Date In: 08/10/20   Job description   Date & Time Completed   Done	)
Veh No   GBH 2 4 9 8 7   E-inall (within Shire, APC 2 bire)	)
Veh No   GBH 2 4 9 8 7   E-inall (within Shire, APC 2 bire)	)
D.O.A.: 30 /07/20 0730   I-Motor Claim Form   I-Motor W/O (Wishin: OD 2hrs. TP 4hrs)   I-Photo Uploaded	)
I-Motor W/O (Withlist OD 2hrs. TP 4hrs)   I-Photo Uploaded	)
Ass't Report by Fax / Hand to Owner Wksp   Preferred Wksp / INC Assign Wksp / QW: ( Tel: Fax: Tel: Fax: TP Particulars: Veli No: GZ / O S INC ( ) / Non-INC ( )   Owner / Driver: ( Tel: )   Policy No: ( ) Period: ( ) Cover Type: ( )   Owner / Driver Liability: ( ) Period: ( ) Date: Time: )     Insured/Driver Liability: ( %) [Note-Est Status (WO): N: 0-20%; P: 21-79%. F: 80-100%]   Year of Registration: ( ) Warranty: YES ( ) / NO ( )     Excess: (S ) Loading: \$1,000 ( ) / \$2,000 ( )     General Remarks: ( Customer's information strictly Confidential & Strictly NO refer of repairer.     ( ) Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.     ( ) Total Loss Case : to e-mail Insurer URGENTLY.     Drive-In ( ) / Towell-In ( ); Invoice: YES ( ) / NO ( ); Towing Co. (     Remarks: (INC northic: 6768/6616)   Pales: Units Compilered ( ) Asi, Done     1) Apply for Transport Allowance ( ) / Courtesy Car ( )	)
Ass't Report by Fax/Hand to Owner/Wksh   Preferred Wksp / INC Assign Wksp / QW: ( Tel: Fax:     TP Particulars:   Veh No:   GZ / 0 28-5   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%. F: 80-100%]     Year of Registration: ( ) Warranty: YES ( ) / NO ( )     Excess: (\$ ) Loading: \$1,000 ( ) / \$2,000 ( )     General Remarks: ( ) Walk-In Customer's information strictly Confidential & Strictly NO refer of repairer. ( ) Total Loss Case : to e-mail Insurer URGENTLY.     Drive-In ( ) / Towell-In ( ); Invoice: YES ( ) / NO ( ); Towing Co. (     Remarks:   (INC norline: 6788/6616)     I) Apply for Transport Allowance ( ) / Courtesy Car ( )	)
TP Particulars: Vel No: GZ/0985. 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%. F: 80-100%]  Year of Registration: ( ) Warranty: YES ()/NO()  Excess: (\$ ) Loading: \$1,000 ()/\$2,000 ()  General Remarks: ( ) Ustomer's information strictly Confidential & Strictly NO refer of repairer.  ( ) Total Loss Case : to e-mail Insurer URGENTLY.  Drive-In ( )/Towell-In ( ); Invoice: YES ( )/NO ( ); Towing Co. (  Remarks: (INC horling: 6788/6616)  1) Apply for Transport Allowance ( )/Courtesy Car ( )	)
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1) Apply for Transport Allowance ( )/ Courtesy Car ( )	by
The state of the s	
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )	
Injury:	. ,
Date/Time Actions	
This into Action 10 1800 Was a large and a	
The state of the s	Amit (\$)
NA 2005 274 Invoice Preparation Checklist	
Claumant's Particulars:- 1) AR: Accident Reporting (\$30); INC (\$80)	+
3) TF : Towing Fee . \$40/\$45	
Driver/Owner: 4) FT: Follow-Through Survey \$120 5) FT: Follow-Through Survey (Resurvey) \$30	
Contact No: For claiming against INC Only (wef 10 Jen 2005)	
Damaged Portion: 575  575  7) N1 : Idao DA + SMRT Survey 5160	<del> </del>
8) NTUC Additional Services:-	1
on.	
NG: Repair Co-ordination \$10	
*N7: Post Repair Inspection \$25	+
TR (NI II) - TR (Ni ii) INC) against INC \$20	
9) N12: Idno Mobile 30	
Dat. 2/3; Invoice dated Fee Charges	110

### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

EMail Address

- 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 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.
- 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	08/10/2020 09:41
Date Of Accident	30/07/2020 07:20
Exact Location Of Accident	18 TANNERY LANE(LUM KONG BUILDING CARPARK)
Country/State of Loss	SINGAPORE
diskater part reminer part of	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBH2498T
Insured/Policyholder	
Name Of Registered Owner	MODERN POOLS PTE LTD(NON-DRIVER)
Co Reg No	2XXXXX897H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62837093
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSNW00018582002
Cover Note Number	
Driver	
Name of Driver	SUKHDEV SINGH
Passport No/FIN	GXXXX235R
Date Of Birth	01/05/1982
Occupation	OUTDOOR
Date Of Driving Pass	06/08/2018
Driving Experience	1 YEAR AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84602695
Fax Number	1. Te in 1941. 1945 received 195 195 195 195 195 1
Contact Number	

NOEMAIL

15 SHAW ROAD Address

#08-01 TEO INDUSTRIAL BLDG

Postcode

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident SIDE SWIPE Weather Conditions CLEAR

Other Information

Road Surface

ambulance?

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

NO

YES

NO

2

DRY

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

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

THE VEH WAS PARKED AT 18 TANNERY LANE FOR QUITE SOMETIMES. WHEN I WANTED TO START THE ENGINE BUT THE VEH CAN'T START.SO MY COLLEAGUES HELP ME TO PUSH THE VEH FROM BEHIND.THAN THE VEH KEEP ON JUMPING AND MY VEH HIT ONTO THE VEH B REAR WINDSCREEN.

### Attachment(s)

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

### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number

GZ1098S

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

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 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 repudiate policy liability.
- The 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.
- 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.
- By the lodgment 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:
  - 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.
- (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:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

10/2.20

welder Singl

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

SKETCH PLAN 18 TANNERY LANE 98424987 (LUM KONG BUILDING CARPARK) - GZ1098S DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

07			
PS	19gr To	He +fglem.	eit:
	381		

DECLARATION

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

Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder) Date & Time: 10 2020

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# ACCIDENT STATEMENT

	DENT DATE: (20 107) 20 10		): 20)(HH:MM)
	TION: 18 TANNERY CA	w e	
1.	DETAILS OF VEHICLE	1 000	
	a) VEHICLE NUMBER: CBH2	4781	朝 数
14	b)INSURANCE COMPANY:	ħ	
	c)POLICY NUMBER:		
	d)POLICY TYPE: (COMPREHENSIVE	/ THIRD PARTY / THIRD P	ARTY FIRE & THEFT)
5	e)MAKE & MODEL:		ANTI TINC OTTICL I
	f)TYPE:(SALOON / COUPE / MPV /	VAN / KORRY) / MOTORC	YOLE / OTHERS
	g) VEHICLE CATEGORY: (PRIVATE /	COMMERCIAL MOTOR	CYCLEL
	h) PURPOSE OF USING AT ACCIDEN	IT TIME: WORK	VG
	I) ARE YOU CLAIMING UNDER YOU	P OWN INSTIDANCE IVES	KIR.
	IF NO, PLEASE STATE (THIRD PARTY	CLAIM / PEPOPTING ON	NAC N
2.	INSURED / POLICY HOLDER	CEAIN / KEI OKING OF	٠
	A)NAME:	15.1	IALE / FEMALE)
	b)NRIC/FIN/PASSPORT:		1: 62837095
	c)ADDRESS:	CONTAC	. 8003/07
XI W	<u> 2</u>		W 1
w 1	* CONTINUE TO 3.d IF DRIVER ALSO	POLICY HOLDER	
i i i i i i i i i i i i i i i i i i i	DRIVER	1900-1914-1901-1900-1916-1916 190	
(Induding diana)	aNAME: SURHDEV SINGE	11/71	ALEY FEMALE)
(1)	b)NRIC/FIN/PASSPORT: CJJ 68	CONTACT	-8400J6 97
4,7	C)ADDRESS: 15 SHAW RD	A 10100 50.11	2000
		O INDUSTRIAL 1	100 367933
20	d)DATE OF BIRTH: (01/05/	(DD/MM/YYYY)	(2) (2)
,	OCCUPATION: (INDOOR / OUTDO	DORL C	
7	YEARS OF DRIVING EXPRERIENCE:	06 (08/208	
7. 1	WAS DRIVER AN EMPLOYEE OF THE	HE INSURED'S COMPAI	VY? (YES)/ NO)
5 6	F NO, RELATIONSHIP OF THE DR	CIVER WITH INSURED:	
b. 6	PROAD SURFACE (DR) / WET / OTH	CAINING / OTHERS	
6. V	VAS ANYBODY INJURED (YES (NO	IEKS	
7. a	REPORTED TO POLICE (YES NO)		
	IF YES, PLEASE STATE WHICH POLIC	E STATION:	
, 8. Ti	HIRD PARTY VEHICLE		
. No of passenger c	VEHICLE NUMBER: G21098	MODEL:	
	DRIVER'S NAME:		<del>*************************************</del>
/ \ \	NRIC/FIN/PASSPORT:	CARACTER - TO THE - SHOW	
	HIRD PARTY VEHICLE	CONTACT:	
	f) VEHICLE NUMBER:	MODEL	
the of passenger, e			
Including driver) f	NRIC/FIN/PASSPORT:	CONTACT:	
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email =

