

ASS. REC. BY:

REF:

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

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

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

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.

N/S	O/S

Bal. or Market Value: _____

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

Vehicle: IN / OUT

Date: _____ Person Contacted: _____

Veh No: S6Z6633P Yr Regn: 2018 / NovType: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Audi Q8 C.C. 2995Colour: Grey A/C: Insured / Std / NI / NASp. Reading: 42517 T/Radio: Insured / Std / NI / NA

Eng/No: _____

C/No: WAUZZ2F16KD006122Gen. Cond: Good / Fair / Poor / BurntSteering: Inorder / Jammed / Leaked / Burnt orBrake: Inorder / Jammed / Leaked / Burnt orModi: Nil / S/Rim / STD A/Rim orTyre Size: F: 235/40R22R: 235/40R22

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

TOYO / YOKO or

Continental

Front

Rear

R/Bal. 06 mm R/Bal. 06 mmL/Bal. 06 mm L/Bal. 06 mmD.O.A. _____ D.O.I. 15/09/21Survey held at PremiumDes. 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

OD ALG (1st Accident)MV: 280KPV: 104.5KNett: 175.5K

Date/Time, File Pass to?

☐

Preli. Report

1)

☐

Final Report

Date/Time, File Return to?

2)

Report Format: _____

Lump Sum / L&L: _____

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee:

☐

Site Insp (\$)

☐

Interview (\$)

☐

Tech. Invs (\$)

☐

Week end (\$)

Survey Fee:

Transportation:

No. Of Passenger (Including Driver)

Nature Of Damage

Insurance Company Name

Others

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 Submission	17/05/2021 18:25 (SGT)
Date of Accident	14/05/2021 22:26 (SGT)
Exact Location of Accident	6 Tanjong Pagar Plaza, Singapore 081006
Additional Location Information	CARPARK AT TANJONG PAGAR BLK 6
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGZ6633P
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ORIENTAL SHEET PILING PTE LTD
Company Reg No	2XXXXX665Z
Email Address	GINA.LIM@ORIENTALCASTLE.COM
Mobile Phone No	(Phone) +65-83666633
Alternative Phone No	(Office) +65-86836633

VEHICLE PARTICULARS

Manufacturer	Audi
Model	Q8
Variant	Q8 3.0 TFSI QU TIP (SR, 20")
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	2995

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	GOH KIAN SIN
NRIC No	SXXXX636I

Date Of Birth	11/11/1968
Occupation	Indoor
Date Of Driving Pass	06/06/2008
Driving experience	12 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83666633
Alt. Phone Number	-
Email Address:	GINA.LIM@ORIENTALCASTLE.COM
Address	23 NAMLY DRIVE
Address complement	-
Postcode	267437
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	Hit and run / Vandalism / Damaged whilst parked
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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	0
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bukit Timah Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004629999
Alt. Police Station Phone No	(Fax) +65-64628933
Police Station Address	1 Duke Road Singapore 268914
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE SKETCH PLAN & POLICE REPORT NO. T/20210515/2073

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLG7546S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver -
Contact Number -
Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
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.
3. Information provided must be as truthful and accurate as possible. Any willful 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. 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 (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:

(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' 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

Sketch Plan

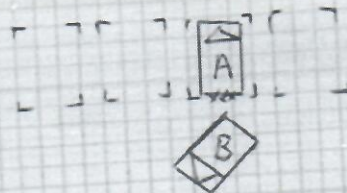
Driver's Signature (If driver is not the policyholder) / Date & Time 12/5/2011 @ 1650

Witnessed by Reporting Centre Personnel



A - SGZ 6633P

B - SLG 7546S



Describe Circumstances of the Accident

Please refer to the police report NO. T/20210515/9077

Declaration

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

[Signature]
17/5/2021 @ 1650

Witnessed by Reporting Centre Personnel





SINGAPORE POLICE FORCE

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4829999



T/20210515/2073

1 of 3

* Report No. T/20210515/2073

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:
15/05/2021 16:55

Vide Report No.:

Station Diary No.:
64

Informant's Particulars

Name of Informant:
GOH KIAN SIN

Address:
23 NAMLY DRIVE SINGAPORE 267437

ID Type / ID No.:
NRIC NO / S68686361

Contact No.:
Home/Office: Mobile: 83666633

Nationality:
MALAYSIAN

Email:

