ASS. PEC. BY:	il constant
ASS	IGNMENT
rom: Date:	Veh No: SND2071U. Yr Regn: 2021, Dec.
estimated Cost:	Type: M.Can / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /
DD / TP / WS / TP RES / OD RES / EVA / INV / MV	Truck / Trailer or
o Inspect Vehicle No:	111 2
t Workshop m/s	Make: And O.S. c.c. 1385 Colour Blue . A/C: Insured / Std / NI / NA
f	Sp.Reading 17876. T/Radio: Insured / Std / NI / NA
sured:	Eng/No:
olicy No.	C/No: WAUZZZF36N1038690
laims No.	Gen. Cong Good / Fair / Poor / Burnt
um Insured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or
ake of Veh:	Modi: Nil /S/Rim / STD A/Rim or
58	Tyre Size: F: 2/5/65R17.
(Policy Condition)	R: 215/65R17.
emark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
repair at the time of inspection.	TOYO/YOKO OF Falker.
al. or Market Value:	<u>Front</u> <u>Rear</u>
AC Accident Rport: Consistent? : Yes or No	R/Bal. 86 mm R/Bal. 06 mr
A / PR Seen: Consistent? : Yes or No	L/Bal. 96 mm L/Bal. 96 mr
t. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 01/02/23
m Sum: % 3 Val.: Yes or No	Survey held at Premium.
A / REV / REP. / 24 HRS	Des. of Damages : Frt / Rear / O/S / N/S / U/C / Rooftop or
Vehicle: IN / OUT te: Person Contacted:	
Pate / Time   Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision
07 916	F
MV: 172k	
PV: 95.11C	
Nett: 76.9K	•
/Time, File Pass to? : Prell. Report	Days Of Repair:
	Resurvey No. of Trip: Survey Fee:
e/Time, File Return to?	Transportation:
Add Fee	parameter and the second secon
	: Interview (\$- ) Photos
port Formett	/ 1000

SP14231R0001 / PREMIUM AUTOMOBILES PTE LTD [408699] ENTRY DATE & TIME: 27/01/2023 13:34 (SGT) SUBMITTED BY: FOONG CHIN FONG VERSION: 1 (27/01/2023 13:34 (SGT))



# 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 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.

In the issue and acceptance of this Form by insurance companies is not an admission of policy hability of the part of the insurance companies.
 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.
 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

Reported by

Date of Accident **Exact Location of Accident** 

Additional Location Information

Country/State of Loss

27/01/2023 13:34 (SGT)

Both

26/01/2023 20:03 (SGT)

Sengkang E Way, Singapore

SENGKANG EAST WAY SLIP ROAD TO SENGKANG EAST

DRIVE

Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number

SND2071U

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

**Email Address** 

Mobile Phone No

Alternative Phone No

No

NG MEI YEN

SXXXX835Z

MEIYAN18@GMAIL.COM

(Phone) +65-96457598

1.4 TFSI S-TRONIC

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 Transmission

CC

Yes

Audi

Q3

Private car

Private use

Auto

1395

INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

AIG Asia Pacific Insurance Pte. Ltd.

7210148310

DRIVER

Name of Driver

NRIC No

Date Of Birth

NG MEI YEN SXXXX835Z 01/08/1980

Accident report SP14231R0001

Page 1 of 39

Occupation Indoor Date Of Driving Pass 27/11/2000 Driving experience 22 YEARS AND 2 MONTHS Gender Female Mobile Number (Phone) +65-96457598 Alt, Phone Number Email Address MEIYAN18@GMAIL.COM Address BLK 15 PUNGGOL FIELD WALK Address complement #12-02 Postcode 828746 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured 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 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? 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 WOO GUAN LE WALLACE Gender Male **DETAILS OF POLICE ACTION** Was the accident reported to the police? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT VEHICLE 2 AND VEHICLE 1 WERE APPROACHING THE SLIP ROAD FROM SENGKANG EAST WAY TO SENGKANG EAST DR. BOTH VEHICLES STEPPED ON THE BRAKES TO SLOW DOWN. THE TRAFFIC LIGHTS ON SENGKANG EAST WAY WERE \$TARTING TO TURN RED. VEHICLE 2 RELEASED ITS BRAKES. WHEN VEHICLE 1 DRIVER TURNED HEAD TO THE TRAFFIC ON SENGKANG EAST DRIVE, VEHICLE 1 FRONT HIT VEHICLE 2 REAR. BOTH DRIVER AND PASSENGER OF VEHICLE 1 FELT PAIN AND PROCEEDED TO SEE DOCTOR THE NEXT DAY. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera?

