

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: _____

Veh No: GBC1994K Yr Regn: 2011/July
 Type: M.Caf / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
Truck / Trailer or
 Make: Nissan Cabstar c.c 2953
 Colour: Silver A/C: Insured / Std / NI / NA
 Sp. Reading: _____ T/Radio: Insured / Std / NI / NA
 Eng/No: _____
 C/No: JNISC2F24Z0850078
 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: 195 R15C Yokohama
 R: 165 R13 Falken

(Policy Condition)
 Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

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

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or _____
 Front Rear
 R/Bal. 06 mm R/Bal. 06 mm
 L/Bal. 06 mm L/Bal. 06 mm
 D.O.A. _____ D.O.I. 14/12/22
 Survey held at SME

CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____
 Vehicle: IN / OUT

Des. of Damages: Frnt / Rear / O/S / N/S / U/C / Rooftop or _____
 The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>OD Allianz</u> <u>COE Expiry: 17/07/26.</u>
	<u>mv: 38K</u> <u>(Depreciation @ 11k x 3.5yr = 38.5k)</u>
	<u>PV: 14.3K</u>
	<u>Nett: 23.7K</u>

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

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

Date/Time, File Return to?
 2) _____

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

Survey Fee: _____
 Transportation: _____
 S + RS: _____ \$
 Photos: _____
 Others: _____

Report Format: _____

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	13/12/2022 11:33 (SGT)
Reported by	Both
Date of Accident	29/11/2022 16:00 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	TWDS CHANGI
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC1994K
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	TMF AUTOMOTIVE PTE LTD
Company Reg No	2XXXXX883C
Email Address	TMFBOBBYTEH@GMAIL.COM
Mobile Phone No	(Phone) +65-96382015
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Cabstar
Variant	-
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?	Yes
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	3000

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2001288382

DRIVER

Name of Driver	RAMAKRISHNAN RAMAIAH
NRIC No	GXXXX563W
Date Of Birth	24/11/1991
Occupation	Indoor

Date Of Driving Pass	26/10/2017
Driving experience	5 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-82059168
Alt. Phone Number	-
Email Address	TMFBOBBYTEH@GMAIL.COM
Address	BLK 852 JURONG WEST ST 81 #11-309
Address complement	-
Postcode	640852
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	Collision - Head to Rear
Weather Conditions	Raining
Road Surface	Wet

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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
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	-

PASSENGER 1

Name	KALYANASUNDARAM ARUMUGAM
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Jurong West Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002689999
Alt. Police Station Phone No	(Fax) +65-62672438
Police Station Address	700 Corporation Road Singapore 649818
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20221130/2001.

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	XD2213J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
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	VEHICLE B
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	RAMAKRISHNAN RAMAIAH
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	GBC1994K
Were seat belts worn?	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 Form must be completed by the Policyholder and/or the Actual 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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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.

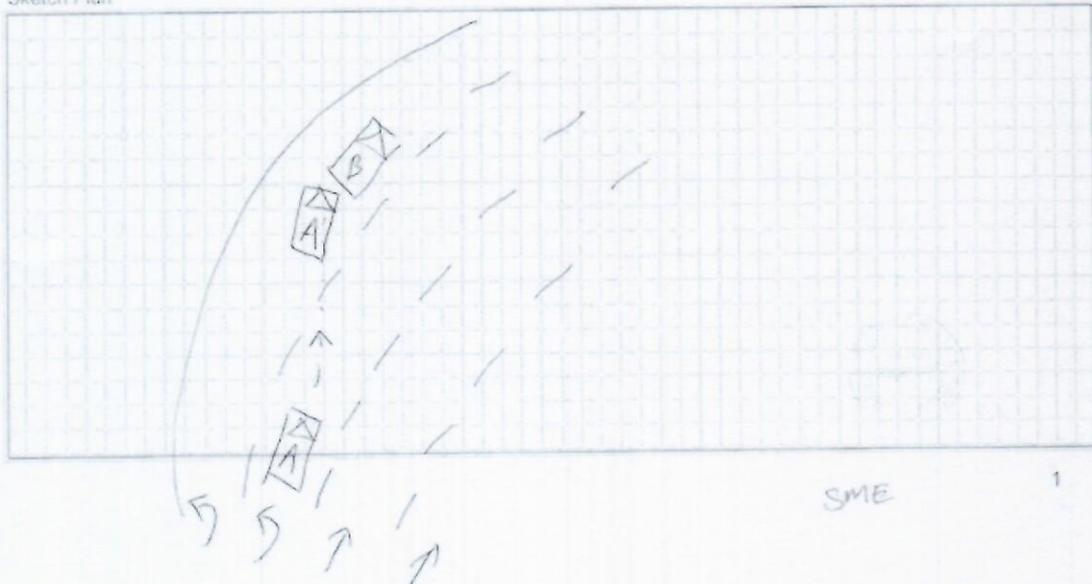


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan



Describe Circumstance of the Accident

Refer to police report



Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

[Handwritten Signature]