Sex: Male Age: 52 Date of Birth: 11/11/1968

Type of Informant:
Driver

Institution / School Name:

Race:
Chinese

Language:

Occupation:
Director

Driving Licence Information:
Class: Date of Expiry:

General Information of the Accident

Type of Accident:

Non-Injury
Hit and Run

Drink
Drive:
No

Date/Time of
Accident:
14/05/2021 22:50

Type of Location:

Location:

TANJONG PAGAR PLAZA

Weather:

Road Surface:

Road Speed Limit:

Traffic Flow:

Traffic Control:

Traffic Volume:

Type of Collision:

Anyone conveyed by
ambulance:
No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGZ3633P	Car				Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20210515/2073

2 of 3

Report No. T/20210515/2073

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

CONTINUATION OF REPORT**Brief Details.**

On 14/05/2021 at about 2250hrs, I was driving my vehicle(SGZ6633P) along the road and I discovered that there was a note on the driver windscreen.

When I checked the note, I discovered that it is a note left by a witness informing me that a vehicle(SLG7546S) had reversed and collided onto my rear left bumper. The witness contact number is 98363995, Name: Mr Tan. My assistant had contacted the witness who informed that at about 2226hr, he had a loud bang and he saw that the passengers of the vehicle (SGZ6633P) and driver had came down to check on the damages on my car and subsequently they left.

After I dropped my friend off at Kovan at about 2300hrs, I made a check and I discovered that there was indeed damage on the rear left of my vehicle bumper, scratches and the bumper were slightly dislodged.

I would like to inform that my vehicle is parked at roof level of Tanjong Pagar Plaza Blk 6, I am unsure which lot I am parked in, I am unsure if there is any CCTV facing toward my vehicle.

I would like to inform that I am unsure when was the last time I seen my vehicle all intact.



**SINGAPORE
POLICE FORCE**



T/20210515/2073

3 of 3

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

Report No. T/20210515/2073

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

E/

Sgt 2 CHENG JARREL

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
15/05/2021 16:55

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt IRMAN BIN
Contact No.: 65476145

SINGAPORE
POLICE FORCE
MOHAMAD SAID

Classification Of Case:

SN 065

Authentication Stamp
NP168

SIGNATURE



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: S665500206 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

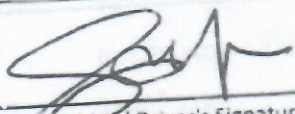
(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

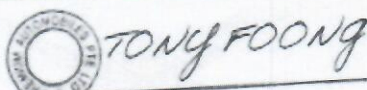
Original Report No : SP0R215H0004 Vehicle Registration No: SQZ6633P
Name (as shown in NRIC) : ORIENTAL SHEET PILING PTE LTD NRIC/FIN/Passport No : 2XXXXX6652
(* Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore ()
Contact (Tel) : _____ Mobile No. : _____
Email Address : _____
Date of Accident : 14/05/2021 Time of Accident : 22:26
Place of Accident : CARPARK AT TANJONG PAGAR BLK 6
Insurance Company : AIG Asia Pacific Insurance Pte. Ltd.

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

To convert report to claim own insurance.


Policyholder / Driver's Signature
Date: _____


Reporting Centre Personnel's Signature
Name: Tony Foong
NRIC/FIN No.: _____
Date: _____

55 UBI ROAD 1, SINGAPORE 408699

TEL : 6366 2323 FAX : 6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATE : ACCIDENT REPAIRS
WORKSHOP : UBI ROAD 1
CONTACT NO : 6366 2323
FAX NO : 6841 1183
REFERENCE : PA/OD/0424/2021/GW
DATE : 18-May-21
WIP : 28002

VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 15/9/2021

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY

#07-16 AIG BUILDING

SINGAPORE 079120

Attn: Motor Claims Dept

Tel: 6880 4602 - Fax: 6880 4838

OWNER'S NAME : ORIENTAL SHEET PILING PTE LTD
ADDRESS : 23 NAMLY DRIVE
SINGAPORE 267437
TELEPHONE : HP +65 83666633
TYPE OF CLAIM : OWN DAMAGE CLAIM
POLICY NO : 2070171472
VEHICLE NO : **SGZ 6633 P**
MODEL CODE : AUDI Q8 3.0 TFSI QU TIP
MODEL YEAR : 22/11/2018
ENGINE NO : DCB047111
CHASSIS NO : WAUZZZF1KD006122
MILEAGE : -
DATE IN : -
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 14-May-21
PLACE OF ACCIDENT : CARPARK AT TANJONG PAGAR BLK 6

