

Our Job Ref No : 305142994
Date : 19. Apr. 2018

COMFORTDELGRO ENGINEERING

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508969
Fax: 6546 8156

FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

Vehicle Reg No. : SH 7091Z

Date of Accident: 16.04.2018

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: CHINA GZ2064H
2. The finalized amount shall be:
 - (a) Spare Parts after List discount \$2,043.36
 - (b) Labour Charges \$430.00
 - Total for Part-By-Part Repair Cost \$2,473.36
 - (c) Lumpsum Repair (if applicable)
Total for Lumpsum repair cost after Less: _____
Final Lumpsum Repair cost _____

3. Estimated normal period for repairs: 2 working days.

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 

Name : Larry Ng

Tel : 6214 8316

Fax : 6546 8156

Signature : 

Name : Kalvin

Date : 19/4/18

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid				
3. Survey Fees				
4. LTA Search Fee				
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

COMFORTDELGRO ENGINEERING PTE LTD
REPAIR ESTIMATE

Date: 19.04.2018
Time: 08:24:19
Page: 1

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010045
ADDRESS : COMFORT TRANSPORTATION PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65508755

JOB NO : 305142994
REGN NO : SH 7091Z
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 14.04.2016
DATE/TIME IN : 16.04.2018 16:00
ACCIDENT DATE : 16.04.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-2322-A I40V3 BUMPER REAR 1 1,052.20 20.00 841.76
0002 04-01-0103-2164-G I40V3 GRILLE ASSY-RADIATO 1 1,480.00 20.00 1,184.00
0003 04-01-0101-0111-G HYUNDAI BUMPER COVER CLIP 10 L 22.00 20.00 17.60

SUB-TOTAL : 2,043.36

JOB NATURE

0000 L PANEL BEATING 200.00
0001 23-502 SPRAYPAINT ON AFFECTED AREA 180.00
0002 23-01 TOWING FEE 50.00

SUB-TOTAL : 430.00

TOTAL : 2,473.36

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :

China

POA: 16.04.18

Date: 17.04.2018

MODEL : i40

Kalvin CLKW
17/4/8 1505hrs
2 Days
PIP
Estimate Total photo

LKK Auto Consultants hence notify the Repairer of the following:

- Acknowledged by Repairer
Signature: _____
Date: _____

COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE*

VEHICLE NO : SH 7091Z

MAKE : HYUNDAI

MODEL : i40

CHINA

Date: 16.04.18

Date: 17.04.2018

Qty	Parts Description / Labour	Type	Unit Price	Amount
	Front Bumper /			\$ 1,052.20
	Front Bumper Clips \$2.20 X 10pcs /			\$ 22.00
	Front Bumper Sponge ?			\$ 142.20
	Front Bumper Reinforcement ?			\$ 526.10
	Radiator Grille /			\$ 1,480.00
	Headlamp Support Panel ?			\$ 1,067.50
	A/C Condenser ?			\$ 1,137.35
	SUB TOTAL			\$ 5,427.35
	LESS 20%			1,085.47
	DISCOUNTED TOTAL			\$ 4,341.88
				\$ 0.00
	Labour Charge			200
	Panel Beating			\$ 300.00
	Spray Painting Charge			\$ 200.00 150
	Wiring Charge			\$ 50.00 x
	Remove/refill A/C and Refill gas			\$ 150.00 x
	Towing Fee			\$ 60.00 50
	TOTAL LABOUR			\$ 700.00
	ESTIMATE TOTAL			\$ 5,041.88

Kohli/C/K

17/4/18 1505hrs

2 Day

PIP

Before Paint photo

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To resurvey damaged part(s) during resurvey
- To resurvey damaged part(s) during resurvey
- Third party survey is not allowed
- 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:

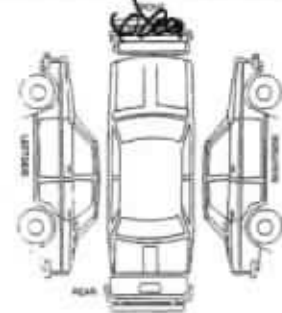
Date:

