Date Of Driving Pass 16/12/2010
Driving Experience 9 YEARS AND 8 MONTHS
Gender FEMALE
Mobile Number (LOCAL) +65-96164289
Fax Number
Contact Number
Email Address NOEMAIL

Address A
 Postcode
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured FRIEND
 Vehicle Registration Number of Driver's Own Vehicle -
 -
 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?
 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? YES
 If Yes, Please state which Police Station

Police Station Name

Police Station Address

Police Station Contact

Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER POLICE REPORT T/20200904/7037

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 11

Vehicle Registration Number GBD5282A
 Vehicle Make/Model/Colour TOYOTA DYNA SILVER
 Details Of Properties FRONT PORTION
 Vehicle Category COMMERCIAL VEHICLE
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage

Accident Sketch Plan

SKETCH PLAN

(Pis refer to video & police report - Thanks)
 Request if necessary: Thanks



IMPORTANT
 1. Please
 2. Th
 3.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving on North Buarca Vista Rd taking the slip road entrance to the AYE (city). I stopped at the dotted line to check for any in-coming traffic from the right (as it was a junction). At that point, a lorry - SSF 5282A - hit my vehicle from the back.

For more info, please refer to the police report.

Important:

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIMS), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.

	<input type="checkbox"/>	Reporting Only
	<input type="checkbox"/>	Claim OD
	<input checked="" type="checkbox"/>	Claim TP
	<input type="checkbox"/>	Claim OD/ TP at other workshop

DECLARATION

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


 Policyholder's Signature
 Date & Time

5/9/20 1030am


 Driver's Signature
 (if driver not the policyholder)

Date & Time 5 Sept, 1030AM


 Reporting Centre Personnel's Signature
 Name:
 Nric/Fin No.

Common Statement

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 willful misrepresentation or withholding of material facts may allow insurance companies to **revoke 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 lodging 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 insurers) 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 of responding to any enquiries by me;
 - (iv) administering my claim including the mailing of correspondence, statements, vouchers, reports or notices to me, which could involve disclosure of my personal information to my agent, solicitor and/or lawyer as well as to the external agent, the hospital/clinic/doctor and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims including my "Purpose(s)";
- (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 Purpose(s); 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 Purpose(s).
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.


Policyholder's Signature
Date & Time: 5/9/2020 10:20am


Driver's Signature
(If driver is not the policyholder)
Date & Time: 5 Sept, 10:30AM


Retrievng Centre Personnel's Signature
Name:
NRIC/PIN No.:



**SINGAPORE
POLICE FORCE**

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



T/20200904/7037

Report No. T/20200904/7037



SINGAPORE
POLICE
Police Station:
Traffic Police
10 Ubi Avenue
Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/09/2020 23:53		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: WONG LE JING			Address: 29 GHIM MOH LINK #29-320 SINGAPORE 270029		
ID Type / ID No.: NRIC NO / S8946870A			Contact No.: Home/Office:		Mobile: 96164289
Nationality: SINGAPORE CITIZEN			Email: wonglejing@gmail.com		
Sex: Female	Age: 30	Date of Birth: 19/12/1989	Type of Informant: Driver		Institution / School Name:
Race: Chinese			Language: English		
Occupation: Social worker (general)			Driving Licence Information: Class: 3A		Date of Expiry:

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 04/09/2020 19:50	Type of Location: EXIT TOWARDS AYE (CITY)
Location: NORTH BUCNA VISTA ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 60 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Injuries
GBD5262A	Lorry	TOYOTA	Dyna	Silver	No Damage	1
SMH6424A	Car	NISSAN	Note	Grey	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20200904/7037

2 of 4

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 66470000

Report No. T/20200904/7037

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SMH6424A	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1900010807-01	29/01/2020	28/01/2021

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Passenger				
Name	Unknown Passenger		ID No.	NIL
Related Vehicle	GBD5282A (Lorry)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	NIL
Driver				
Name	WONG LE JING		ID No.	S8946870A
Related Vehicle	SMH6424A (Car)		Contact No.	96164289
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3A Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	NIL

Brief Details.