55 UBI ROAD 1, SINGAPORE 408699

TEL : 6366 2323 FAX : 6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SGZ 6633 P

S/N	NATURE OF JOBS		ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE AND TRANSFER REAR PARKING AID AND REAR LID KICK SENSOR. CHECK FUNCTION.	S/N \$	360.00 ✓	
2	TO DISMANTLE AND RENEW REAR BUMPER. RE-ORGANISE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$	1,350.00 600	
3	TO RESPRAY REAR BUMPER, REAR LOWER BUMPER AND BOTH REAR WHEEL ARCH TRIMS.	\$	3,200.00 1700	2 x 600 = 1200 Wheel Arch Trim x 2 = 250 x 2 = 500 1700
4	TO RENEW REAR EXHAUST SILENCER AND ALIGN TO POSITION.	S/N \$	480.00 X	
5	TO CARRY OUT DIAGNOSTIC CHECK.	S/N \$	192.00 ✓	
TOTAL LABOUR CHARGES		:	\$ 5,582.00	

55 UBI ROAD 1, SINGAPORE 408699
TEL : 6366 2323 FAX : 6841 1183
EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SGZ 6633 P

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
1	REAR BUMPER-UPPER <i>3 Reus</i>	1	\$ 1,362.00	+
2	REAR BUMPER-LOWER	1	\$ 2,669.00	+
3	REAR BUMPER FIXING PARTS <i>new</i>	1	\$ 170.00	+
4	REAR BUMPER SIDE TRIM-LH <i>3 new</i>	1	\$ 86.00	+
5	REAR BUMPER CENTER TRIM	1	\$ 129.00	+
6	REAR BUMPER FILLER TRIM-CENTER <i>del d</i>	1	\$ 423.00	✓
7	REAR BUMPER SPOILER - DARK CHROME MATT <i>del d</i>	1	\$ 815.00	✓
7	REAR EXHAUST TRIM PLATE -LH <i>cut</i>	1	\$ 95.00	✓
8	REAR EXHAUST TRIM -LH <i>cut</i>	1	\$ 244.00	✓
9	REAR BUMPER LOWER SPOILER <i>del d</i>	1	\$ 575.00	✓
10	REAR BUMPER DIFFUSER ?	1	\$ 1,261.00	?
11	REAR BOOT LID CONTROL UNIT <i>new</i>	1	\$ 411.00	+
12	REAR BUMPER REINFORCEMENT BEAM <i>new</i>	1	\$ 1,417.00	+
13	REAR BUMPER SEAL-LH/RH <i>new</i>	2	\$ 28.00	+
14	REAR BUMPER RETAINER PLATE	1	\$ 182.00	+
15	REAR BUMPER GUIDE SECTION-CENTER	1	\$ 142.00	+
16	REAR BUMPER GUIDE SECTION-LH LOWER	1	\$ 75.00	+
17	REAR BUMPER GUIDE SECTION-LH UPPER	1	\$ 67.00	+
18	RETAINER FOR AERIAL-LH	1	\$ 26.00	+
19	TELEPHONE AERIAL	1	\$ 174.00	+
20	REAR REFLECTOR LIGHT-LH	1	\$ 136.00	+
SUB TOTAL SPARE PARTS			\$ 10,487.00	

ALL CHARGES ARE NOT INCLUSIVE OF GST
LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APPROVED
SPARE PARTS ARE SPECIAL NETT.

