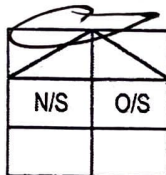


From: \_\_\_\_\_ Date: \_\_\_\_\_  
Estimated Cost: \_\_\_\_\_  
OD / TP / WS / TP RES / OD RES / EVA / INV / MV  
To Inspect Vehicle No: XD 42959  
at Workshop m/s THINK ONE  
of 60, JLN LAM HUNG #02-31  
Insured: LPC  
Policy No. \_\_\_\_\_  
Claims No. \_\_\_\_\_  
Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_  
(Client's Record)  
Make of Veh: \_\_\_\_\_

(Policy Condition)

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



Bal. or Market Value: 138K  
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: XD 42959 Yr Regn: 2016 / 10 OCT  
Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: NISSAN 4KB45CLBHN3 C.C. 13074  
Colour WHITE A/C: Insured / Std / NI / NA  
Sp.Reading - T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: 4KB4CLB00334

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: NI / S/Rim / STD A/Rim or

Tyre Size: F: 11R225

R: 21

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

TOYO / YOKO or

FEINIXWAY

Front

Rear

R/Bal. 8 mm

R/Bal. 8/8 mm

L/Bal. 8 mm

L/Bal. 8/8 mm

D.O.A. 01/10/22

D.O.I. 10/04/22

Survey held at

THINK ONE

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

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

Date / Time Action / Instruction

REPAIR LIMIT - 30K

Date/Time, File Pass to?

☐

: Preli. Report

1)

☐

: Final Report

Date/Time, File Return to?

2)

Days Of Repair: \_\_\_\_\_

Resurvey No. of Trip: \_\_\_\_\_

Survey Fee: \_\_\_\_\_

Transportation: \_\_\_\_\_

Add Fee:

