From: Setimaled Cost: Set
Estimated Cost: OD / TP / WS / TP RES / OD RES / EVA / INV / INV To Inspect Vehicle No: at Workshop m/s of Make:
To Inspect Vehicle No: at Workshop m/s of Sp. Reading
at Workshop m/s of Insured: Policy No. Claims No. Sum Insured: (Cilent's Record) Make of Veh: (Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Lum Sum: % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Date: Person Contacted: Date / Time Action / Instruction Colour Brown Arc: Insured / Std / NII / NA Regaring / S Y 733 T/Radio: Insured / Std / NII / NA Regaring / S Y 733 T/Radio: Insured / Std / NII / NA Regaring / S Y 733 T/Radio: Insured / Std / NII / NA Regaring / S Y 733 T/Radio: Insured / Std / NII / NA Regaring / S Y 733 T/Radio: Insured / Std / NII / NA Regaring / S Y 733 T/Radio: Insured / Std / NII / NA Stering / S Y 733 T/Radio: Insured / Std / NII / NA Regaring / S Y 733 T/Radio: Insured / Std / NII / NA Stering / S Y 733 T/Radio: Insured / Std / NII / NA Stering / S Y 733 T/Radio: Insured / Std / NII / NA Regaring / S Y 733 T/Radio: Insured / Std / NII / NA Stering / S Y 733 T/Radio: Insured / Std / NII / NA Stering / S Y 733 T/Radio: Insured / Std / NII / NA Stering / S Y 733 T/Radio: Insured / Std / NII / NA Stering / S Y 733 T/Radio: Insured / Std / NII / NA Stering / S Y 733 T/Radio: Insured / Std / NII / NA Stering / S Y 733 T/Radio: Insured / Std / NII / NA Stering / S Y 733 T/Radio: Insured / Std / NII / NA Stering / S Y 733 T/Radio: Insured / Std / NII / NA Stering / S Y 734 T/Radio: Insured / Std / NII / NA T/Radio: Insured / Std / NII / NA Stering / S Y 733 T/Radio: Insured / Std / NII / NA Stering / S Y 735 Stering / S Y 735 T/S S Y 65 R 1 T/S S / 65 R 1 T/
at Workshop m/s of Sp.Reading /5 Y 733 T/Radio: Insured / Std / NI / NA Sp.Reading /5 Y 733 T/Radio: Insured / Std / NI / NA Sp.Reading /5 Y 733 T/Radio: Insured / Std / NI / NA Eng/No: Claims No. Sum Insured: Excess: (Cilent's Record) Make of Veh: (Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No GIA / PR. Seen: Consistent?: Yes or No Lum Sum: % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Vehicle: IN / OUT Date: Person Contacted: Date / Time Action / Instruction COEExpry: 25 01 30;
Sp.Reading /5 4733 T/Radio: Insured / Std / NI / NA Insured: Policy No. Claims No. Sum Insured: (Client's Record) Make of Veh: (Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: 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 Contracted: Date / Time Action / Instruction Sum Action / Instruction Sp.Reading /5 4733 T/Radio: Insured / Std / NI / NI
Policy No. Claims No. Sum Insured: (Client's Record) Make of Veh: (Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: 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: Date / Time Action / Instruction C/No: PLIF Z CYR RAFO 2 4 988 Gen. Cond. Good Fair / Poor / Burnt Steering: Mordep / Jammed / Leaked / Burnt or Modi: NII (SIRIN) / STD A/Rim or Tyre Size: F: /\$ 5 / 63 R 1 5 R: 1/3 / 65 R 7 5 BS / DUN / EXNOVA / GY / FS / LIZA / MIC) OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. C/No: PLIF Z CYR RAFO 2 4 988 Gen. Cond. Good Fair / Poor / Burnt Steering: Mordep / Jammed / Leaked / Burnt or Modi: NII (SIRIN) / STD A/Rim or Tyre Size: F: /\$ 5 / 63 R 1 5 R: 1/3 / 65 R 7 5 BS / DUN / EXNOVA / GY / FS / LIZA / MIC) OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. C/No: PLIF Z CYR RAFO 2 4 988 Gen. Cond. Good Fair / Poor / Burnt Tyre Size: F: /\$ 5 / 63 R 1 5 R: 1/3 / 65 R 7 5 BS / DUN / EXNOVA / GY / FS / LIZA / MIC) OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. C/No: PLIF Z CYR RAFO 2 4 988 Gen. Cond. Good Fair / Poor / Burnt Tyre Size: F: /\$ 5 / 63 R 15 R: 1/3 / 65 R
