

ASS. REC. BY:

REF: CS3/LPC18004212/R19d38² Special Instruction:

Surveyor:

Rasul

ASSIGNMENT (Office)

From (Person):

Gerald Poh

of

LPC

Date/Time:

5/3/18 8:59am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

SLW 4116K

Insured:

YP 5070J

at Workshop m/s

Z-One Automotive

Tel:

97 55 2115

of

7 Swan Lee Street # 61-27/47

Policy No:

Claim No:

17/18/18/VC00/020423

Sum Insured:

Excess:

Make of Veh:

D.O.A.

22/2/18

(Client's Record)

CA / REV / REP. / REV 24 HRS

H.O.D. Endorsement:

Date/Time:

9:23am 5/3/18

Person Contacted:

Yvonne

Vehicle

IN/OUT

Date/Time

Action/Instruction (X) Estimate

SLW 4116K - X

YP 5070J - X

bismarku survey - 02/4/18 - XGR

After paint - 04/4/18 - Rasul.

06/4/18

Submit RFI.

John

C
4430H

Name: _____ Date: _____

Estimated Cost: _____

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

Co Insured Vehicle No: **SLW 4116 K**

at Workshop on: **2-0-06**

at: **Autobuy #01-5287**

Insured: **Complete**

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.

Date of Market Value: _____

IDAC Accident Report: _____ Consistent? Yes or No

GIA / FR Seen: _____ Consistent? Yes or No

Est. Repair: _____ days Res.: Yes or No

Lim Sum: _____ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Date / Time: _____ Action / Instruction: _____

Vehicle: **SLW 4116K** Date: **2018 mpr**

Type: **C** Car / M/Cycle / Bus / Van / Lorry / Taxi / Private Motor /

Truck / Trailer /

Make: **HONDA FREED 1.5 GA** No: **1496**

Colour: **BLUE** AX: Insured / Std / Nil / NA

Sp Reading: **007386** T/Radio: Insured / Std / Nil / NA

Eng/No: _____

C/No: **GB71043519**

Gen Cond: Good / **C** / Poor / Burnt

Steering: **S** normal / Jammed / Leaked / Burnt / or

Brake: **C** normal / Jammed / Leaked / Burnt / or

Mod: Nil / **C** Rims / STD A/Rim / or

Tyre Size: F: **185/65R15** R: _____

BS: **C** EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO / or

Front: **6** mm Rear: **6** mm

R/Bal: **6** mm L/Bal: **6** mm

D/OA: **22/02/18** D/OI: **21/03/18 11.45am**

Survey held at: **Z-ONE**

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

N/S FRT

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

RECEIVED 06 APR 2018

Damage Type: ☐ Preli. Report ☐ Final Report

to: **06/4 twint**

Order Type: Two Payment / or

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: ☐ Late Fee: 15 ☐ Late Fee: 15 ☐ Late Fee: 15 ☐ Late Fee: 15

Report Content: **PR1**

Temp Sum/LB/LC: _____

Survey Fee: _____

Inspection: _____



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

LONPAC INSURANCE BHD

Ref : CS3/LPC18004212/R1d3

300 BEACH ROAD

#17-04/07 THE CONCOURSE SINGAPORE 199555

Date : 05-03-2018



Code : LPC2

1. Policy Particulars :- (THIRD PARTY CLAIM)

Insured Veh.	YP 5070J	Veh. Inspected	SLW 4116K
Policy No.		Coverage (\$)	0.00
Claim No.	17/18/18/VC00/020423	Excess (\$)	0.00
Assign From	GERALD POH	Assign Date	05/03/2018

2. Vehicle Particulars & Condition

Make & Model	c.c	0
Engine No.	HIDDEN	Year of Reg.
Chassis No.		Colour
Odometer	-	Steering
Brakes		Modification
General		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm

4. Description of Damages

--

5. General Information

Accident Date	22/02/2018	Inspection Date
Survey held at	Z-ONE AUTOMOTIVE PTE LTD 1 KAKI BUKIT AVE 6, BLK C, #01-52 AUTOBAY SINGAPORE 417883	

5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.
B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION.
THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE.
C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.

Nivitha (LKK Auto)

From: GERALD POH WEE BIN <geraldpoh@lonpac.com>
Sent: Monday, 5 March 2018 8:59 AM
To: assignments@lkkauto.com
Cc: MT_Claim_SG
Subject: FW: ACCIDENT INVOLVING YP5070J & SLW4116K ON 22.2.2018
Attachments: 05032018084716.pdf

Our Ref : 17/18/18/VC00/020423

Dear Catherine,

We attached a copy of insured's GIA report for your attention.

As our insured driver is alleging that there was no accident, kindly arrange for the case handler to obtain the video footage as indicated in the third party's police report.