☐

: Site Insp (\$

) S + RS SI

☐

: Interview (\$

) Photos

☐

: Tech. Invs (\$

) Others

Report Format : \_\_\_\_\_

Lump Sum / I.B.I: (\$

ESTIMATE

DATE 03.10.2022

VEHICLE NO:XD4295J NISSAN UD CKB4 00334

No	Qty	DESCRIPTION	AMOUNT S\$
1	1	FRONT FIRE PANEL <del>bt</del> ?	2,855.00
2	1	FRONT FIRE PANEL AIR VENT <i>MIS</i> ✓	211.00
3	2	FRONT DOOR PILLAR INNER R+L <i>X</i>	1,455.00 2,910.00
4	12	FRONT DOOR PILLAR OUTER R+L <i>LH-repair/RH X</i>	1,425.00 2,850.00
5	1	FRONT DOOR PILLAR INNER GARNISH LH <i>X</i>	328.00
6	12	FRONT WIPER PANEL PULL HANDLE R+L <i>LH-at/RH X</i>	285.00 570.00
7	1	FRONT WIPER PANEL OUTER <i>X</i>	758.00
8	1	FRONT WIPER PANEL INNER <i>repair</i>	685.00
9	1	FRONT WIPER TANK <i>X</i>	385.00
10	1	FRONT WIPER MOTOR <i>X</i>	658.00
11	2	FRONT WIPER LINKAGE <i>X</i>	274.00 548.00
12	1	FRONT BONNET ASSY <i>bt</i> ✓	2,885.00
13	1	FRONT BONNET RUBBER SEAL?	115.00
14	1	FRONT BONNET (UD) LOGO <i>MIS</i> ✓	350.00
15	1	FRONT BONNET (QUON) EMBLEM <i>MIS</i> ✓	185.00
16	1	FRONT BONNET GRILLE (UD TRUCKS) EMBLEM <i>MIS</i> ✓	195.00
17	1	FRONT BONNET GRILLE <i>MIS</i> ✓	688.00
18	2	FRONT BONNET GRILLE BRACKET R+L?	87.00 174.00
19	1	FRONT LOWER GRILLE <i>MIS</i> ✓	788.00
20	2	FRONT BONNET LOCK R+L <i>MIS</i> ✓	198.00 396.00
21	2	FRONT BONNET LOCK CATCH R+L <i>MIS</i> ✓	135.00 270.00
22	1	BRACE PANEL <i>bt</i> ✓	110.00
23	1	HEIGHT CONTROL VALVE?	450.00
24	1	HEIGHT CONTROL ROD?	125.00
25	1	FRONT BONNET DAMPER?	320.00
26	12	CORNER PANEL R+L <i>RH-X/LH-ca</i> ✓	988.00 1,976.00
27	2	CORNER PANEL RUBBER LH <i>X</i>	25.00 50.00
28	2	CORNER PANEL BRACKET R+L <i>X</i>	45.00 90.00
29	12	CORNER PANEL LOWER GARNISH LH <i>RH-X/LH-ca</i> ✓	125.00 250.00
30	1	FRONT BUMPER REINFORCEMENT <i>bt</i> ✓	875.00
31	1	FRONT BUMPER CENTER <i>bt</i> ✓	1,670.00
32	1	FRONT BUMPER CENTER FOOT STEP <i>ca</i> ✓	411.00
33	1	CORNER BUMPER LH <i>bt</i> ✓	1,478.00
34	1	CORNER BUMPER END GARNISH LH <i>MIS</i> ✓	205.00
35	1	CORNER BUMPER END BRACKET LH <i>X</i>	185.00
36	2	FRONT BUMPER TOW HOOK COVER LH	220.00 440.00
37	2	FRONT BUMPER CENTER COVER RH <i>MIS</i> ✓	220.00 440.00
38	1	FRONT BUMPER FOG LAMP LH?	205.00
39	1	FRONT BUMPER SINGAL LAMP LH?	185.00
40	1	FRONT HEADLAMP LH <i>ca</i> ✓	2,218.40
41	1	FRONT HEADLAMP BRACKET LH?	542.00
			\$ 31,029.40
less 10%			\$ 3,102.94
			\$ 27,926.46



No	Qty	DESCRIPTION	AMOUNT S\$	
42	4	FRONT HEADLAMP RUBBER MOUNTING LH ?	28.00	112.00
43	1	FRONT CHASSIS CROSS MEMBER repair		3,200.00
44	2	CABIN FLOOR BRACKET X	485.00	970.00
45	2	CABIN LOWER BRACKET X	488.00	976.00
46	2	CABIN BELLOW R+L RH-X / LH-?	680.00	1,360.00
47	2	CABIN SHOCK ABSORBER R+L Lt /	402.00	804.00
48	1	CABIN TORSION BAR Lt /		1,899.00
49	2	CABIN TORSION BAR BRACKER R+L X	452.00	904.00
50	1	TURBO COOLER bt /		9,450.00
51	1	RADIATOR ASSY ?		5,230.00
52	1	FAN BLADE ?		653.00
53	1	AIR CON CONDENSER ASSY bt /		1,270.00
54	1	AIR CON CONDENSER LIQUID TUBE X		185.00
55	1	AIR CON CONDENSER DISCHARGE HOSE X		285.00
56	1	AIR CON CONDENSER MOTOR X		320.00
57	2	FRONT DOOR R+L repair	3,855.00	7,710.00
58	2	FRONT DOOR HINGE TOP R+L X	265.00	530.00
59	2	FRONT DOOR HINGE LOWER R+L X	265.00	530.00
60	2	FRONT DOOR LOCK R+L X	425.00	850.00
61	1	DASHBOARD HOUSING X		652.00
62	1	GLOVE COMPARTMENT DOOR X		388.00
63	1	FUSE BOX ASSY X		988.00
64	1	AIR CON COOLING BOX ASSY ? ?		3,221.00
65	1	AIR CON FAN BLOWER ASSY ? ?		2,115.00
66	1	AIR CON SUCTION HOSE X		245.00
67	1	AIR CON DISCHARGE HOSE X		210.00
68	2	CABIN REAR BELLLOW R+L X	680.00	1,360.00
69	2	CABIN REAR SHOCK ABSORBER R+L X	402.00	804.00
70	1	CABIN REAR BRIDGE X		685.00
71	2	CABIN REAR BRIDGE LOCK X	458.00	916.00
72	2	CABIN REAR BRIDGE LOCK CATCH X	85.00	170.00
			\$	48,992.00
less 10%			\$	4,899.20
			\$	44,092.80