fax =

VIDEO =



CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Commercial

MZ300/C

SN

AN0633A

Cov. Type:C

CERTIFICATE No.

DMCVSNW00018582002

Engine No.: 1KD2686203

Cha. No.:KDY2318028256

Index Mark and Registration

Number of Vehicle

GBH2498T

AUTOSAFE

2. Name of Policy Holder

MODERN POOLS PTE LTD (NON-DRIVER)

CERTIFICATE OF INSURANCE Motor 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)

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

28/03/2020

Excess Sect I.

S\$500.00

EX ON WINDSCREEN .

S\$100.00

4. Date of Expiry of Insurance

27/03/2021

5. Persons or Classes of Persons entitled to drive\*

Any person who is driving on the Policyholder's order or with their 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 in connection with the Policyholder's business.
- (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- (3) Use for social, domestic or pleasure purposes.

The Policy does not cover

- Use for hire or reward or racing, pace-making, reliability trial or speed testing.
   Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO.: MAYBANK AS HP OWNER

\* 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: SKYLINK INSURANCE AGENCY PTE LTD Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) 🕏 3 Anson Road #16-00 Springleaf Tower Singapore 079909

Q6389 6111

6222 1033

www.sg.cntaiping.com



# 中国太平保险(新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

3 Arison Road #16-00 Springleaf Tower Singapore 079909 Tel: 6389 6111 Fax: 6222 1033 Website: www.sg.cntaiping.com Co. Reg. No: 200208384E

Our Ref : SNM20D202697/GBH2498T/C02

Date : 03 Aug 2020

Via Ordinary Mail

MODERN POOLS PTE LTD #08-01 TEO INDUSTRIAL BUILDING SINGAPORE 367953

Dear Policyholder

RE: ACCIDENT INVOLVING OUR VEHICLE NOS. GBH2498T AND GZ1098S ON 30 Jul 2020 ALONG LUM KONG **BUILDING CARPARK** 

Policy

: DMCVSNW00018582002

We refer to the above-mentioned accident.

Please be informed that you or your driver has not filed an accident report within 24 hours as per the Motor Claims Framework.

We would urge you to comply with the condition to file your accident report with your vehicle to us IMMEDIATELY, through our designated Accident Reporting Centres which are also our authorised workshops, regardless of whether or not it would give rise to a claim. You may log onto our website www.sg.cntaiping.com for location of the respective centres/workshops.

Please take note that your NO CLAIM DISCOUNT will be penalized upon renewal of your policy if you fail to comply with this condition.

Please contact our claims department at 63896116 should you require our assistance or clarification.

Regards

(This is a computer generated letter and no signature is required)

: AN0633A SKYLINK INSURANCE AGENCY PTE LTD



Rose MP <rosemppl9@gmail.com>

# Fwd: URGENT: Alleged accident involving GBH2498T & GZ1098S on 30.07.2020 (SNM20D202697C02/8(lewlc)

Skylink Insurance <skylinkinsurance@gmail.com>

Tue, Sep 22, 2020 at 8:41 AM

To: Rose MP <rose@modernpools.com.sg>

Cc: elaine@panpacificleasing.com.sg, houjung@panpacificleasing.com.sg, MP PA <accounts@modernpools.com.sg>, Becky Dong <becky@modernpools.com.sg>

Dear Rose,

Noted on this.

We have forwarded your explanation to China Taiping and are waiting for their advice.

Thank you and have a nice day.

Best regards, Hwee Soon Tel: 6266 5860



#### SKYLINK INSURANCE AGENCY PTE LTD

Showroom: 21 Toh Guan Road East # 01-11/12

Toh Guan Centre, Singapore 608609

Tel : 6266 5860 Fax : 6266 5852

Web : https://www.skylinkauto.com.sq

Sales | Leasing | Financing | Insurance

On Fri, Sep 18, 2020 at 6:17 PM Rose MP <rose@modernpools.com.sg> wrote: Dear Soon.