I was driving on North Buona Vista Road, taking the slip road entrance to the AYE (City). I stopped at the dotted line to check for any in-coming traffic from the right (as it was a junction). At that point, a lorry (with the registration number - GBD5282A) (the "Lorry") hit my vehicle from the back. After being hit by the Lorry, I drove the vehicle slightly forward to the bus-stop that was just in front (about 10metres ahead) and the Lorry followed and stopped behind me. Both the driver of the Lorry (the "Driver") and I got out of our respective vehicles and I took a photo of the Lorry. The Driver and I spoke very briefly but we did not exchange details yet. However, as there were two buses (Bus 97 and another bus) that were coming to the bus stop, the Driver told me to drive away from the bus stop and further forward so that we could speak there. I duly complied, and got back into my vehicle and moved forward. I entered the AYE (since this was at the slip road entering the AYE) and as there was no safe or suitable place to stop, I eventually drove and took the next exit at Portsdown flyover and turned into One-North Avenue and stopped opposite Infinite Studios (since it was a safe place to stop). It was at that point that I realised that the Lorry and the

POLICE3



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 406865
Tel No: 65470000



T/20200904/7037

3 of 4

Report No. T/20200904/7037

CONTINUATION OF REPORT

Driver did not follow me and were no where to be found. This was a hit and run accident and the driver did not follow me to provide any details for me to contact or follow up with him or his company. To be clear, I am was the victim and the Lorry hit the back of my vehicle and subsequently did not provide me with any details to follow up.



**SINGAPORE
POLICE FORCE**



T/20200904/7037

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

4 of 4
Report No. T/20200904/7037

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 / NOR AFFENDY BIN JAFFAR Contact No.: 65476368

Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Date/Time: 04/09/2020 23:53
Classification Of Case:

Authentication Stamp
NP168

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type: Singapore NRIC
Owner ID: 650F

Vehicle No.: SMH6424A
Vehicle to be Exported: No
Intended Deregistration Date: 09 Sep 2020
Vehicle Make: NISSAN
Vehicle Model: NOTE 1.2 CVT
Primary Colour: Grey
Manufacturing Year: 2018
Engine No.: HR12260323J
Chassis No.: JN1TAAE12Z0982557
Maximum Power Output: 58.0 kW (77 bhp)
Open Market Value: \$13,438.00
Original Registration Date: 29 Jan 2019
First Registration Date: 29 Jan 2019
Transfer Count: 0
Actual ARF Paid: \$5,000.00

OPC Cash Rebate Details

OPC Cash Rebate Eligibility: No
OPC Cash Rebate Eligibility Expiry Date: -
OPC Cash Rebate Amount: -

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 28 Jan 2029
PARF Rebate Amount: \$3,750.00

Intended COE Rebate Details

COE Expiry Date: 28 Jan 2029
COE Category: A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years): 10
QP Paid: \$9,170.00
COE Rebate Amount: \$7,688.00
Total Rebate Amount: \$11,438.00

The information contained herein is correct as at 09 Sep 2020

OK

Grey





Merimen e-Claims



Used 2019 Nissan Note 1.2A for



PARF/COE R

mart.com/used_cars/info.php?ID=923019&DL=1068

► Nissan Note 1.2A

Overview

Financial

Accessories

Similar

Research

Photos

Map

Price

\$58,800

Depreciation

\$6,590 /yr

[View models with similar depre](#)

Reg Date

26-Mar-2019

(8yrs 6mths 16days COE left)

Mileage

26,000 km (17.8k /yr)

Manufactured

2019

Road Tax

\$508 /yr

Transmission

Auto

Dereg Value

\$26,225 as of today (change)

OMV

\$13,467

COE

\$26,301

ARF

\$5,000

Engine Cap

1,198 cc

Power

58.0 kW (77 bhp)

Curb Weight

1,048 kg

No. of Owners

1

Type of Vehicle

Hatchback

Features

Fuel-Efficient 1.2L 3 Cylinders DOHC 12V Engine. [View specs of the Nissan Note \(2013\)](#)

Accessories

Dual Front SRS Airbags, Electrical And Retractable Side Mirrors, GPS, Push Start Button.

Description

Pr 28%! Still Under Agent Warranty! Left With 3 Free Agent Servicing! Beautiful And Pristine
Cc Meticulously Owner. Striking Red Paintwork! Only \$6K Plus Depreciation! Beautiful Interior.