F	Priscilly of	IGNMENT (C	Mice)	Date/Time:	5/2/201
	rrischia or				
	IP RES / OD RES / EVA / INV		***************************************		
	le No: SGD 696 M		Inst	ired:	
				Tel:	
of					
Policy No:	2100374696	Cla	im No: 790	00170904	-SG
		10	vapee:		
Make of Veh:(Client's Record)				D.O.A	7 1 2018
CA / REV / I	REP. / REV 24 HRS			H.O.D. End	orsement:
Date/Time:	Person Co	ntacted:		Vehicle IN/	OUT
Date/Time	Action/Instruction				
22/5/2014	CC6/AIG14007546,	/Apa392	TP: St	D 696m 1	OA: 12/0
The state of the s	CC6/AKT15004319/	1	TP:SGI	696M D	Of: 10/3
3/7/2016	CC4/ A16-150206TT /R	- 0	TP: SGO	696M P	A :21/4
2/8/2016	CC4/LPC 16007728	Fp9392	TP: 56) 696m D	04:21/11
1					

FW: OC 7900170904SG / SGD 696M

Bryan Ang (LKKAuto)

Mon 5/2/2018 12:29 PM

Deleted Items

To Naz (LKKAuto) < Naz@lkkauto.com>;

ccSim, Priscilla-LK (Priscilla-LK.Sim@aig.com) < Priscilla-LK.Sim@aig.com>;

0 1 attachments (1016 KB)

gia rpt.pdf;

Dear Priscilla

Contents of your email is noted.

My colleague Naz will follow up on this case.

Dear Naz

Please carry out interview of driver as well as registered owner. Also check with Traffic Police on their investigations.

Best Regards, Bryan Ang

LKK Auto Consultants Pte Ltd

phone: 6256-3561 | email: <u>bryanang@lkkauto.com</u> | fax: 6741-4108 Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Sim, Priscilla-LK [mailto:Priscilla-LK.Sim@aig.com]

Sent: Monday, 5 February 2018 9:40 AM

To: Bryan Ang (LKKAuto) <bryanang@lkkauto.com>

Subject: OC 7900170904SG / SGD 696M

9666 8658

Hi Bryan

Kindly conduct investigation pertaining the above accident driver relation with owner / passenger and/or drink driving involved.

Priscilla Sim LK Senior Complex Claims Examiner Claims | AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way #08-16 Singapore 079120

Tel +(65) 6419 1755 | Fax +(65) 6835 7416 priscilla-lk.sim@aig.com | www.aig.com.sg 574747816

COPS SP COO

IMPORTANT NOTICE:

The information in this email (and any attachments) is confidential. If you are not the intended recipient, you must not use or disseminate the information. If you have received this email in error, please immediately notify me by "Reply" command and permanently delete the original and any copies or printouts thereof. Although this email and any attachments are believed to be free of any virus or other defect that might affect any computer system into which it is

Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 17/01/2018 17:02

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Driving Experience

Gender

- 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 witholding 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	0
Date Of Report	17/01/2018 16:37	HOT 18- Hede from 20 on 10th.
Date Of Accident	07/01/2018 02:00	last told me or complithe to make
Exact Location Of Accident		rest.
Country/State of Loss	SINGAPORE	
D	ETAILS OF OWN VEHICLE	
Vehicle Registration Number	SGD696M	Α
Insured/Policyholder		- a bit dazed
Name Of Registered Owner	HARIS FIROZ BIN ABDUL	JALIL - crowled from him side try chis
NRIC No	S7274972C	- 10 mins " pah,
Email Address	FIROZ@GMAIL.COM	200
Mobile Phone No	(LOCAL) +65-96886672@	- onfulance /TP. Likes
Alternative Phone No	Others-91552710	- other come by & checked whether
Vehicle Particulars		- they ok.
Manufacturer	NISSAN	- dide by.
Model	GTR-3.8 (A)	Pagare to a rad, with I o number
Exact Purpose for which vehicle was being used at time of accident		- No photos tolar, arm in pain
Are you claiming under your own insurance policy for repair to your vehicle?	NO	- No sledy offer quidny.
If No, Please state action to be taken	REPORTING ONLY	
Vehicle Category	PRIVATE CAR	- West home . The west to AGE
Insurance Company		chazi fleresi.
Name of Insurance Company	AIG ASIA PACIFIC INSUR	
Type Of Coverage	COMPREHENSIVE	- stretch of earlier
Fleet Policy	NO	E TOURS BE EXPLICITED IN
Policy Number	2100374696	- was on hp, work/ex colleague
Cover Note Number		- suggested another place
Driver		all of know where
Name of Driver	CHRIS CHEE	Annual Control of the
NRIC No	S7474781G	for the did not westion that he
Date Of Birth	19/11/1974	reduit a riction.
Occupation	INDOOR -	- TP asked Sand don't pub.
Date Of Driving Pass	24/10/2015	in water with Imp.