Noted as our workers still on SHN under Sept.27,2020.

We seek for your kind understanding on this matter.

Let us advise us what are some alternatives while waiting for our worker driver to be cleared in the dormitory.

Thank you.

On Fri, Sep 18, 2020 at 11:33 AM Skylink Insurance <skylinkinsurance@gmail.com> wrote: Hi Rose,

We received a phone call from China Taiping advising that till now the accident report has not been lodged.

Kindly arrange the driver to make the accident report urgently. Do note that failure to report the accident on time will result in the Insurance Company repudiating the claim and Traffic Police will be notified.

Please treat this on an urgent basis.

Thank you and have a nice day.

Please find below email from China Taiping with regards to non-reporting of accident dated 30/07/2020.

Kindly arrange to get your driver to make the accident report as soon as possible. Do note that failure to report the accident will result in repudiation in liability and all claims will be redirected to your company.

Please treat this as urgent.

Thank you and have a nice day.

Best regards. Hwee Soon Tel: 6266 5860



Sales

# SKYLINK INSURANCE AGENCY PTE LTD

Showroom: 21 Toh Guan Road East # 01-11/12

Toh Guan Centre, Singapore 608609

: 6266 5860 Fax

: 6266 5852

Financing

Web : https://www.skylinkauto.com.sq

----- Forwarded message -----

Leasing

From: Alfred Toh <alfred.toh@sg.cntaiping.com>

Date: Fri, Sep 11, 2020 at 4:33 PM

Subject: Alleged accident involving GBH2498T & GZ1098S on 30.07.2020 (SNM20D202697C02/8(lewlc)

To: Skylink Insurance <skylinkinsurance@gmail.com>

Cc: Jenny Lew <jenny.lew@sg.cntaiping.com>, Claims Dept of CTI <claimsdept@sg.cntaiping.com>, Alfred

Insurance

Toh <alfred.toh@sg.cntaiping.com>

POLICY NO: DMCVSNW00018582002

INSURED: MODERN POOLS PTE LTD

VEHICE NO: GBH2498T

From 28 March 2020 to 27 March 2021

CLAIM NO: SNM20D202697C02/8(lewIc) - Accident NOT reported

M/s Skylink Insurance

ATTN: Officer-In-Charge

Dear Sirs

We refer to our email of 3 August 2020 pertaining to the above matter.

Regret to advise that mutual client, M/s MODERN POOLS PTE LTD has failed and/or refused and/or has not and/or has yet to file accident report till date.

Please informed the insured driver to lodge the accident report soonest possible.

Thank you.

### NOTICE:

In response to the escalating Covid-19 cases, please refrain from sending hardcopy documents to us as delay is to be expected for handling hardcopy documents. All correspondence should be made via email claimsdept@sg.cntaiping.com or fax at 6224 7175. Any inconvenience caused is much regretted.

Regards.

## Jenny Lew

Executive

Claims Department

### China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #15-00 Springleaf Tower Singapore 079909

DID: (65) 6389 6116 | F: (65) 6225 5879

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Main: 6282 3510 / HP: 8468 0075 |rose@modernpools.com.sg | www.modernpools.com.sg



Buying Owning Driving Selling/Deregistering Digital Services

Q Dashboard |Logout

### Note about the dashboard

We are upgrading this dashboard to include more services. If you are checking for other services, please select 'Digital Services' from our main menu.

# My Vehicles And Assets:

All (9)

**GBH2498T** 

Goods (Open) Lorry (Metal Body)/Pickup

TOYOTA / DYNA 3.0 DIESEL TURBO M/T 2WD LORRY

IU Label No.

1043012763

COE value if deregistered today\*

PARF value if deregistered today \$12,994.00

Road tax is valid until

21 Mar 2021

COE expires on

21 Mar 2028

6 months renewal \$70.00

12 months renewal

View past receipt ->

View vehicle details 🧇

Renew by GIRO

\$176.00

Renew road tax >

insurance valid till

Inspection valid this

Transfer vehicle 👈

27 Mar 2021

21 Mar 2021

Deregister vehicle 👈

"Deregistered vehicles exported within 2 years of registration will have their COE rebate capped at 30% of the Quota Premium (QP) paid. For vehicles with a Category E COE, the COE rebate is capped at 80% of whichever is lower - the QP of the COE you paid for, or the QP of the category your vehicle belongs to from the same COE bidding exercise.