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

Yes

SKG3118H Vehicle Registration Number Porsche Vehicle Manufacturer Macan Vehicle Model Vehicle Variant White Vehicle Colour Private car Vehicle Category LAM CHUN PEI Name of Driver (Phone) +65-92966144 Contact Number Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident 2 No. Of Passenger (Including Driver)

### INJURED PERSONS DETAILS

#### INJURED 1

NG MEI YEN Name of injured person Female Gender (Phone) +65-96457598 Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn? Was this injured conveyed to hospital by ambulance? NJURED 2 WOO GUAN LE WALLACE Name of injured person Male Gender (Phone) +65-96457598 Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Describe Circumstances of the Accident
Vehicle 2 and Vehicle I were approximing the slip wad from ferging tast way to send a stepped on the brakes to slow down. The to sengtang East DV. Both vehicle stepped on the brakes to slow down. The to sengtang East DV. Both vehicle stepped on the brakes to slow down. The tasks and send to the send of th
to Sunkary East DV. Both vehides stepped on the brakes to slow about 2 subject
- water lights on singkang back way were examing to him red washing to
tappe higher a also released brakes as vehicle and is, vehicle
braces to said head to took at and the raffic on singlicy bust over
anoth turida real cohede
oheac send Webide I front hit vehicle 2 year. Both driver and passenger of vehicle 1 feet pain and proceeded to see door the next day.
the war for and overleded to see douter the next day.
of venice I full pain and pro-

## Declaration

We declare the foregoing particulars are true in every respect.

27 Jan 2023

Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel Tony Foon

#### 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)

Lunderstand, 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' 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) admnistering 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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes

27 Jan 2023 10-30am PolicyHolder's Signature / Date &

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

Witnessed by Reporting Centre Tony FOOM Personnel

Sketch Plan

Sengkana East or



# ♣ PREMIUM AUTOMOBILES



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/0104/2023/EQ

DATE

: 28-Jan-23

WIP

: 60604

VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 1/2/2023

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

: MS NG MEI YEN

ADDRESS

: BLK 15 PUNGGOL FIELD WALK

#12-02

SINGAPORE 828746

TELEPHONE

: HP +65 96457598

TYPE OF CLAIM

OWN DAMAGE CLAIM

**POLICY NO** 

7210148310

VEHICLE NO

SND 2071 U

MODEL CODE

AUDI Q3 1.4 TFSI S-TRONIC

MODEL YEAR

14/12/2021

**ENGINE NO** 

: CZD C54171

CHASSIS NO

WAUZZZF36N1038690

MILEAGE

. .

DATE IN

. .

**ESTIMATED BY** 

JOHNNY BOO / ALLAN WU

ACCIDENT DATE

26-Jan-23

PLACE OF ACCIDENT

SENGKANG EAST WAY SLIP ROAD TO SENGKANG EAST

DRIVE





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 SND 2071 U

S/N	NATURE OF JOBS		CHARGES CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE AND TRANSFER FRONT WIRE HARNESS FOR HEADLIGHTS, HORNS, OUTSIDE TEMPERATURE SENSOR, HEADLIGHT WASHER ASSY AND FRONT PARKING AID.	S/N	\$ 480.00	
2	TO REMOVE AND TRANSFER LHS HEADLIGHT'S CONTROL UNIT AND POWER MODULE.	S/N	\$ 400.00	7
3	TO REMOVE AND RENEW AIRCON CONDENSER, ADDITIONAL RADIATOR AND RADIATOR. CHECK ELECTRICAL FAN AND CONTROL UNIT.	S/N	\$ 1,700.00	
4	TO CARRY OUT COOLING SYSTEM PRESSURISATION , VACUUM AND REGAS FOR R1234.	S/N	\$ 1,200.00	
5	TO DISMANTLE AND RENEW FRONT BUMPER, LHS FRONT FENDER, BONNET AND LHS HEADLIGHT. RENEW FRONT LOCK CARRIER AND ALIGN TO POSITION. RE-ORGANISE FRONT CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.		\$ 5,400.00	2550.
6	TO RESPRAY FRONT BUMPER, LHS FRONT FENDER AND BONNET.		\$ 2,900.00	1650
7	TO CARRY OUT DIAGNOSTIC CHECK.	S/N	\$ 192.00	
	TOTAL LABOUR CHARGES	:	\$ 12,272.00	_