2 YEARS AND 2 MONTHS

MALE

Mobile Number

(LOCAL) +65-91552710@

Fax Number

Contact Number

EMail Address

PNGTRADE2003@YAHOO.COM

Address

BLK 623 SENJA ROAD #04-106

Postcode

Was driver an employee of the Insured's Company

NO

- Jo Jeya. - Not providelly

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

FRIEND

670623

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident

COLLISION - CROSS JUNCTION

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?

YES

Was any injured conveyed to hospital by

ambulance?

NO

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

YES NO

2

Number of Passengers (Including Driver)

Passenger 1

Name:

: LIM XIN YING CLAIRE

Gender:

YES

: Female

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name

TRAFFIC POLICE DIVISION HQ

Police Station Address

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

YES

If Yes, against whom?

CHRIS CHEE

Circumstances of Accident

REFER TO ATTACHED STATEMENT RECORDED BY LILY - PROGRESSIVE AUTOMOTIVE PTE LTD 67415336

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SJS6113A

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

CHRIS CHEE

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SGD696M

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

DETAILS OF INJURED PERSON 2

Name

LIM XIN YING CLAIRE

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SGD696M

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wiful 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.
- Any false reporting may be referred to the Police for Investigation.
- 6. The report will be forwarded by the insurers of the GA Records Management Centre established by the General Insurence 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

funderstand, 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 yera/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;
- (ii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the maling of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of corrain 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 und/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 OW to their third party service providers or agents (including their law yers/law firms), which may be shed outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Dete & Driver's Signature (# Sriver is not the policyholder) / Date & Time Sketch Pfan

Ty Jan 2018

Personnel

A - SGD 696M B - SJS 6113 A

T LAK TOMETHING ON LIBOROLAND DAN TOO	101/ David
I WAS TRAVELLING ON WOODSLAND READ TURN	ANTINO HIGHT
TOWARDS SENDA WAY I WAS AT THE ILL THERE WAS A CAR COMING TOWARDS THE D	INC (IDIV)
ON THE OWIER (FAST) LANG.	MACLIEVA
on the profes (Hall) muse	
T THEIRIT & COLD LINE THE REST TO SEE	
I THOUGHT I COULD MAKE THE RIGHT TURN IN	TIME -
I DECIDED TO MAKE THE KIGHT TURN, WHEN	I WAS
MAKING THE KIGHT TURN, THE FRONT END OF	THE
I DECIDED TO MAKE THE RIGHT TURN. WHEN MAKING THE RIGHT TURN. THE FRONT END OF APPROACHING CAR COLLINED INTO THE LEFT SI	SE OF MY
VEHICLE	
claration	-
ELECTRIC CONTRACTOR CO	
s declars the loregoing particulars are true in every respect.	





Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

Details of Vehicle Involved

Туре

Car

Vehicle No.