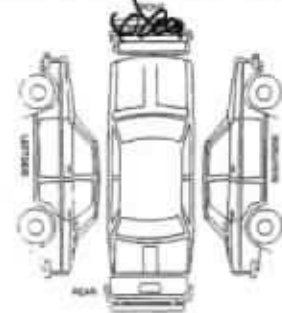
JOB REQUISITION FOR BREAKDOWN / TOWING SERVICE

Job Requisition

1. Date: <u>16/4/18</u> Time Received: <u>16:15pm</u>		3. Vehicle Type: <input type="checkbox"/> Private <input checked="" type="checkbox"/> Taxi (CTPL/CCPL) <input type="checkbox"/> Fleet <input type="checkbox"/> STK (Boon Lay)	4. Type of Towing: <input checked="" type="checkbox"/> Normal Tow <input type="checkbox"/> King Dolly <input type="checkbox"/> Flat Bed <input type="checkbox"/> Crane-up
2. <input type="checkbox"/> New <input type="checkbox"/> SPARK Kakis Name of Customer : <u>OMAR B ABDEL GAFER</u> Contact No. : <u>96419672</u> Vehicle No. : <u>ST 70912</u> Make / Model / Colour : <u>140</u> Email :		5. Nature of Service: <input type="checkbox"/> Jumpstart <input type="checkbox"/> Recovery <input type="checkbox"/> Change Tyre / Battery	6. Parts Replaced/Remarks:

7. Location: <u>53 CHANCERY LANE</u>	8. Vehicle Tow - In Workshop: <input type="checkbox"/> Smoky Exhaust <input type="checkbox"/> Wheel Jammed <input type="checkbox"/> Overheating <input type="checkbox"/> Steering Faulty <input type="checkbox"/> Brake Faulty <input type="checkbox"/> Alternator Faulty <input type="checkbox"/> Starting Problem <input type="checkbox"/> Loss Power <input checked="" type="checkbox"/> Accident <input type="checkbox"/> Engine Stalled <input type="checkbox"/> Return Taxi
9. Preferred Workshop: <input type="checkbox"/> Braddell <input checked="" type="checkbox"/> Loyang <input type="checkbox"/> Pandan <input type="checkbox"/> Sin Ming <input type="checkbox"/> Sungei Kadut <input type="checkbox"/> Ubi <input type="checkbox"/> Senoko <input type="checkbox"/> Komoco (UBI / Leng Kee) <input type="checkbox"/> Cycle & Carriage (PD) <input type="checkbox"/> Others: _____	

10. Odometer Reading : _____ Fuel Level : <input type="checkbox"/> F <input type="checkbox"/> 1/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> E	11. Radio / CD Player <input checked="" type="checkbox"/> OK <input type="checkbox"/> Faulty <input type="checkbox"/> Not tested	 # : Cracked X : Dented / : Scatched O : Missing Signature of Customer: <u>[Signature]</u>
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12. Tow Truck / Recovery Van : <input type="checkbox"/> VRS <input type="checkbox"/> QA <input checked="" type="checkbox"/> GAO <input type="checkbox"/> TZ <input type="checkbox"/> YISHUN <input type="checkbox"/> OTHERS Name of Driver : <u>SIMON</u> Vehicle No. : <u>YMP1483</u> Time Dispatch : <u>16:15pm</u> Time of Arrival : <u>16:25pm</u> Time Completed : <u>17:45pm</u>		 # : Cracked X : Dented / : Scatched O : Missing Signature of Customer: <u>[Signature]</u>
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Cash Invoice Details (if applicable)

13. Cash Invoice No. :

Customer Acknowledgement

- a. I have been advised to remove all valuable items in my vehicle, including Global Positioning System (GPS), audio compact disk, thumbdrive, carpark coupons, cash cards, spectacles, pen, etc.
- b. I understand that any items left behind are at my own risk and SPARK Car Care™ will not be held liable for such losses.
- c. Surcharge: Towing fee will be levied if the customer decides neither to tow nor proceed with the repairs in SPARK Car Care™.