No	Qty	SPECIAL NETT ITEMS	AMOUNT S\$	
1	17	FRONT BONNET GRILLE CLIPS m /	6.00	<del>102.00</del> 60
2	8	FRONT LOWER GRILL CLIP m /	6.00	<del>48.00</del> 40
3	4	CORNER PANEL CLIP m /	8.00	<del>32.00</del> 20
4	2	JOINT SEAL m /	120.00	<del>240.00</del> 80
5	3	COMPANY STICKER BONNET/DOOR	250.00	<del>750.00</del> 500
6	1	40 FOOTER TRAILER ASSY ( TR9563B ) Repair		42,000.00 ?
( PARKED AT 10 PANDAN ROAD )			\$	43,172.00

LABOUR & MISCELLANEOUS:		AMOUNT S\$
1	To remove damaged body parts with all necessary components/attachments apply hot-works where necessary repair,reshape body dented panels in accordance with factory specifications replace new parts refit and align into position refit all necessary components/attachments	<del>6,000.00</del> 2000

2	To spray paint replaced/repaired body parts inclusive of preparatory works and painting materials	<del>2,600.00</del> 1800
3	To transfer front door components with all necessary attachments 2pcs	300.00 X
4	To remove,refit interior garnishes,upholstery,roof lining with all necessary attachments	250.00 X
5	To remove,refit dashboard panel with all necessary components/attachment	250.00 X
6	To remove,replace turbo cooler,radiator with all necessary attachments	<del>350.00</del> 250
7	To remove,replace air con parts vacuum system and recharge gas	<del>250.00</del> 200
8	To remove and install front windscreen glass and water test	200.00 X
9	To conduct headlamp alignment	30.00 ✓
10	Towing charge <i>receipt?</i>	300.00 ?
		<hr/> \$ 10,530.00

Spare Parts	\$	27,926.46
Spare Parts	\$	44,092.80
Specail Nett	\$	43,172.00
Labour Charge	\$	10,530.00

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:

*Paul*  
*Hp 90010068*  
*12 days*  
*4/5*  
*10/04/10/22*  
*@1500*  
*Reg after repair*



# 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 Actual 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	04/10/2022 14:27 (SGT)
Reported by	Driver
Date of Accident	01/10/2022 11:00 (SGT)
Exact Location of Accident	1 Tanah Merah Coast Rd, Singapore 498722
Additional Location Information	TANAH MERAH COAST ROAD
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	XD4295J
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	THINK ONE LEASING PTE LTD
Company Reg No	2XXXXXX609M
Email Address	raj@tol.com.sg
Mobile Phone No	(Phone) +65-96788488
Alternative Phone No	-

## VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Ckb45abtn2
Variant	PRIME MOVER
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	13074

## INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number	20-ML000183-R00

## DRIVER

Name of Driver	MOHAMMAD YAZID BIN MOHAMMAD YUSOP
NRIC No	SXXXX167A
Date Of Birth	09/04/1973
Occupation	Outdoor

Date Of Driving Pass ..... 03/11/2001  
 Driving experience ..... 20 YEARS AND 11 MONTHS  
 Gender ..... Male  
 Mobile Number ..... (Phone) +65-87265473  
 Alt. Phone Number ..... -  
 Email Address ..... raj@tol.com.sg  
 Address ..... APT BLK 510A WELLINGTON CIRCLE  
 Address complement ..... #06-53  
 Postcode ..... 751510  
 Is the driver the policyholder? ..... No  
 If No, Relationship of the Driver with the Insured ..... Hirer  
 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 ..... Chain Collision  
 Weather Conditions ..... Clear  
 Road Surface ..... Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? ..... No  
 Number of vehicles involved in the accident ..... 3  
 Was anybody injured in the Accident? ..... Yes  
 Was any injured conveyed to hospital by ambulance? ..... Yes  
 Was any other vehicle or property damaged? ..... Yes  
 Number of Passengers (Including Driver) ..... 1  
 Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? ..... No  
 Translator's name ..... -  
 Translator's ID ..... -  
 Translator's phone number ..... -  
 Translator's email ..... -  
 Original language used in the statement ..... -