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

12/12/2022

Witnessed by Reporting Centre Personnel
(Name as in NRICAD card)



**SINGAPORE
POLICE FORCE**



T/20221130/2001

1 of 4

Report No: T/20221130/2001

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/11/2022 01:22	Vide Report No.: J/20221129/0089	Station Diary No.: 14
--	-------------------------------------	--------------------------

Informant's Particulars

Name of Informant: RAMAKRISHNAN RAMAIAH		Address: APT BLK 852 JURONG WEST STREET 81 #11-309 SINGAPORE 640852	
ID Type / ID No.: FIN NO / G2654563W		Contact No.: Home/Office: Mobile: 82059168	
Nationality: INDIAN		Email:	
Sex: Male	Age: 31	Date of Birth: 24/11/1991	Type of Informant: Driver
Race: Indian		Language: English	Institution / School Name:
Occupation: Lorry driver		Driving Licence Information: Class: 2B,3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 29/11/2022 16:00	Type of Location: Straight Road
Location: PAN-ISLAND EXPRESSWAY				
Weather: Raining		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBC1994K	Lorry	NISSAN		Silver	Slightly Damaged	1
XD2213J	TIPPER TRUCK	HINO		White	Slightly Damaged	0

Details of Person Involved

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



SINGAPORE
POLICE FORCE



T/20221130/2001

2 of 4

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649816
Tel No: 1800-2689999

Report No. T/20221130/2001

CONTINUATION OF REPORT

Passenger			
Name	KALYANASUNDARAM ARUMUGAN	ID No.	G7585484L
Related Vehicle	GBC1994K (Lorry)	Contact No.	84028694
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	29/11/2022	Date Discharge	29/11/2022
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	RAMAKRISHNAN RAMAIAH	ID No.	G2654563W
Related Vehicle	GBC1994K (Lorry)	Contact No.	82059168
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	29/11/2022	Date Discharge	29/11/2022
No. of Days granted Medical Leave	14	Degree of Injury	Serious
Driver			
Name	LOW TEW SENG	ID No.	S1335142B
Related Vehicle	XD2213J (TIPPER TRUCK)	Contact No.	98265302
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 29/11/2022 at about 1600hours, I was driving my company lorry bearing plate number GBC1994K along PIE towards Toh Guan Road exit. I had another colleague who was sitting beside me at that point of time. I was driving on the last lane and wanted to exit on the nearby slip on. There was a construction site ahead of me, however there was no signage nor any barricades to tell the road users that there were road works going on.

In front of me, I saw a tipper truck bearing plate number XD2213J, and it was moving very slowly.

I then wanted to exit on the slip road when suddenly the tipper truck had braked suddenly. I quickly pressed my emergency brake however my lorry did not manage to stop completely and continued to roll forward. My lorry then hit the tipper truck from behind. My right leg was then stuck under the dashboard.



**SINGAPORE
POLICE FORCE**



T/20221130/2001

3 of 4

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20221130/2001

CONTINUATION OF REPORT

and I cannot come out. My friend then managed to come out from the lorry and asked from help.

Shortly after, Traffic Police, ambulance and SCDF then came to scene. SCDF then tried to rescue me and managed to bring me out from the dashboard safely. I was then conveyed to the hospital because my right leg was heavily in pain. There is no in-vehicle camera inside my lorry.

First time such incident had happened. My supervisor was informed and came down to scene. I received 14 days of MC and sustained injuries on both of my legs, left knee and right foot.