<u>16/4/18</u> Date	<u>16:25pm</u> Time	<u>[Signature]</u> Signature of Customer
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14. WORKSHOP

Name of Attending Staff/Guard	Date & Time of Arrival	Signature of Attending Staff/Guard
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COMFORTDELGRO ENGINEERING

Our Ref : T 0418 / SH 7091Z /WT(st)

Your Ref :

Date : 24-Apr-18

CDGE Taxi Claims Dept
59 Loyang Drive 4th Flr
Singapore 508969

ComfortDelGro Engineering Pte Ltd
205 Braddell Road Singapore 579701

Mainline +65 6383 8280
Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 199006049W

CHINA INSURANCE CO LTD
3 ANSON ROAD
#16-00 SPRINGLEAF TOWER
SINGAPORE 079909

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

ACCIDENT INVOLVING OUR TAXI SH 7091Z YOUR INSURED GZ 2064H
AND OTHER ON 16.04.18

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : **SH 7091Z** which was involved in the captioned accident with your insured vehicle. The vehicle owner and the taxi driver concerned have requested and authorized us to assist them in presenting their claims against the party responsible for all applicable matters arising from the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving **GZ 2064H** we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 2,646.50
2	3 days Loss of Rental @ \$ 115.00 per day	\$ 345.00
3	Survey Report Fees (Surveyed by M/s LKK)	\$ -
4	LTA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing / Medical / Transportation Fees	\$ -
Sub Total :		\$ 2,998.99

HIRER'S CLAIM

7	3 days Loss of Income @ \$ 80.00 per days	\$ 240.00
Total Claims :		\$ 3,238.99

We enclose herewith the following documents to support the claims: -

- a) Original repair bill and photocopies of photographs : 9 pcs.
- b) LTA search slip/s of : GZ 2064H
- c) GIA / Police report/s of : SH 7091Z
- d) Letter of authority from owner / hirer / operator
 - () Traffic Compound () Towing/Medical bill/receipts () Certificate of Insurance
 - (X) Photograph/s of Accident Scen (x) Downtime/Mileage record (x) Rental Rate letter

Kindly look into the matter and let us hear from you on the settlement of the said claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the taxi driver.

Yours faithfully
William Tan

Deputy Manager
CDGE Claims Department

Tel: 6214 8737 Fax: 6214 1843 Email : williamtan@cdge.com.sg

This is a computer generated letter. No signature is required.

A member of

COMFORTDELGRO





Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 67414108

Our Ref: CC3/CTI18007214/Klja3

3rd May 2018

SD SOLUTIONS PTE LTD

3 Ang Mo Kio Street 62
#03-02 Link@AMK
Singapore 569139

Attn: Ms Cindy (HR Department)

Dear Sir/Madam,

**ROAD TRAFFIC ACCIDENT INVOLVING GZ 2064H AND SH 7091Z ALONG
CHANCERY LANE ON 16.04.2018**

We refer to the above accident where we are acting for China Taiping Insurance (Singapore) Pte Ltd to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please call us if you have further queries.

Yours faithfully,

Chong Poh Kin
Case Handler
DID: 6841 2132
FAX: 6741 4108
Email: vicalpeh@lkkauto.com

c.c. *China Taiping Insurance (Singapore) Pte Ltd
(Motor Claims Dept)*

LETTER OF AUTHORISATION

(NAF / PAF)

ACCIDENT INVOLVING
ALONGI 40 SH7091Z , GZ2064H
CHANCERY LANE TWDS THOMSOM

ON 16-Apr-18 16:00

I / We

OMAR B ABDUL GAFOR

(Hirer) NRIC No.:

S1190563C

and/or

(Relief) NRIC No.:

Taxi Number

SH7091Z

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

1. To submit my/our claims for damages, costs and expense, including loss of income, loss of rental, medical fee and legal costs.
2. To have absolute discretion to agree to any settlement or compensation amount in respect of my/our claim against third party (except personal injuries and medical claims).
3. To sign Discharge Voucher on my/our behalf.
4. To accept any payment (claim proceeds) in respect of the claim against third party and payment by cheque shall be forward directly to CDGE in accordance with CDGE's instruction and made in favour of "ComfortDelGro Engineering Pte Ltd".