55 UBI ROAD 1, SINGAPORE 408699
TEL : 6366 2323 FAX : 6841 1183
EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SGZ 6633 P

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
21	REAR SILENCER	1	\$ 2,344.00	+
22	REAR SILENCER MUFLER CLAMP	1	\$ 121.00	+
23	REAR SILENCER HANGER	1	\$ 60.00	+
24	REAR WHEEL COVER-LH/RH	2	\$ 756.00	✓
25	SUNDRIES		\$ 250.00	?
TOTAL SPARE PARTS		:	\$ 14,018.00	
TOTAL LABOUR CHARGES		:	\$ 5,582.00	
GRAND TOTAL		:	\$ 19,600.00	

ALL CHARGES ARE NOT INCLUSIVE OF GST
LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APPROVED
SPARE PARTS ARE SPECIAL NETT.
bl-29/04/21

55 UBI ROAD 1, SINGAPORE 408699

TEL : 6366 2323 FAX : 6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

NAME : *Adrian*
SURVEYED DATE : *15/09/21*
AUTHORISED DATE :
EXCESS COST :
LIABILITY :
REMARKS : *are authorised, 03 Days*

PLEASE NOTE : THIS ESTIMATE IS BASED ON VISUAL INSPECTION OF THE AFFECTED VEHICLE. SHOULD WE REQUIRE FURTHER LABOUR CHARGES AND SPARE PARTS IN THE PROGRESS OF REPAIR, WE SHALL INFORM YOU ACCORDINGLY. FOR INSPECTION OF VEHICLE, PLEASE REFER TO MS. NORAH KHAI AT TEL: 6768 9828 / 6768 9911 FOR APPOINTMENT.

YOURS FAITHFULLY,
PREMIUM AUTOMOBILES PTE LTD

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:

JOHNNY BOO
BODY REPAIR MANAGER

ALLAN WU
CLAIMS CONSULTANT

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle****Vehicle Owner Particulars**

Owner ID Type:	Company
Owner ID:	665Z

Vehicle Details

Vehicle No.:	SGZ6633P
Vehicle to be Exported:	No
Intended Deregistration Date:	15 Sep 2021
Vehicle Make:	AUDI
Vehicle Model:	Q8 3.0 TFSI QU TIP (SR, 20")
Primary Colour:	Grey
Manufacturing Year:	2018
Engine No.:	DCB047111
Chassis No.:	WAUZZZF16KD006122
Maximum Power Output:	250.0 kW (335 bhp)
Open Market Value:	\$76,390.00
Original Registration Date:	22 Nov 2018
First Registration Date:	22 Nov 2018
Transfer Count:	0
Actual ARF Paid:	\$109,502.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	21 Nov 2028
PARF Rebate Amount:	\$82,126.00

Intended COE Rebate Details

COE Expiry Date:	21 Nov 2028
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$31,101.00
COE Rebate Amount:	\$22,340.00
Total Rebate Amount:	\$104,466.00

The information contained herein is correct as at 15 Sep 2021

OK



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Search

Make	Model	Price	Depreciation	Reg Date	Eng Cap	Mileage	Veh Type	Status
Search Selection	audi q8	Any	Any	Any	Any	Any	Any	Available
	Audi Q8 3.0A TFSI Quattro Tip	\$318,000	\$32,980 /yr	01-Oct-2019	2,995 cc	15,800 km	SUV	Available
Fuel Type: Petrol-Electric Audi Is No Stranger To The SUV Segment, Having Launched Their First SUV, The Q7, Back In 2006. The Current Flagship SUV From Audi, The Q8, Incorporates All Of Audi's Expertise, From The Competition Proven Quattro 4wd System, To Their Hybrid Technology, And All Of... Posted: 12-Sep-2021 Tags: 2019 Audi Q8, Audi Q8, Audi, Q8								
	Audi Q8 Mild Hybrid 3.0A TFSI Quattro Tip S-Line	\$345,000	\$31,830 /yr	25-Nov-2020	2,995 cc	1,219 km	SUV	Available
Fuel Type: Petrol-Electric 1219km Incredibly Low Mileage On This Almost Brand New Beautiful Blue Audi Q8 3.0A With Luxurious Light Grey Leather Upholstery Owned By 1 Expat Owner Selling Due To Not In Town Regularly Due To Covid Travel Restrictions. It's Parked All The While & Secretary... Posted: 11-Sep-2021 Tags: 2020 Audi Q8, Audi Q8, Audi, Q8								
	Audi Q8 Mild Hybrid 3.0A TFSI Quattro Tip S-Line	\$373,999	\$34,240 /yr	30-Jan-2021	2,995 cc	560 km	SUV	Available
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