Claims No. Sum Insured: Excess: Steering: Morde of Jammed / Leaked / Burnt or Modi: NII (SRim) / STD A/Rim or Tyre Size: F: /\$ 5 65 R / 5 (Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: DAC Accident Rport: Consistent?: Yes or No Est. Repairs: days Res.: Yes or No Est. Repairs: days Res.: Yes or No CA / REV / REP. / 24 HRS Date: Person Contacted: Vehicle: IN / OUT Date / Time
Steering: Mordey Jammed / Leaked / Burnt or Make of Veh: Colient's Record Make of Veh: Brake:
Brake: Inorder Jammed Leaked Burnt or
Make of Veh: (Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: 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 / Time Action / Instruction Date / Time Action / Instruction Modi: Nil (S/Rim) / STD A/Rim or Type Size: F: // 5 / 65 R / 5 R: 1/5 / 65 R / 6 R: 1/5 / 65 R /
(Policy Condition) Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: days Res.: Yes or No Lum Sum: CA / REV / REP. / 24 HRS Date: Person Contacted: Tyre Size: F: //55/65 R/5 R: 1/55/65 R/5 R: 1/55/65 R/5 BS / DUN / EXNOVA / GY / FS / LIZA (MIC) OHTSU / PIR / SUMI / TOYO / YOKO or Front R/Bal. Mm L/Bal. Mm L/Bal. Mm L/Bal. Do. Mm D.O.A. Survey held at Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision. The U/C / Chassis frame / Body Structure affected due to collision.
Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: days Res.: Yes or No L/Bal. Community Rear R/Bal. L/Bal. Community Rear R/Bal. Community R/Bal. Com
Remark: The veh had commenced its repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: days Res.: Yes or No L/Bal. Community Rear R/Bal. L/Bal. Community Rear R/Bal. Community R/Bal. Com
repair at the time of inspection. Bal. or Market Value: IDAC Accident Rport: 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 Vehicle: IN / OUT Date: Person Contacted: TOYO / YOKO or Front R/Bal. Mm R/Bal. Mm R/Bal. Mm L/Bal. Do. I. / 7/05/21 Survey held at Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision. COEExpy: 25/01/30 TOYO / YOKO or Front / Rear R/Bal. Mm R/Bal. Do. mm D.O.A. D.O.I. / 7/05/21 The U/C / Chassis frame / Body Structure affected due to collision.
Bal. or Market Value: IDAC Accident Rport: Consistent?: Yes or No GIA / PR Seen: Consistent?: Yes or No Est. Repairs: days Res.: Yes or No L/Bal. D.O.A. D.O.I. T/OS 21 CA / REV / REP. / 24 HRS Vehicle: IN / OUT Date: Person Contacted: Person Contacted: Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision. COEExpry: 25/01/30,
IDAC Accident Rport: 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 Date / Time Action / Instruction The U/C / Chassis frame / Body Structure affected due to collision.
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Est. Repairs: Lum Sum: % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Date: Person Contacted: Vehicle: IN / OUT Date / Time Action / Instruction TP Ax A . D.O.A. D.O.A. D.O.A. Survey held at M6 Solution. Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or The U/C / Chassis frame / Body Structure affected due to collision.
Lum Sum: % 3 Val.: Yes or No CA / REV / REP. / 24 HRS Vehicle: IN / OUT Date: Person Contacted: Vehicle: IN / OUT Date / Time Action / Instruction TP Ax A · COEExpry: 25/01/30 ·
CA / REV / REP. / 24 HRS Vehicle: IN / OUT Date: Person Contacted: The U/C / Chassis frame / Body Structure affected due to collision. The U/C / Chassis frame / Body Structure affected due to collision.
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mv: 48K.
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14 Feb 2 20 (2000) 100 (2000)
Date/Time, File Pass to? : Preli. Report Days Of Repair:
; Final Report Resurvey No. of Trip: Survey Fee:
Date/Time, File Return to?
2) Add Fee: : Site Insp (\$)s+Rssi
: Interview (\$) Photos
Report Format: : Tech. Invs (\$) Others
Lump Sum / LBJ: (\$) :Weet end (\$)
TOTAL