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. SND 2071 U

## DAMAGED PARTS & PRICES

S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
		1	\$ 1,137.00	
1	FRONT BUMPER - LH Jehand		70.00	
2	FRONT BUMPER CLOSING ELEMENT - LH	1	\$	
3	FRONT BUMPER GRILLE - LH	1	\$ 131.00	
4	FRONT BUMPER GRILLE - CENTER M	1	\$ 256.00 ~	
5	FRONT BUMPER GUIDE SECTION - LH	1	\$ 46.00	
6	FRONT BUMPER CONNECTING PIECE	1	\$ 171.00	
7	FRONT LOWER GRILLE COVER PLATE THE ME	1	\$ 61.00 🕅	
8	FRONT BUMPER CLOSING ELEMENT XXX ~	1	\$ 224.00	
9	FRONT BUMPER SPOILER	1	\$ 451.00	
10	FRONT BUMPER AIR GUIDE GRILLE - LH	1	\$ 181.00	
11	DADIATOR CRILLE	1	\$ 1,690.00	
12	RADIATOR GRILLE STRIKER PLATE	1	\$ 288.00	
13	SOUTH CAR RA 3	1	\$ 49.00	
14	PAGE STATE PRACKET	1	\$ 51.00	
15	2	1	\$ 1,326.00	<b>?</b>
16	THE PARTY OF THE P	1	\$ 756.00 <del>f</del>	
17	7	1	\$ 121.00	( 10h A )
18	Bet	1	\$ 1,030.00	(pholo).
19	10.14	1	\$ 145.00 L	
20	A A	1	\$ 17.00	
	SUB TOTAL SPARE PARTS	:	\$ 8,201.00	

ALL CHARGES ARE NOT INCLUSIVE OF GST

LEGEND:

REMARKS (OK) = APPROVED, REMARKS (X) = NOT APROVED

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. SND 2071 U

### **DAMAGED PARTS & PRICES**

S/N	PARTS DESCRIPTION	QTY		S/NETT	REMARKS
21	AIR CONDITIONER STICKER Wer	1	\$	9.00	1
22	FRONT PARKING AID SENSOR - INNER / OUTER	2	\$	543.00	t
23	FRONT PARKING AID SEAL RING Me u	4	\$	11.00	<b>r</b> .
24	FRONT FENDER - LH	1	\$	1,530.00	r
25	FRONT FENDER ATTACHMENT PARTS	1	\$	69.00	X
26	FRONT FENDER BRACE - LH	1	\$	104.00	+
27	FRONT WHEEL COVER - LH / RH	2	\$	598.00	
28	HEADLIGHT - LH	1	\$	6,305.00	7
29	HEADLIGHT SECURING BOLTS	1	\$	22.00	7
30	HEADLIGHT MOUNTING - LH	1	\$	140.00	7
31	LIFT CYLINDER - LH	1	\$	244.00	<b>X</b> .
32	BONNET Perfed	1	\$	3,765.00	
33	BONNET ATTACHMENT PARTS MM M	1	\$	317.00	4
34	BONNET IMPACT PROTECTION - CENTER	1	\$	34.00	
35	BONNET HINGE - LH / RH Best	2	\$	172.00	
36	BONNET ATTACHMENT PARTS	1	\$	317.00	+
37	BONNET STRIKER - LH / RH 2	2	\$	260.00	1 +
38	BONNET LOCK - LH / RH	2	\$	481.00	1
39	LOCK CARRIER Could	1	\$	1,497.00	
40	RADIATOR AIR GUIDE - LH	1	\$	47.00	7
			\$	16,465.00	-
	SUB TOTAL SPARE PARTS	•	->	10,403.00	_

ALL CHARGES ARE NOT INCLUSIVE OF GST

REMARKS (OK) = APPROVED, REMARKS (X) = NOT APROVED LEGEND: 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. SND 2071 U

### **DAMAGED PARTS & PRICES**

S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
41	RADIATOR AIR GUIDE - UPPER	1	\$ 53.00	ר
42	A/C CONDENSER Dentid	1	\$ 641.00	
43	A/C CONDENSER O-RING 7	1	\$ 13.00	7
44	A/C CONDENSER O-RING	1	\$ 14.00	
45	ADDITIONAL RADIATOR	1	\$ 990.00	?
46	RADIATOR	1	\$ 1,099.00	7.
47	READY-MIX COOLANT	4	\$ 217.00	
48	FRONT NO PLATE Deved	S/N	\$ 60.00	
49	SUNDRIES		\$ 400.00	•
	TOTAL SPARE PARTS	:	\$ 28,153.00	
	TOTAL LABOUR CHARGES	:	\$ 12,272.00	
	GRAND TOTAL	:	\$ 40,425.00	

ALL CHARGES ARE NOT INCLUSIVE OF GST

LEGEND:

REMARKS (OK) = APPROVED, REMARKS (X) = NOT APROVED

SPARE PARTS ARE SPECIAL NETT.