Date

17-Apr-2018

Name of Hirer

OMAR B ABDUL GAFOR

Hirer NRIC

S1190563C

Signature :



Address

171 HOUGANG AVENUE 1 #06-1477
530171

Contact No.

96419672

MOTOR CLAIMS DISCHARGE VOUCHER

Policy No : DMCVSN1700591801 Claim No : SNM18D01989C02
Claimant : COMFORT TRANSPORTATION PTE LTD

Amount : S\$3,000.00
SINGAPORE DOLLARS THREE THOUSAND ONLY.

I/We agree to accept the above mentioned amount to be paid to me/us in full & final settlement of all claims, costs & disbursements for injuries / damages sustained by me/us through an accident involving

Claimant Vehicle No. : SH 70912
Insured Vehicle No. : GZ 2064H
Date of Loss : 16/04/2018
Place of Accident : CHANCERY LANE

IN CONSIDERATION of the payment made to me/us of the aforementioned sum by CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD., I/We agree absolutely to discharge CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. and/or

Insured Name : SD SOLUTIONS PTE LTD
Driver Name : TEO TIEN HOCK

from all claims, present or future in respect of all loss, injury or damage sustained by me/us arising out of the said accident.

I acknowledge that this payment is made without admission of liability on the part of CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

(1) Global Sum	S\$ 3,000.00
<hr/>	
TOTAL	S\$ 3,000.00
<hr/>	

CLAIMS DEPARTMENT
COMFORTDELGRO ENGINEERING PTE LTD
59 LOYANG DRIVE
SINGAPORE 639494
Claimant Name : _____ NRIC No : _____

Signature :  Date : 14.5.18

The contents of this document apply to vehicle damages only.
All personal injuries and damages arising therefrom are excluded
from the ambit and application of this document.

Please forward your cheque made payable to:
COMFORTDELGRO ENGINEERING PTE LTD

TAX INVOICE

COMPANY REG. NO.: 199506048W

Page: 1

8010012

CHINA TAIPING INSURANCE CO(S) PTE L
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
SH 7091Z

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
14.04.2016

CHASSIS CODE
KMHLB41UMGU087060

INV. NO/DATE
91368451 19.04.2018

JOB NO.
305142994

ODOMETER READING

DATE/TIME IN
16.04.2018 16:00

Description : 3P 16.04.2018

S/No Part No.

Qty Unit Price %Disc Net

PART REQUISITION

0001	04-01-0103-2322	I40V3 BUMPER W LIP & FOG	1	1,052.20	20.00	841.76
0002	04-01-0103-2164	I40V3 GRILLE ASSY-RADIATO	1	1,480.00	20.00	1,184.00
0003	04-01-0101-0111	HYUNDAI BUMPER COVER CLIP	10	2.20	20.00	17.60
SUB-TOTAL			:			2,043.36

JOB NATURE

0001	L	PANEL BEATING	200.00	200.00
0002	23-502	SPRAYPAINT ON AFFECTED AREA	180.00	180.00
0003	23-01	TOWING FEE	50.00	50.00
SUB-TOTAL			:	430.00

ComfortDelGro Engineering Pte Ltd
Member of COMFORTDELGRO

Head Office:
205 Braddell Road
Singapore 579701

Please note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010012	91368451	2,646.50	