SV0L212B000F-01 / VICOM LTD (VAC) - Kaki Bukit [415933] ENTRY DATE & TIME: 11/02/2021 17:13 (SGT) SUBMITTED BY: Siti Fadhlon Abdul Kader VERSION: 2 (11/02/2021 18:09 (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 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

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 11/02/2021 17:13 (SGT) Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss Singapore

10/02/2021 19:45 (SGT) Singapore GOPENG STREET BESIDE TWENTY ANSON BUILDING

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMG7045J

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No Email Address Mobile Phone No. Alternative Phone No

ABDUL AZIZ BIN MOHAMED GHANI SXXXX667E aziztwitty09@gmail.com (Phone) +65-91893752 +65-91893752

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

PROTON / EXORA 1.6L AT (M-LINE) ABS D/AB 2WD 5DR

Private hire

No - Claiming third party Private hire

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number

NTUC Comprehensive 5117454417

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

ABDUL AZIZ BIN MOHAMED GHANI SXXXX667E 08/10/1962 Indoor

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

23/04/1992

28 YEARS AND 10 MONTHS

Male

(Phone) +65-91893752

+65-91893752

aziztwitty09@gmail.com

BLK 702 #10-3532 BEDOK RESERVOIR RD

47070

470702

Yes

No

W Seemen

-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions Road Surface

Collision - Head to Rear

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 material or property damaged?

Number of Passengers (Including Driver)

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

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?

Yes

Traffic Police

(Phone) +65-65470000 (Fax) +65-65474900

10 Ubi Avenue 3 Singapore 408865

No

CIRCUMSTANCES OF ACCIDENT

AS PER POLICE REPORT No.T/20210211/7014;

ATTACHMENT(S)

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

Yes No No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer

Vehicle Model Vehicle Variant

Vehicle Colour Vehicle Category Name of Driver

Contact Number

SHB6361M Hyundai

HYUNDAI / AE IONIQ HEV FL 1.6 DCT

-

Taxi

-

Accident report SV0L212B000F

Page 2 of 19

Address	
Address complement	_
Postcode	_
Insurance Company Name	_
Nature Of Damage	_
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	_

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Address Address Complement	ABDUL AZIZ BIN MOHAMED GHANI BLK 702 #10-3532 BEDOK RESERVOIR RD
Post Code Approximate Age Years Old Injuries Sustained	470702 58
Injured person in which vehicle? Were seat belts worn?	SMG7045J Yes
Was this injured conveyed to hospital by ambulance?	No

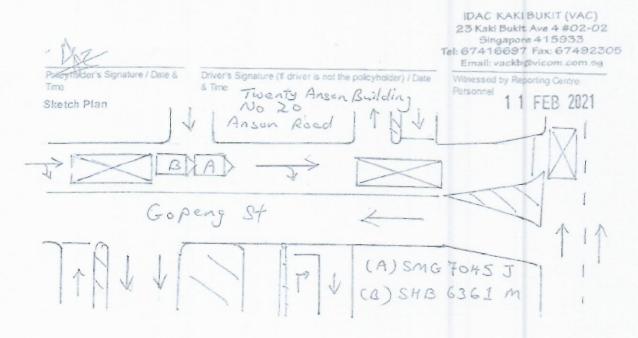
SKETCH PLAN

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 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.
- 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)

lunderstand, acknowledge, agree and consent that

- (a) My insurer, my workshop and the General hsurance 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 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' 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/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Describe Circumstanc	es of the Accident
-	
-	
	Dote - to Police Report
	Rojer to Police Report
	Report No:-
	7/20210211/7014
	1/20210211 1011