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? ..... Yes  
 Police Station Name ..... Sembawang Neighbourhood Police Centre  
 Police Station Phone No ..... (Phone) +65-18005549999  
 Police Station Address ..... 4 Sembawang Crescent Singapore 757633  
 Was notice of intended Prosecution given? ..... No  
 If yes, against whom? ..... -

#### CIRCUMSTANCES OF ACCIDENT

#### PLEASE REFER TO POLICE REPORT

#### ATTACHMENT(S)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number ..... XD5888S  
 Vehicle Manufacturer ..... Volvo  
 Vehicle Model ..... TIPPER  
 Vehicle Variant ..... -  
 Vehicle Colour ..... White



Vehicle Category .....	Commercial vehicle
Name of Driver .....	-
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	BADLY DAMAGED
No. Of Passenger (Including Driver) .....	FRONT PORTION
	1

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person .....	MOHAMMAD YAZID BIN MOHAMMAD YUSOP
Gender .....	Male
Phone No .....	(Phone) +65-87265473
Address .....	APT BLK 510A WELLINTON CIRCLE
Address Complement .....	#06-52
Post Code .....	751510
Approximate Age Years Old .....	49
Injuries Sustained .....	NECK,BODY BACK
Injured person in which vehicle? .....	-
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	Yes

### **Describe Circumstances of the Accident**

[illegible]

## 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



Witnessed by Reporting Centre  
Personnel



# **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 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. 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.