TP IO RAHIM
6547 6433



SINGAPORE
POLICE FORCE

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999



T/20221130/2001

4 of 4

Report No. T/20221130/2001

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:

J/
STAFF SGT NUR SYAFIQAH
BINTE ABDUL LATIFF

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
30/11/2022 01:22

Officer In Charge Of Case:
TP / GIT /
SI MOHAMMAD ABDILLAH BIN PALIL
Contact No.: 65476246

Classification Of Case:

NP168

SME MOTOR PTE LTD

1 Kaki Bukit Ave 6 #02-15, AutoBay @ Kaki Bukit, Singapore 417883

Tel: 6747 6106 (6 Lines) Fax: 6744 2368

Email: service@smemotor.com.sg Website: www.smemotor.com.sg

Co. & GST Reg. No: 201119451E

INSURER: Allianz Insurance Singapore Pte. Ltd. (HQ)

PARTICULARS OF CLAIM

Claim Type:	OD (OWN DAMAGE)	Ref. No:	22/AL/OD623 (12)
Policy No:	SP2001288382	Date of Loss:	29/11/2022
Vehicle Reg. No.:	GBC1994K	Driveable?	
Driver Age/Info:	31 / MALE	Party At Fault:	UNKNOWN
TP Injury Involved?	NO	Third Party Involved?	YES
Insured/Claimant:	TMF AUTOMOTIVE PTE LTD		
Driver:	RAMAKRISHNAN RAMAIAH		

Make/Model:	NISSAN CABSTAR, 3.0 (M)	Vehicle Reg. Date:	18/07/2011
Vehicle Colour:	SILVER		
Engine No:	ZD30286998K	Chassis No:	JN1SC2F24Z0850078
Odometer:	0 KM		
Paint Type:			
Total Loss?	NO		
Est. Duration of Repair (day)	21		

Remarks: VEHICLE IN.
Present Location: SME MOTOR PTE LTD (KAKI BUKIT)

COST OF CLAIMS

	Amount
Parts	43,501.70
Miscellaneous Items	210.00
Labour	6,910.00
Paintwork Labour	0.00
Towing	0.00
Gross Total (S\$)	50,621.70
+ GST 7.00% (S\$)	3,543.52
Nett Amount (S\$)	54,165.22

This claim is handled by: CHIA PEI YING

Generated using Merimen e-Claims Internet Estimation & Adjusting System

No.	Qty	Part No.	Particulars	%Disc	%Depr	Amount
42	1		*BRAKE MASTER PUMP	0.00	0.00	*260.00 F
43	1		*BRAKE FLUID TANK	0.00	0.00	*280.00 F
44	1		*METER ASSY	0.00	0.00	*1,380.00 F
45	1		*ACCELERATOR PEDAL	0.00	0.00	*130.00 F
46	1		*ACCELERATOR PEDAL BRACKET	0.00	0.00	*140.00 F
47	1		*BRAKE PEDAL	0.00	0.00	*295.00 F
48	1		*BRAKE PEDAL BRACKET	0.00	0.00	*135.00 F
49	2		*STEERING WHEEL LOWER COVER	0.00	0.00	*160.00 F
50	1		*GEAR LEVER CABLE	0.00	0.00	*290.00 F
51	2		*FRT DOOR <i>Distorted</i>	0.00	0.00	*1,600.00 F
52	2		*FRT DOOR HINGE (TOP) <i>Distorted</i>	0.00	0.00	*120.00 F
53	2		*FRT DOOR HINGE (LOWER)	0.00	0.00	*120.00 F
54	2		*FRT DOOR LOCK <i>Range</i>	0.00	0.00	*240.00 F
55	2		*FRT DOOR INNER RUBBER	0.00	0.00	*190.00 F
56	2		*FRT DOOR OUTER MOULDING <i>Del'd</i>	0.00	0.00	*210.00 F
57	2		*FRT DOOR SIGNAL LAMP <i>Antic.</i>	0.00	0.00	*70.00 F
58	2		*FRT DOOR INNER TRIMBOARD <i>Del'd</i>	0.00	0.00	*900.00 F
59	16		*FRT DOOR INNER TRIMBOARD CLIP <i>m</i>	0.00	0.00	*64.00 F
60	1		*DASHBOARD CROSSMEMBER	0.00	0.00	*680.00 F
61	1		*DASHBOARD WIRE HARNESS	0.00	0.00	*3,900.00 F
			NO STOCK			
62	1		*ENGINE MOUNTING	0.00	0.00	*280.00 F
63	1		*RADIATOR <i>Distorted</i>	0.00	0.00	*495.00 F
64	1		*FRT RH DOOR GLASS <i>shattered</i>	0.00	0.00	*430.00 F
65	1		*FRT RH DOOR GLASS CHANNEL <i>Del'd</i>	0.00	0.00	*150.00 F
66	2		*FRT DOOR POWER WINDOW MOTOR	0.00	0.00	*590.00 F
67	2		*FRT DOOR GLASS GEAR	0.00	0.00	*190.00 F
68	2		*FRT DOOR LOWER RUBBER	0.00	0.00	*150.00 F
69	2		*FRT STEP GARNISH <i>Distorted</i>	0.00	0.00	*290.00 F
70	2		*FRT WHEEL ARC GARNISH	0.00	0.00	*170.00 F
71	1		*WASHER TANK <i>Del'd</i>	0.00	0.00	*95.00 F
72	1		*CABIN REAR PANEL	0.00	0.00	*4,300.00 F
73	1		*AIRCON BLOWER	0.00	0.00	*600.00 F
74	1		*AIRCON COOLING COIL	0.00	0.00	*1,300.00 F

F=Franchise part.