Best Regards
Gerald Poh
Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road, #17-04/07 The Concourse, Singapore 199555
Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706

From: GERALD POH WEE BIN
Sent: Friday, 23 February, 2018 2:04 PM
To: assignments@lkkauto.com
Cc: 'mt_claim@lonpac.com'
Subject: ACCIDENT INVOLVING YP5070J & SLW4116K ON 22.2.2018

Our Ref : TBA,

Dear Catherine,

Please see attached and proceed with the pre-repair survey.

Best Regards
Gerald Poh
Senior Claims Executive | Lonpac Insurance Bhd
300 Beach Road, #17-04/07 The Concourse, Singapore 199555
Tel: (65) 6250 7388 Ext.255 | Fax: (65) 6296 2706

Sarwant Singh
Danny Teo Kint Soon
Pritam Singh
Tan Shi Hua, Vanessa
Ravleen Kaur Khaira



CONVEYANCING OFFICE:
450 Lorong 6 Toa Payoh
#02-03 Harsing Centre
Singapore 319394
Tel: 6221 6114
Fax: 6266 6925
www.satwantlaw.com.sg
(Fax not for service
of documents)

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(Please quote our Ref. when replying)

Your Ref: To be advised
Our Ref: PD/DL/1800268 (ml) – Toa Payoh Office
(margarettim@satwantlaw.com.sg)

23 February 2018

Lonpac Insurance Bhd
300 Beach Road
#17-04/07 The Concourse
Singapore 199555

BY EMAIL & FAX
Fax No.: 6296 3767

Attention: Motor Claims Department

Dear Sir/Mdm,


ACCIDENT INVOLVING SLW4116K & YP5070J ALONG TAMPINES AVE 10
TAMPINES EXPRESSWAY FILTER MERGING LANE ON 22/02/2018 @ 08:50

We refer to your email dated 23 February 2018 informing your intention to conduct a pre-repair survey on our client's vehicle SLW4116K.

Please be informed that said vehicle can be inspected at:
Location: 7 Soon Lee Street #01-27/47 Singapore 627608
Contact Person: Yvonne (9755 2115 / 6250 2115)

In the event you fail to conduct the pre-repair survey within the next 2 working days, excluding any intervening Saturday, Sunday or Public Holiday, the said workshop will commence repairs thereafter without further reference to you.

Yours faithfully,


SATWANT & ASSOCIATES
(Danny Teo)

cc client

For Surveyor: To initial after Completion

1st Inspection
Appointed surveyor
(Name & Signature)

Date & Time

2nd Inspection
Appointed surveyor
(Name & Signature)

Date & Time

3rd Inspection
Appointed surveyor
(Name & Signature)

Date & Time

NB: Any Settlement of offer is on the express condition that this settlement is in respect of our client's claim for property related damaged only and shall not preclude our client from claiming injury-related damages arising from this accident.
This document is intended for the addressee(s) only and may contain confidential information and/or may be subject to legal privilege. If you have received this in error, please contact us immediately and destroy the original message.

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 ability.
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 Report	23/02/2018 14:40
Date Of Accident	22/02/2018 08:50
Exact Location Of Accident	TAMPINES AVE 10 EXPRESSWAY FILTER MERGING LANE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLW4116K
Insured/Policyholder	
Name Of Registered Owner	OCEAN CARZ LEASING PTE LTD
Co Reg No	20174430H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-91285353
Vehicle Particulars	
Manufacturer	HONDA
Model	FREED HYBRID 1.5G AUTO
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5094397499-01
Cover Note Number	
Driver	
Name of Driver	SIM KHENG HIANG (SHEN QINGXIAN)
NRIC No	S7624037Z
Date Of Birth	10/08/1976
Occupation	OUTDOOR
Date Of Driving Pass	01/04/2005
Driving Experience	12 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90910148
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 148 RIVERVALE CRESCENT #15-42
Postcode	540148
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

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 this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	HOUGANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 60 HOUGANG AVE 9 , POSTCODE: 538775 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4890999 - FAX NO: 63128989
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT : T/20180222/2199.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH Z-ONE AUTOMOTIVE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP5070J
Vehicle Make/Model/Colour	LORRY
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

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' 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) 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' law yers/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 used outside of Singapore, for one or more of the above Purposes.

X   

Policyholder's Signature / Date & Time



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

Witnessed by Reporting Centre Personnel

Sketch Plan

Vehicle A : SLW4116K

Vehicle B : YP5070J

Tampines Expressway Filter Merging Lane

Sketch Plan #2

Describe Circumstances of the Accident

2 Refer to the Police Report T/2018 0322 | 2199 2

NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO
SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY
FOR MORE INFORMATION.