	1
ota: Diagast- the	
	or insurer may have 14 days time frame for you to submit an Own Damage Claim under your
our own comprehensive	policy. Please check your policy for more information.

We declare the foregoing particulars are true in every respect.

IDAC KAKI BUKIT (VAC) 23 Kaki Bukit Ave 4 #02-02 Singapore 415933 Tel: 67416697 Fax: 67492305

Email: vackb@vicom.com.sg

Witnessed by Reporting Centre 1 1 FEB 2021

Policyholder's Signature / Date &

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





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

1 of 3 Report No. T/20210211/7014

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/02/2021 11:56		Made:	Vide Report No.;	Station Diary No.:	
Informa	nt's Partic	ulars	art god fellige get trades a de	A SERVICE AND A	
	f Informant AZIZ BIN N	MOHAMED GHANI	Address: 702 BEDOK RESERVOIR RI 470702	OAD #10-3532 SINGAPORE	
ID Type / ID No.: NRIC NO / S1542667E		67E	Contact No.: Home/Office:	Mobile: 91893752	
Nationality: SINGAPORE CITIZEN		EN	Email: AZIZTWITTY09@GMAIL.CO		
Sex: Age: Date of Birth: Male 58 08/10/1962			Type of Informant: Driver		
Race: Indian			Language: English	Institution / School Name:	
Occupation: PRIVATE HIRER			Driving Licence Information: Class:	Date of Expiry:	

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 10/02/2021 19:45	Type of Location Straight Road
Location:			10.10	
GOPENG ST	REET			
Weather:		Road Surface:		
		Dry	R	oad Speed Limit:
Clear Traffic Flow: Two Way				oad Speed Limit: raffic Volume:

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SHB6361M	Car					0
SMG7045J	Car	PROTON	EXORA 1.6L AT (M-LINE) ABS D/AB 2WD 5DR	Orange		0



T/20210211/7014

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

2 of 3 Report No. T/20210211/7014

CONTINUATION OF REPORT

Details of V	ehicle Insurance	or etderical editors	e incomingament ex	Marin Williams
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMG7045.1	NTUC Income Insurance Co-Operative	E447454447		
OMOTOTO	Limited	511/45441/	14/05/2020	29/07/2021

Any Pedestrian I	nvolved: No				Design to the Control of the Control
No. of Pedestrian			Use of Pe	destrian Cros	sino: NA
Driver		THE TAXES	THE RESERVE		TEST REPLECTED IN
Name	ABDUL AZIZ BIN M	OHAMED	GHANI	ID No.	S1542667E
Related Vehicle	SMG7045J (Car)		Contact No	. 91893752	
Hospital/Clinic	CHERN MEDICAL (CLINIC		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	11/02/2021		Date	NIL	
No. of Days grant	ed Medical Leave	03	Degree of		nt

Brief Details.

On 10/02/2021 at about 1945 hours at along gopeng street towards Anson road beside No 20 Anson road. I was stationary infront of the yellow box due to front vehicles waiting for clearance of main traffic and suddenly .I heard a loud bang from behind and when I alighted I realized it was vehicle (B) who hit my rear portion of my vehicle (A) causing damages to my vehicle. I have 3 days mc for my injury.