TAX INVOICE

COMPANY REG. NO.: 199506048K
Page: 2

8010012

CHINA TAIPING INSURANCE CO(S) PTE L
SPRINGLEAF TOWER

3 ANSON ROAD #16-00
SINGAPORE SG 079909

CONTACT NO: 62222366

VEHICLE NO
SH 7091Z

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
14.04.2016

CHASSIS CODE
KMHLE41UMGU087060

INV. NO/DATE
91368451 19.04.2018

JOB NO
305142994

ODOMETER READING

DATE/TIME IN
16.04.2018 16:00

Items total		2,473.36
Add GST @	7.000 %	173.14
Invoice amount		2,646.50

Issued by : CHEWHEELING 19.04.2018 13:41:43
Repair type : CLS0/57/57
Payment type/Term: /Credit 30 days

ComfortDelGro Engineering Pte Ltd
Member of COMFORTDELGRO

Office:
3 Braddell Road
Singapore 579701

Note that no receipt shall be issued unless requested.

TOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHO No.
8010012	91368451	2,646.50	

Our Ref: CT18040443

Date: 19 April 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 16/04/2018 @ 16:00 hrs
ALONG CHANCERY LANE TWDS THOMSOM
INVOLVING GZ2064H

We refer to the above-mentioned accident and wish to inform that **Comfort Transportation Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SH7091Z** (the "Taxi"). The Taxi was hired to **OMAR B ABDUL GAFOR IC NO S1190563C** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$115.00** per day (inclusive of GST).

Please be advised that the Taxi was insured with **India International Insurance Pte Ltd** on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay
Assistant Manager, Fleet Safety

This is a computer generated letter. No signature is required.

[illegible]

Enquire Vehicle Insurer

Vehicle No. Incident Date/Time Search Status Insurance Company Code Insurance Company Name

GZ2064H 16 Apr 2018 / 16:00:00 Successful C01 CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

[Previous](#)[OK](#)

SH 70912



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

CHINA TAIPING INSURANCE (S) PTE LTD

Ref : CC3/CTI18007214/K1ja3q2

3 ANSON ROAD #16-00
SPRINGLEAF TOWERS SINGAPORE 079909

Date : 17-05-2018



Code : CTI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GZ 2064H	Veh. Inspected	SH 7091Z
Policy No.	DMCVSN1700591801	Coverage (\$)	0.00
Claim No.	SNM18D01989C02	Excess (\$)	0.00
Assign From		Assign Date	17/04/2018

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2016
Chassis No.	KMHLB41UMGU087060	Colour	BLUE
Odometer	211954	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60 R16	HANKOOK	7 mm
L/H Front Tyre	205/60 R16	HANKOOK	7 mm
R/H Rear Tyre	205/60 R16	HANKOOK	7 mm
L/H Rear Tyre	205/60 R16	HANKOOK	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE FRONT PORTION.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	16/04/2018	Inspection Date	17/04/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

5a. Remarks

A) THE INSPECTION WAS CONDUCTED ON A "WITHOUT PREJUDICE" BASIS.
B) IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
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**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

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SH 7091Z

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	FRONT BUMPER	CRACKED	1,052.20	1,052.20
10	FRONT BUMPER CLIPS @\$2.20	NECESSARY	22.00	22.00
1	FRONT BUMPER SPONGE	SERVICEABLE	142.20	-
1	FRONT BUMPER REINFORCEMENT	SERVICEABLE	526.10	-
1	RADIO/OTR GRILLE	CRACKED	1,480.00	1,480.00
1	HEADLAMP SUPPORT PANEL	SERVICEABLE	1,067.50	-
1	A/C CONDENSER	SERVICEABLE	1,137.35	-
	LESS 20% DISCOUNT		-1,085.47	-510.84
			4,341.88	2,043.36
<u>LABOUR</u>				
	PANEL BEATING		300.00	200.00
	SPRAY PAINTING CHARGE		200.00	180.00
	WIRING CHARGE	NOT NECESSARY	50.00	-
	REMOVE/REFIX A/C AND REFILL GAS.	NOT NECESSARY	150.00	-
	TOWING FEE		60.00	50.00
			760.00	430.00
GRAND TOTAL			5,101.88	2,473.36
RECOMMENDED COST OF REPAIRS				2,473.36

Report Ref No. CC3/CT118007214/K1ja3q2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

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