Sub Total (S\$)	39,547.00
+ Margin on L,N Items 10.00% (S\$)	3,954.70
Total Parts (S\$)	43,501.70

SME Motor Pte Ltd/GBC1994K/13/12/2022 13:58. Not valid without Reference section.
Generated using Merimen e-Claims IEAS

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company

Owner ID: 883C

Vehicle Details

Vehicle No.: GBC1994K

Vehicle to be Exported: No

Intended Deregistration Date: 14 Dec 2022

Vehicle Make: NISSAN

Vehicle Model: CABSTAR 3.0 5M/T ABS 2DR 2WD TURBO

Primary Colour: Silver

Manufacturing Year: 2011

Engine No.: ZD30286998K

Chassis No.: JN1SC2F24Z0850078

Maximum Power Output: -

Open Market Value: \$31,133.00

Original Registration Date: 18 Jul 2011

First Registration Date: 18 Jul 2011

Transfer Count: 2

Actual ARF Paid: \$1,557.00

Intended PARF Rebate Details

PARF Eligibility: No

PARF Eligibility Expiry Date: -

PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 17 Jul 2026

COE Category: C - Goods Vehicle & Bus

COE Period(Years): 5

PQP Paid: \$19,904.00

COE Rebate Amount: \$14,296.00

Total Rebate Amount: \$14,296.00

Message

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 14 Dec 2022

OK

JFrog

Artifactory Weekly Group Demo

Used Car Comparison

--- Comparing 4 Vehicles ---

Toyota Dyna 150 3.0M (COE till 02/2026)



Clear All

Add all to Shortlist

Back to search result

Toyota Dyna 150 3.0M (New 5-yr COE)



Add to Shortlist

Toyota Dyna 150 3.0M (COE till 07/2027)



Add to Shortlist

Toyota Dyna 150 3.0M (COE till 08/2027)



Add to Shortlist

CAR DETAILS

Price	\$38,800	\$58,500	\$55,800	\$54,800
Instalment	N.A.	N.A.	N.A.	N.A.
Registration Date	14-Mar-2006	03-Mar-2008	12-Jul-2012	20-Nov-2012
Manufactured	2006	2007	2012	2012
Mileage	-	-	-	180,582 km
Transmission	Manual	Manual	Manual	Manual
Engine Cap	2,986 cc	2,982 cc	2,982 cc	2,982 cc
Road Tax	-	-	-	-
Power	-	-	-	-
Curb Weight	1,500 kg	1,980 kg	1,740 kg	1,800 kg
Features	-	-	-	-
Accessories	-	-	-	-
Description	10 Feet Lorry, New Paintwork, High Trade In, High Loan Is Available, Call Now For Viewing!	Please call in advance before viewing. Thanks!	Renew COE Toyota Dyna 3.0m. Powerful diesel engine, new paint work done with cabin height box. High trade-in and flexible in-house loan available. Please call our friendly representatives for more information or for viewing.	Newly Renewed 5 Further Renew Anc Future. Good Inves Installment. Low D Branded 10 Ft Lorr Regrets.
COE	\$17,236	N.A.	\$26,276	\$26,442
OMV	\$23,681	\$24,284	\$24,970	\$24,970
ARF	\$1,185	\$1,215	\$1,249	\$1,249
Depreciation	\$12,080 /yr	\$11,690 /yr	\$12,200 /yr	\$11,620 /yr
No. of Owners	1	2	2	2
Type of Vehicle	Truck	Truck	Truck	Truck
Category	COE Car	COE Car	COE Car	COE Car
Availability	Available	Available	Available	Available
Remarks	Fuel type Diesel COE expiry date 2026-02-28	Fuel type Diesel COE expiry date 2027-12-02	Fuel type Diesel COE expiry date 2027-07-11	Fuel type Diesel COE expiry date 2027-08-31
Seller	Convince Auto	GF Motor Trading Enterprise	SE 2000 Motor Leasing Pte Ltd	MCT Trader LLP