Vehicles involving in the situation:

- (A) SMG7045J
- (B) SHB6361M



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



3 of 3 Report No. T/20210211/7014

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: 11/02/2021 11:56
Officer In Charge Of Case: TP / TPHQ / WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp	

> Back to OneMotoring

nquire PARF/COE Rebate for Registered Vehicl Vehicle Owner Particulars		
Owner ID Type:	Singapore NRIC	
Owner ID: Vehicle Details	667E	
Vehicle No.:	SMG7045J	
Vehicle to be Exported:	No	
Intended Deregistration Date:		
Vehicle Make:	17 May 2021 PROTON	
Vehicle Mode.		
Primary Colour:	EXORA 1.6L AT (M-LINE) ABS D/AB 2WD 5DR	
Manufacturing Year:	Orange	
Engine No.:	2010	
Chassis No.:	S4PHQF2192	
Maximum Power Ot tput:	PL1FZ6YRRAF024988	
Open Market Value:	93.0 kW (124 bhp)	
Original Registration Date:	\$14,114.00	
First Registration Date:	30 Jan 2010	
Fransfer Count:	30 Jan 2010	
Actual ARF Paid:	2	
ntended PARF Rebate Details	\$14,114.00	
PARF Eligibility:	FC-V	
PARF Eligibility Expiry Date:	Forfeited	
ARF Rebate Amount: ntended COE Rebate Details	\$0.00	
COE Expiry Date:	29 Jan 2030	
COE Category:	A - Car (1600cc & below)	
OE Period(Years):	10	
QP Paid:	\$32,368.00	
OE Rebate Amount:	\$28.156.00	
otal Rebate Amount:	\$28,156.00	

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\$68 until it's SOLD!

Ways of Selling

Direct Owner

Oct 2019 BMW X3 SDrive 20i; Very Low Mileage 6400 Km

HIN LUNG AUTO One Stop Car Hub Finance, Insurance, Workshop New and Used Cars

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8 vehicles

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Advertiser Login

Model

Price

Anv

Depreciation

> 10 year(s) old

Any

Mileage

Sort by Date Posted

Any Available

✓ 20 results/page

Search Selection

Proton Exora 1.6A M-Line (COE till 05/2024)

\$18,800

\$6,180 /yr

26-Aug-2009

1,597 cc

MPV

Veh Type

Available

Eng Cap

179,000 km

In House Finance Available! Low Deposit At \$800 Monthly Only At \$592! Flexible Loan Amount With Attractive Interest Rate Available! Low Mileage Done At \$14,900 Yearly Only! Low Depreciation Only At \$6,140 Yearly! Great For Short Term Driving! Trade In Most Welcome!

Speedo Motorina

Posted: 15-May-2021 Tags: 2009 Proton Exora, Proton Exora, Proton, Exora



Proton Exora 1.6A M-Line (COE till 06/2029)

\$46,800

\$5,760 /vr

08-Sep-2009

1,597 cc 175,000 km

MPV

Available

Viewing Available Only At Car Times Mackenzie Branch. Flexible Loan Packages 100%.

Car Times Automobile Pte Ltd

Posted: 06-May-2021 Tags: 2009 Proton Exora, Proton Exora, Proton, Exora



Proton Exora 1.6A M-Line (COE till 06/2024)

\$27,800

\$8,900 /vr

14-Oct-2009

1.597 cc

MPV

Available

Mort Demand Colour.Beautiful Metallic Blue 7 Seater MPV.Premium Black Leather With Red Stitches.Best Unit With Extended Warranty.Superb Condition You Will Not Be Disappointed.100% Accident Free.Don't Miss It.View Now!Up To 100% Flexible Loan Availab

Classic Credit Pte Ltd

Posted: 08-May-2021 Tags: 2009 Proton Exora, Proton Exora, Proton, Exora



Proton Exora 1.6A M-Line (COE till 04/2025)

\$28,800

\$7,330 /yr

21-Apr-2010

1,597 cc

MPV

Available

360 VR Cars

Posted: 16-May-2021 Tags: 2010 Proton Exora, Proton Exora, Proton, Exora



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\$7,520 /yr

26-Jan-2011

1,597 cc

86,689 km

MPV

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\$35,800

\$7,160 /vr

05-Apr-2011

1.597 cc

MPV

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