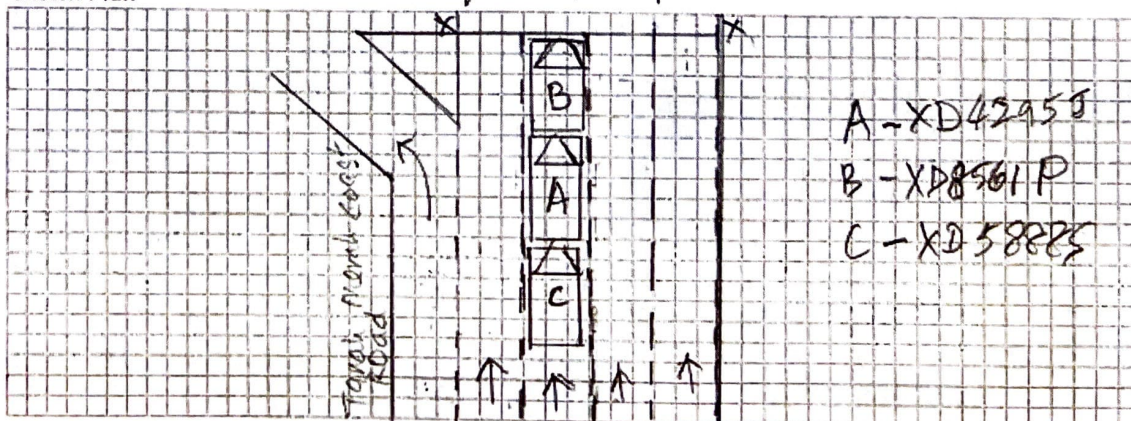


Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

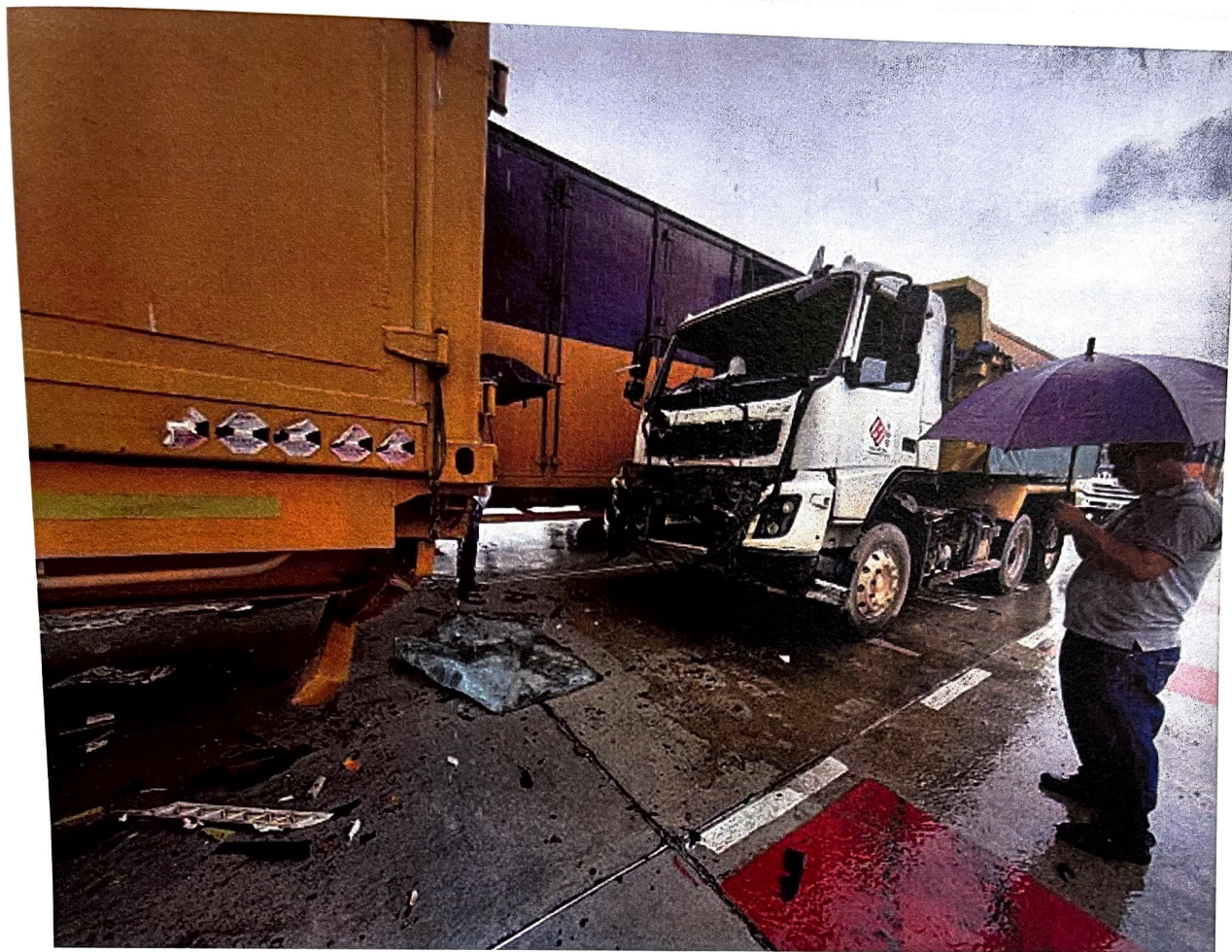
## **Sketch Plan**



























# SINGAPORE POLICE FORCE



T/20221002/2018

Police Station Of Origin:  
Sembawang N.P.C  
4 Sembawang Crescent SINGAPORE  
757633  
Tel No: 1800-5549999

1 of 3

Report No. T/20221002/2018

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/10/2022 10:47	Vide Report No.:	Station Diary No.: 25
--	------------------	--------------------------

