

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Case No.: FC/P 5574/2017
Document No.: FC/PRG
2969/2018

In the Matter of Probate and Administration Act (Chapter 251)

And

In the Estate of CHEONG CHEE WAH
(NRIC No. S1623639Z) , deceased.

GRANT OF PROBATE

Probate of the Last Will and Testament (a copy of which is annexed) of CHEONG CHEE WAH (NRIC No. S1623639Z) late of 503A, Canberra Link, # 13-07, Singapore 751503, deceased who died on 01-November-2017 at National University Hospital, Singapore, is granted by this Court to WHONG TUNG GEOK (NRIC No. S7029083I) as the sole executrix named in the said Will.

Dated: 22-December-2017



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CHIA WEE KIAT
REGISTRAR
FAMILY JUSTICE COURTS
SINGAPORE

Date of Issue: 02-July-2018



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CHIA WEE KIAT
REGISTRAR
FAMILY JUSTICE COURTS
SINGAPORE



CERTIFIED TRUE COPY

TAN JIN SONG
Advocate & Solicitor
Singapore

REPUBLIC OF SINGAPORE CERTIFICATE OF REGISTRATION OF DEATH

DEATH REGISTRATION NO

263634D

Death registered at		NATIONAL UNIVERSITY HOSPITAL(S) PTE LTD, SINGAPORE			
Full name of deceased		CHEONG CHIEE WAH			
NRIC/Identification Document No.		S1623639Z		Sex	MALE
Race/Dialect Group		CHINESE/CANTONESE		Nationality	SINGAPORE CITIZEN
Home Address		APT BLK 503A CANTERRA LINK #13-07 SINGAPORE 751503			
Place or Address where death occurred		NATIONAL UNIVERSITY HOSPITAL			
Date of birth		27/09/1963		Country/Place of birth SINGAPORE	
Date and hour of death		01/11/2017 0041			
Approximate interval between onset and death		Years	Months	Days	Hours
		2	1		
I		(a) CARCINOMA IN SITU; BRONCHUS AND LUNG			
Disease or Condition leading to death					
(b)					
Antecedent Causes					
(c)					
II					
Other Significant conditions					
Name and official status of person certifying cause of death		DR SEAN DULLOO, MEDICAL PRACTITIONER			
Certificate of Cause of Death		Reference No.: COD-2017-NU-001513 Date: 01/11/2017			
Name		CHEONG CHIEE CHIONG			
Address		23 UPPER SERANGOON VIEW #03-02 SINGAPORE 534047			
NRIC/Identification Document No.		S7112567Z			
Relationship		BROTHER			
Name of Registration Officer		ALIA FARHANA BINTE RAYALI			
Designation		REGISTRATION OFFICER			
I certify that the above information given by me is correct.		 Informant's Signature/ Thumb impression A Date 01 NOV 17			



DECEASED

CAUSE OF DEATH BY CERTIFIER

INFORMANT

REGISTRATION OFFICER