SGD696M

Make

1 of 3 Report No. T/20180107/2044

Condition No of Passenger

Seriously

Damaged

07/01/20	e Report 18 13:32	Made:	Vide Report No.:				Station Diary No.:	
Informar	nt's Partic	:ulars					non-worm bright with I	
Name of Informant: CHRIS CHEE		APT	Address: APT BLK 623 SENJA RD #04-106 HDB-BT PANJANG SINGAPORE 670623					
ID Type / ID No.: NRIC NO / S7474781G		Conta	Contact No.:			ile: 91552710		
Nationali SINGAP	ty: ORE CITIZ	ZEN	Email					
Sex: Male	Age: 43	Date of Birth: 19/11/1974	Type of Informant: Driver					
Race: Chinese			Language: Instit			Institutio	ution / School Name:	
Occupation: Bank operations clerk			Driving Licence Information: Class: 3 Date			of Expiry:		
General I	nformatio	on of the Accident		V-12.5.3	3E 0 E SV00	9.000 Nov.		
Type of Accident		Injury Attended by Police	Drink Date/Time of		1	Type of Location		
	of Road 1 ANDS RO	and Road 2 AD						
Weather			Road Surface: Dry			Road Speed Limit:		
Traffic Flow:		Traffic	c Control:			Traffic Volume:		
Type of Collision:						1	Anyone conveyed by ambulance: No	

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

Model

Color





Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20180107/2044

CONTINUATION OF REPORT

Driver			CHASTA CHES	THE PARTY		Jac Na Element Con
Name	CHRIS CHEE		ID No.		S7474781G	
Related Vehicle	NIL		Conta	ct No.	91552710	
Hospital/Clinic	NIL		Class Drivin Licend Expiry	g ce &	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL Date D		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	finjury	NIL	

Brief Details.

07/01/2018 @0200 (WOODLANDS ROAD JUNCTION OF SENJA WAY)

I WAS TRAVELLING ON WOODLANDS ROAD TURNING RIGHT TOWARDS SENJA WAY. I WAS AT THE JUNCTION, THERE WAS A CAR COMING TOWARDS THE JUNCTION, I THOUGHT I COULD MAKE THE RIGHT TURN IN TIME. I DECIDED TO MAKE THE RIGHT TURN, WHEN I WAS MAKING THE RIGHT TURN WE COLLIDED WITH EACH OTHER. I INFORM MY PASSENGER, I NEEDED TO USE THE WASHROOM. AFTER INFORMING HER, I LEFT THE PLACE TO A NEARBY COFFEE SHOP TO USE THE WASHROOM BUT IT WAS CLOSE. SO I WENT BACK TO MY PLACE, IT WAS 2 BLOCKS AWAY. AFTER REACHING BACK HOME, I STARTED TO FEEL THE PAIN. SO I REST DUE TO THE ACCIDENT, I COULD BEARLY MOVE. IN THE MORNING, I WAITED FOR MY FRIEND TO PICK ME UP BEFORE GOING TO THE HOSPITAL (NUH). AFTER SEE THE DOCTOR, I CAME STRIAGHT TO THE TRAFFIC POLICE.

I WAS NOT THE OWNER OF THE VEHICLE, THE OWNER OF THE VEHICLE KNOW'S I WAS USING HIS CAR.

THAT'S ALL.





Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20180107/2044

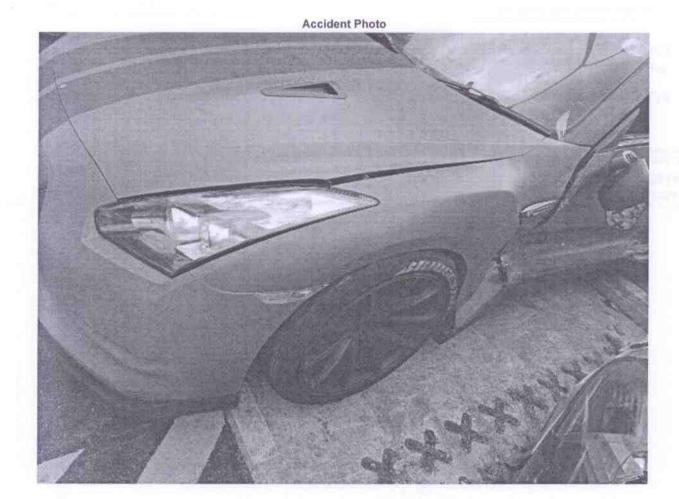
CONTINUATION OF REPORT

Sketch Plan

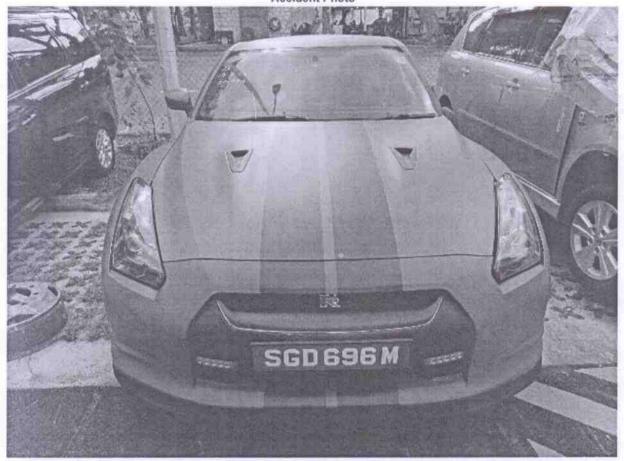
Informant is not able to provide sketch plan

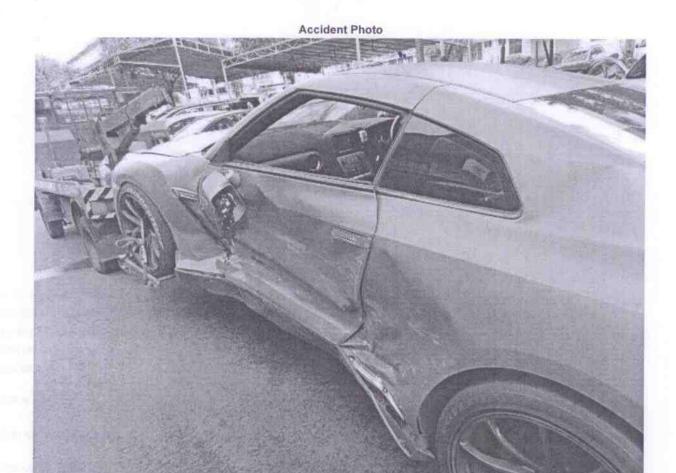
IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

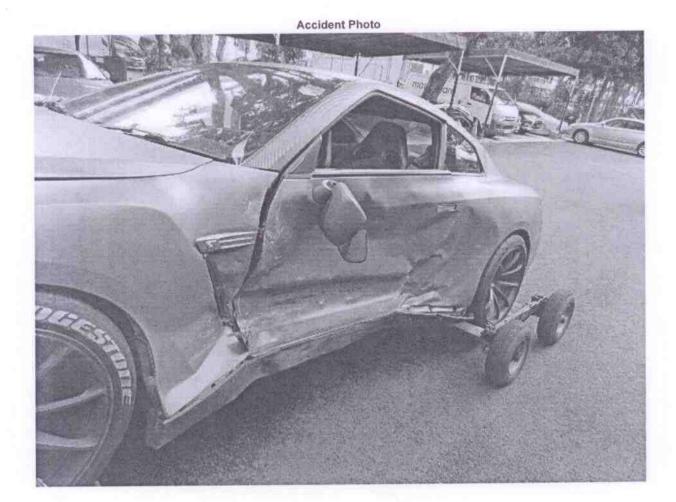
Signature Of Officer Recording The Report: TP / KEE CHUAN JIA MARCUS	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 07/01/2018 13:32
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt ONG YONG HOCK Contact No.: 65476436	Classification Of Case: SINGAPORE POLICE FORCE
Authentication Stamp NP168	Signature:











Accident Photo





CLAIM REF INSURED C0386078

: TAN WU CHEN

DISCHARGE VOUCHER

We, **Trans-Cab Auto Services Pte Ltd** confirm that by letter of authorisation dated <u>16.05.2017</u>, we are authorised to and do hereby give this discharge for ourselves and on behalf of <u>Trans-Cab Services Pte Ltd</u> and the Hirer, <u>Ee Boon Choy</u> of vehicle no. <u>SHB 7663K</u>.