### Informant's Particulars

Name of Informant: MOHAMMAD YAZID BIN MOHAMAD YUSOP	Address: APT BLK 510A WELLINGTON CIRCLE #06-53 SINGAPORE 751510
ID Type / ID No.: NRIC NO / S7312167A	Contact No.: Home/Office: Mobile: 87265473
Nationality: SINGAPORE CITIZEN	Email:
Sex: Male Age: 49 Date of Birth: 09/04/1973	Type of Informant: Driver
Race: Javanese	Language: Institution / School Name:
Occupation: Trailer-truck driver	Driving Licence Information: Class: Date of Expiry:

### General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 01/10/2022 11:00	Type of Location: Straight Road
Location:  TANAH MERAH COAST ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	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 Passenger
XD4295J	Prime mover				Slightly Damaged	0
XD5888S	Tipper truck				Slightly Damaged	0

### Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: Nil	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20221002/2018

Police Station Of Origin:  
Sembawang N.P.C  
4 Sembawang Crescent SINGAPORE  
757633  
Tel No: 1800-5549999

2 of 3

Report No. T/20221002/2018

## CONTINUATION OF REPORT

Driver			
Name	MOHAMMAD YAZID BIN MOHAMAD YUSOP		ID No. S7312167A
Related Vehicle	XD4295J (Prime mover)		Contact No. 87265473
Hospital/Clinic	CHANGI GENERAL HOSPITAL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	01/10/2022		Date Discharge 01/10/2022
No. of Days granted Medical Leave	05		Degree of Injury Slight

**Brief Details.**

On the 01/10/2022 at about 1100hrs, I was driving along Tanah Merah Coast Road. I was driving on lane 3 of a 3 lane road. As I approached the traffic light junction, there is a lorry ahead of me whom had stop due to the traffic light. I then slowed down my vehicle and came to a complete stop. As I was stationary, I felt an impact coming from the rear of my vehicle. I was unable to alight from my vehicle to make a check as I was in pain due to the impact.

The ambulance came and conveyed me to Changi general hospital. I was given 5 days medical leave from 01/10/2022 to 05/10/2022, reference MC.EMD2022172266. The doctor diagnosed me with some whiplashed injury on my neck and swollen left leg.





**SINGAPORE  
POLICE FORCE**



T/20221002/2018

Police Station Of Origin:  
Sembawang N.P.C  
4 Sembawang Crescent SINGAPORE  
757633  
Tel No: 1800-5549999

3 of 3

Report No. T/20221002/2018

**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:

L /

SGT 3 ELFY TARMYZY BIN  
YOSREY

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

02/10/2022 10:47

Officer In Charge Of Case:

TP / GIT /  
SI VILTON HIA WEE SIANG  
Contact No.: 65476232

Classification Of Case:

NP168

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company
Owner ID:	609M
Vehicle No.:	XD4295J
Vehicle to be Exported:	No
Intended Deregistration Date:	05 Oct 2022
Vehicle Make:	NISSAN
Vehicle Model:	GKB45CLBHN8
Primary Colour:	White
Manufacturing Year:	2008
Engine No.:	GE133369128
Chassis No.:	GKB4CLB00334
Maximum Power Output:	-
Open Market Value:	\$90,810.00
Original Registration Date:	01 Oct 2010
First Registration Date:	01 Oct 2010
Transfer Count:	2
Actual ARF Paid:	\$4,541.00

PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00

COE Expiry Date:	30 Sep 2025
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$11,975.00
COE Rebate Amount:	\$7,151.00
Total Rebate Amount:	\$7,151.00

Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.

The information contained herein is correct as at 05 Oct 2022

OK



# Nissan GKB45 (COE till 12/2026)

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

**YOUR ONE-STOP COMMERCIAL VEHICLE  
SOLUTION PROVIDER**

Price	\$66,800	Lifespan	08-Feb-2032
Depreciation	\$15,750 /yr	Reg Date	09-Feb-2012 (4yrs 2mths 26days COE left)
Mileage	N.A.	Manufactured	2011
Road Tax	N.A.	Transmission	Manual
Dereg Value	\$17,240 as of today (change)	Fuel Type	Diesel
COE	\$20,325	OMV	\$98,940
Engine Cap	13,074 cc	ARF	\$4,947
Curb Weight	6,840 kg	No. of Owners	2