Please State:

() Claim Own Policy () Claim Third Party (/) Claim OD/TP at other workshop () Reporting only

Declaration

We declare the foregoing particulars are true to every respect

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre
Personnel

Police Report



**SINGAPORE
POLICE FORCE**



T/20180222/2199

1 of 3

Police Station Of Origin
Hougang N P C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No: T/20180222/2199

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/02/2018 22:58	Vide Report No.:	Station Diary No: 170
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Informant's Particulars

Name of Informant: SIM KHENG HIANG			Address: APT BLK 148 RIVERVALE CRESCENT #15-42 SINGAPORE 540148		
ID Type / ID No: NRIC NO / S7624037Z			Contact No.: Home/Office: Mobile: 90910148		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 41	Date of Birth: 10/08/1976	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: ASSISTANT ENGINEER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

General Information of the Accident:				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 22/02/2018 08:50	Type of Location: Gradient
Location: Along Road 1 Traveling Toward Road 2 TAMPINES AVENUE 10 TAMPINES EXPRESSWAY FILTER MERGING LANE				
Weather: Clear		Road Surface: Dry		Road Speed Limit
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLW4116K	Car	HONDA	FREED HYBRID 1.5G AUTO	Blue	Slightly Damaged	0
YP5070J	Lorry			Silver		0

Details of Person Involved

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

Police Report



**SINGAPORE
POLICE FORCE**



T/20180222/2199

2 of 3

Police Station Of Origin
Hougang N P C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No: T/20180222/2199

CONTINUATION OF REPORT

Driver			
Name	SIM KHENG HIANG	ID No.	S7624037Z
Related Vehicle	SLW4116K (Car)	Contact No.	90910148
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 22/02/2018 at about 0851hrs, I was travelling in my vehicle bearing registration no SLW4116K along Tampines Avenue 10 on the outer most right lane as I intended to turn right towards the Tampines Expressway TP. Subsequently, after turning and entering the up slope of the expressway, there was a lorry bearing registration no. YP5070J that was on my left.

Thereafter, when the road was merging, the said lorry rear right side portion collided onto my left side mirror and I slowed down. The said lorry then continued moving forward and did not stop. At that juncture, I was not able to trace the lorry and continued my journey.

I then made check after exiting the expressway and discovered that left side mirror was dislodged from my vehicle and broken. Additionally, there were some scratches on the left front portion of my vehicle. I wish to add that I have an on-board camera (facing the front) which recorded the accident and the lorry has "GS Logistic Services" on the vehicle body.

I wish to add that this is the first time I came across the said lorry and that I have the footages for investigation purpose. I wish to further add that there are no government property.

Police Report



**SINGAPORE
POLICE FORCE**



T/20180222/2199

3 of 3

Police Station Of Origin:
Hougang N P C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No: T/20180222/2199

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:

F /

Sgt 3 SAIFUL ARIFFIN BIN BUANG

Signature Of Interpreter

Not applicable

Officer In Charge Of Case:

TP / HRT /

SI ABDUL KAREEM BIN ABDUL HAGUE

Contact No: 65476079

Authentication Stamp

NP168

Signature Of Informant

Date/Time

22/02/2018 22:58

Classification Of Case:


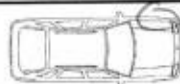
**LKK Auto Consultants Pte Ltd**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.: 1 of 1

PRE-REPAIR INSPECTION REPORT			
LONPAC INSURANCE BHD 300 BEACH ROAD #17-04/07 THE CONCOURSESINGAPORE 199555		Ref: CS3/LPC18004212/R1qd3s2 Date: 09-04-2018 Code: LPC2	
1. Policy Particulars :- (THIRD PARTY CLAIM)			
Insured Veh.	YP 5070J	Veh. Inspected	SLW 4116K
Policy No.		Coverage (\$)	0.00
Claim No.	17/18/18/VC00/020423	Excess (\$)	0.00
Assign From	GERALD POH	Assign Date	05/03/2018
2. Vehicle Particulars & Condition			
Make & Model	HONDA FREED 1.5 G A	c.c	1496
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	GB71043519	Colour	BLUE
Odometer	007386 KM	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	FAIR		
3. Conditions of Tyres			
	Size	Make	Balance
R/H Front Tyre	185/65R15	DUNLOP	6 mm
L/H Front Tyre	185/65R15	DUNLOP	6 mm
R/H Rear Tyre	185/65R15	DUNLOP	6 mm
L/H Rear Tyre	185/65R15	DUNLOP	6 mm
4. Description of Damages			
THE VEHICLE SUSTAINED DAMAGES AT THE N/S FRONT PORTION.			
5. General Information			
Accident Date	22/02/2018	Inspect Date / Time	21/03/2018 (11:45 AM)
Survey held at	Z-ONE AUTOMOTIVE PTE LTD 1 KAKI BUKIT AVE 6, BLK C, #01-52 AUTOBAY SINGAPORE 417883		
5a. Remarks			
A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS. B) THE REPAIR ESTIMATE WAS NOT PRESENTED AT THE TIME OF INSPECTION. THE REPAIRER WAS TOLD TO PREPARE THE ESTIMATE. C) ENCLOSED PLEASE FIND DAMAGED VEHICLE PHOTOGRAPHS.			

Report Ref No. CS3/LPC18004212/R1qd3s2

Inspected By



MOHAMMED RASUL BIN MOHD YUNUS

Automotive Assessor



K.K. LAU CPT(RET)

BEng(Hons), B.Bus, MBA, PEng, PE, MInstAEA, MASME, MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.