Now we Trans-Cab Auto Services Pte Ltd for ourselves and the said Hirer and the driver jointly and severally:-

- a) agree to accept the sum of Singapore Dollars <u>TWO THOUSAND</u> only (<u>S\$2,000.00</u>) in the aggregate in full and final settlement of all claims of whatever kind including damages for personal injuries and/or damage to property that all and any of us may have against <u>AXA INSURANCE PTE LTD</u> and/or their Insured and/or the driver of vehicle no (<u>SKB 2489U</u>) arising out of an accident with (<u>SHB 7663K</u>) on 27.05.2016.
- b) declare that AXA INSURANCE PTE LTD and/or their Insured and/or the driver of the Insured vehicle shall not be liable for any further claim(s) whatsoever or howsoever present or future that any of us may have against AXA INSURANCE PTE LTD and/or their Insured and/or the driver of vehicle no. <u>SKB</u> <u>2489U</u> arising directly/indirectly as a consequence of the accident and hereby give our full and final discharge.
- c) We hereby declare that I/we am/are the person(s) entitled to receive the above settlement and hereby undertake to indemnify AXA INSURANCE PTE LTD against any claim made or to be made in respect of this settlement.



Accident Photo

Auro Consultants
Ple Ud

STATEMENT

PARTICULARS

iname	CHKU CHEE	
NRIC / Passport No.	: S7474781G	
Address	: BLK 623 SENTA ROA	D HOY-106 S(670623)
Telephone	: (R) - (C) (HP) 91552710)) ~
Sex / Age	: M/44	
Occupation / Name of Nationality		DWNER /
Recorded By : Mul Place Recorded: Lk Language Spoken:	K OFFICE	101/18 Time: 1600
Sunguage Spoken.	ENEULIH Interpreted	By:/A -
FACTS OF CASE:		
	hiver for vehicle number -	SGD 696M which was
	accident which occurred	
woodland Road	at 0200 hours. I had	
	he home at Rivervale	and proceeded to cheen
Chin Nam Road	for supper- While I was	
stomachace. On		
	inter. Then I told in	
to go to washing		The state of the s
-	hat we go back to Mi	
0 11 (11)	a Road. We drove glox	- 12 N
As I approach		
Saya Way 7	0 0 1 0 1 11	of Woodlands Road and me ba full!
Iwn as I thou	1-10	
510011 -22 - 100K		
Allot a wille	Ha boating (gistration mutal SJS 6113 A
side. The first	the approaching ca	hit my car on the left
191 CMI LOUR	2 4-4 0/40 4 3/ 14	100
was sitted beside	me she said she w	w ok. She was able
calo for Hill and	w con for the day sie	le. As I did not feel any
pain from the imp	lact at that point of tim	
Signed: Of & 6	Chy	Recorded by:
Can la		MUHD / WAZAL
C31 31, 20		
8747478	. G	

Consultants Ple Uci

STATEMENT

to we the Pistour. That was when I saw the Kopitian which was Near BIK 625 of Sung Road. So I left Claire thereal T pockedent locate & Kopition. I told har that I would to the be sack and asted her to want for the police to arrive. When I reached the Kopinian it was I headled have which was 2 blacks away. Charge sayfre of - About 20-30 mountes after the accident used the restoom at my have her saw a Message saying that police have arrived and the Investigating office (to) looking for Me. At that time I started feeling tremendous pain in was spated on the floor of my restroom, but couldn't reply back and was in a lot of pain. I called my girthread but she did no UP I HILLAK may have passed out from the muscle spasm. MOTO MY I WOLL UP 91 - too how still in my castopm. I could my girthed and she are over to my place to pick me up and take me to the hospital. So we take a cab to . National University Haspital and coached nut at about 0930 hows. We went to the A Et department. The doctor told me that impath of the crash and the rigidity of the seatbelt the muxile spasm. I had suffered abrasions and bonises I were caused and minor cuts as a result of the accident I was given 3 days of mc. So I left NUH at about 1300 hours and heat straight to the Traffic Police HQ at Ubi Ave 3 to make a police rapsoft. I got a call from the Io Jeya when I was got the hospital but I did not olik up. So Finale , police elfost ove the courter and confirmed with the courte office if the missel call I received belonged to the ID. He confirmed it and told me to again the Do after 1400 hours. I tried a flew their but the war asswer At about 1500 yours, another office informed me that Io Joya had already gore home and he advised me to go have . I called him 2 days later and he told me to forward him the hegital records. He already retrieved the SD can firm the car in vehicle covery and sow the video footage of the accident. I had intermed the owner of the car, Mr Haris of the accident. Ho told me on the 15th or 16th of January 2018 that I needed to ungle an insurance MOCH. TO Jaya called the on the Jaman and asked me do meething of TPHE got M30 hours. He told me that I would be Charged Wifes inconsiderate driving and for leaving the accident scene. 86 to Each offere carried a the of \$200 and I would be parts for maniferate diving. It asked me if I had Signed: Recorded by: MUHD NAZRIL 574747816