## **PREMIUM** AUTOMOBILES



55 UBI ROAD 1, SINGAPORE 408699 TEL: 6366 2323 FAX: 6841 1183

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

:

NAME

SURVEYED DATE

AUTHORISED DATE

**EXCESS COST** 

LIABILITY

REMARKS

Mol Anthorised, 08 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:

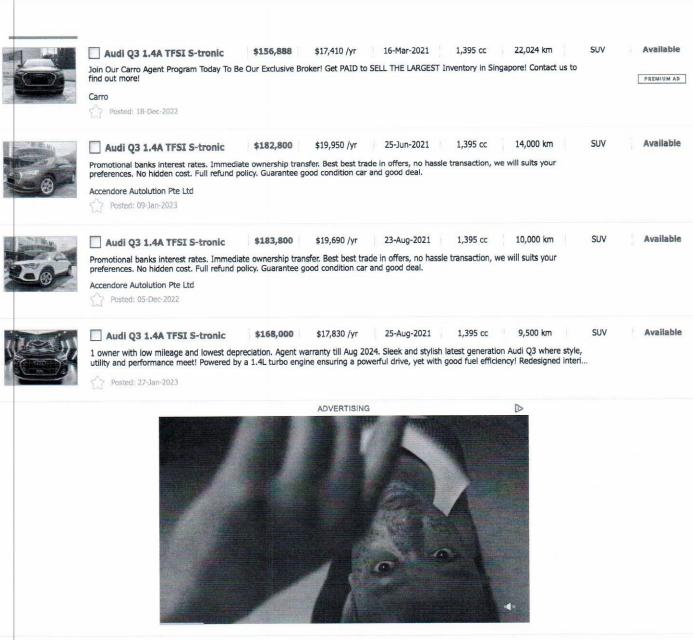
JOHNNY BOO BODY REPAIR MANAGER **ALLAN WU** CLAIMS CONSULTANT

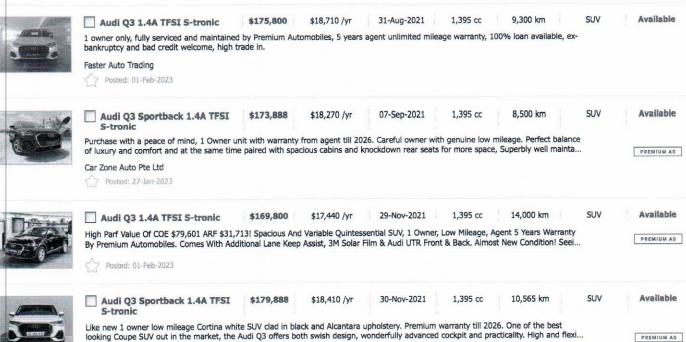
## > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	NING.
Owner ID Type:	Singapore NRIC
Owner ID:	835Z
V <mark>ehicle Details</mark>	CALDOOTALL
Vehicle No.:	SND2071U
Vehicle to be Exported:	No
Intended Deregistration Date:	02 Feb 2023
Vehicle Make:	AUDI
Vehicle Model:	Q3 1.4 TFSI S TRONIC (17")
Primary Colour:	Blue
Manufacturing Year:	2021
Engine No.:	CZDC54171
Chassis No.:	WAUZZZF36N1038690
Maximum Power Output:	110.0 kW (147 bhp)
Open Market Value:	\$28,366.00
Original Registration Date:	14 Dec 2021
First Registration Date:	14 Dec 2021
Transfer Count:	0
Actual ARF Paid:	\$31,713.00
Intended PARF Rebate Details	CALL TO THE RESIDENCE OF THE PARTY OF THE PA
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	13 Dec 2031
PARF Rebate Amount:	\$23,784.00
Intended COE Rebate Details	
COE Expiry Date:	13 Dec 2031
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$80,401.00
COE Rebate Amount:	\$71,258.00
Total Rebate Amount:	\$95,042.00

The information contained herein is correct as at 02 Feb 2023





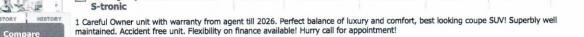
1,395 cc

01-Dec-2021

19,998 km

SUV

Available



\$18,520 /yr

\$180,888

GMA Auto Enterprise LLP
Posted: 04-Jan-2023

Audi Q3 Sportback 1.4A TFSI

Posted: 11-Jan-2023

Available \$176,000 \$18,090 /yr 10-Dec-2021 1,395 cc 15,000 km SUV Audi Q3 1.4A TFSI S-tronic \$0 Drive-away, full-loan available. 1 owner, mint agent unit with active 5 years warranty & Servicing. Facelift model, loaded with new options and tech. As good as new, lightly used. Trade-In/Consignment Available. Contact Us For A Viewing Appointment Today. PREMIUM AD Bavarian Marques Pte Ltd Posted: 30-Jan-2023 \$170,000 \$17,440 /yr 16-Dec-2021 1,395 cc 12,000 km SUV Available Audi Q3 1.4A TFSI S-tronic High PARF value of COE \$85,000. Spacious. Well maintained 1 owner, low mileage, agent 5 years warranty by Premium Automobiles. DIRECT OWNER Comes with solar film and Audi utr front and bac k. Great condition! Not interested in consignment or any dealer marketing. Thank you

Buy / Rent Cars	Sell Your Car	Aftermarket	Articles	General
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