Auto Consultants Pla Ud

	STATEMENT	r /	
PARTICULARS			
Name			
NRIC / Passport No.	:		
Address	ddress :		
0.000			
Telephone	: (R)((HP)((R)	0)	
Sex / Age	(111)		
Occupation / Name of	Company		
Nationality			
	/.		
Recorded By	D. (1)		
Place Recorded:	Date :_	Time:	
Language Spoken:	Intomosto	I D	
	Interpreted	l By:	
and he said there He then gave me a Politice found at these after the and called works Ants of the answers back to loogressive USIS lows. I hist nowance report at	was no need as if was a silf was a silf which he told me 517 Arigan Road as a cident - I clacked the hops from Altr's list of 1. The call and a tow make the doctor to tocated at Ubiched a ride with the frogressive that some day	to bong to the Tracking the can had been impounded The ad about 1430 hours authorised workshops. Progressing was deployed to tow the can the tow track arrived by on track driver and made the at 1637 hours.	
strappre only or 3 passenges in the	Sthe February Tall Pl	welk of M and I was extended withers trip and ceturned to give told me that their were higher of the drive was day of the accident.	
igned: Ruf	n. Chen	Recorded by:	
57474	7816	MU 40 NAZEL	

J LZ JZ Auto Consultants Ple Vd

STATEMENT

I wish to close that I II I I I	
I wish to state that I did not take a	My altohol on the date and
time of accident as I hade a clight as it will after the lifter of an consuming. I have not this are	and I am
as it will offer the country	ultribe all I cannot take alroho
an convenience of land the	he higher medicine that I
an consuming. I have had this ear in	Atherian for the past 2 year
Thinks I can Dear Hall Man	
I wish to confirm that the above at the time it was writer.	statement is correct and tru
The Mes MULTIN.	
	. /
	/
. /	
gned:	
augher hie	Recorded by:
S7474781G	
, The state of the	MULTO NATZEIL
	THE INTERIO

Auto Consultants
Pla Uci

STATEMENT

PARTICULARS

Name : CHERRIN LOO CHING	YEE
NRIC/Passport No.: S7633340H Address: 35 Butter-worth CAN	E HOY-01 5/439443)
Telephone : (R) (C) (HP) 97477227))
Sex / Age Occupation / Name of Company Nationality (HP) 97477227 REGULESTOT STOPEAN	E / SAVILLS
Recorded By: Multiplace Recorded: FOODCOURT DESCREPTIONAL Language Spoken: ENGLICH Interpreted	1/2/18 Time: 1230 TOWER By: N/A
FACTS OF CASE:	
	I then got a 2nd call call. He told me that in alot of pain. I told place at 623 ang Ubor to his place. a key to his house. were he was He latcher to let floor. Mappined. The said he my to move. Dot took the bedroom where he while and I cleared him ted me to call an amy know to the National university
CM 333340 #	MILHO NAZRIC
410711	LKK ANTO CONSUCT

J II II Auto Consultants Ple Va

STATEMENT

He was pushed in via whe (char who Nwo is took his blood pressure. The was department which I was not allowed to 2 hours. He told me that X rays were pushed to the phomacy. I helpful him as	then pulped the another go W. I waited for about done. I saw him being
bushed to the phomocy. I helpful him go for the medication. I paid for the hailed a cab and went to the Traf	fix Police Ha.
and but if and told us to go home of the following the second of the sec	aff anhalor to see the told us that the IO was not - After that we took a his flace at about 1500 hours. accompanied him till the
cannot take his medication with all	diagnosed with hearing loss tating alcohol as he cohol. He has been having hat years the has been
I hereby within the above stationent at the time it was written.	t is correct and type
Signed: 57833340 H	Recorded by: MILHO NASELL LKK ANTO CONSULTANTS