	tre Services :	met : Jan 15:51 16/	669 600 9816	5	
Date in 10 07/2018 10,58	Jeb description		ute &Tune Completed	Done	př.
REFNONBALAIGUEON 249814	SAS e-filing				
Veh No SJC 694M	E-mail (within 8	irs, AIC 2hts;	2.8		
DOA 07/07/2018 19:50	i-Motor Clain	n Form	-031		
	i-Motor W/O	(Within: OD Thes. TP	4hrs)		
OD CY Reporting Only	i-Photo Uploa				
TP Insurer	Assessment/Sur	vey Report			
i i insurer	Ass't Report by	Ass't Report by Fax / Hand to Owner/Wksp			
Preferred Wksp / INC Assign Wksp / QW: (		T	el:	Fax:	
TP Particulars: Veh No: S	LC 766R	INC(	/Non-INC()	-	i.e.
Owner / Driver: (		(0)	Γel:	)	
Policy No. ( )	Period: (	) C	over Type: (		20061
Confirmed by : (		Date:	Time:	)	
Insured/Driver Liability: ( %)	Note-Est. Status (W	O): N: 0-20%;	P: 21-79%. F: 80	-100%)	
Year of Registration: ( )	Warranty: YES (	)/NO( )			
Excess: (\$ ) Loading: \$	1,000 ( )/\$2,000 (	( )			
General Remarks:-	To Albanders		Mary market and the	1 (4.1)	4
( ) Walk-In Customer: Customer's in	nformation strictly Con	fidential & Strictl	y NO rafer of repaire	r,	
( ) Total Loss Case : to e-mail Ins	arer URGENTLY.	17			
Drive-In ( ) / Towed-In ( ); Invo	ice: YES ( ) / N	O( ); Tow	ng Co: (		)
Apply for Transport Allowance ( )     QC Check / Post Repair Inspection     Upload Resurvey Photo [Repair Cost >	/ Courtesy Car ( )				
Washington and the second of t					
Injury:	Water and the second second	The equation varieties		W. 282 194 1 1 1 1 1	
Injury:					
Injury:				Transport Control	
Injury:					
Injury:				The layer of the second	
Injury:					
Injury:		Invoice Prens	ation Checklist	Anit (S)	
Date/Time Actions  NAI804364		20 S Assort Chromos losts	ation Checklist	Anit (S)	
Date/Time Actions  NAI804364		1) AR : Accident Rep 2) DA : Damage Ass	orting (530); essment (\$100); INC	(\$80)	
Date/Time Actions  NAISOY364  Claimant's Particulars:		1) AR : Accident Rep	porting (\$30); essment (\$100); INC	let Bill	
Date/Time Actions  NAISOV364  Claimant's Particulars:-		1) AR: Accident Rep 2) DA: Damage Ass 3) TF: Towing Fee 4) FT: Follow-Throu 5) FT: Follow-Throu	porting (\$30); essment (\$100); INC gh Survey gh Survey (Resurvey)	(\$80) (\$40/\$45 \$120 \$30	
Date/Time Actions  NA/8-04364  Claimant's Particulars:-  Priver/Owner:		1) AR: Accident Rep 2) DA: Damage Ass 3) TF: Towing Fee 4) FT: Follow-Through For claiming again 6) TR: Re-inspection	orting (\$30); essment (\$100); INC igh Survey igh Survey (Resurvey) ut INC Only (wef 10 Jan 2	(\$80) (\$80) \$40/\$43 \$120 \$30 (003) \$75	
Date/Time Actions  NA/8-04364  Claimant's Particulars:-  Oriver/Owner:		1) AR: Accident Rep 2) DA: Damage Ass 3) TF: Towing Fee 4) FT: Follow-Through For claiming again 6) TR: Re-inspection 7) N1: Idae DA + Si	restring (\$30); essment (\$100); INC  egh Survey egh Survey (Resurvey) at INC Only (wef 10 Jan 2);  MRT Survey	(\$80) \$40/\$45 \$120 \$30 (005)	
Date/Time Actions  NA/80/364  Plaimant's Particulars:-  Priver/Owner: Contact No: Camaged Portion:		1) AR: Accident Rep 2) DA: Damage Ass 3) TF: Towing Fee 4) FT: Follow-Through For claiming again 6) TR: Re-inspection 7) N1: Idae DA + St 8) NTUC Additional	orting (\$30); essment (\$100); INC  igh Survey igh Survey (Resurvey) at INC Only (wef 10 Jan 2)  MRT Survey Services:-	(\$80) \$40/\$45 \$120 \$30 005) \$75 \$160	
Date/Time Actions  NA/80/364  Plaimant's Particulars:-  Priver/Owner: Contact No: Camaged Portion:		1) AR: Accident Rep 2) DA: Damage Ass 3) TF: Towing Fee 4) FT: Follow-Through For claiming again 6) TR: Re-inspection 7) N1: Idae DA + Si 8) NTUC Additional ODI*  *N5: Courtesy Ca  *N6: Repair Co-o	rorting (\$30); essment (\$100); INC  igh Survey igh Survey (Resurvey) at INC Only (wef 10 Jan 2)  MRT Survey Services:-	(\$80) (\$80) \$40/\$43 \$120 \$30 (003) \$75	
Date/Time Actions  NA/80/364  Claimant's Particulars:-  Oriver/Owner:  Contact No:  Damaged Portion:  OC Checked by (Engr-In-Charge):		1) AR: Accident Rep 2) DA: Damage Ass 3) TF: Towing Fee 4) FT: Follow-Throut 5) FT: Follow-Throut For claiming again 6) TR: Re-inspection 7) N1: Idae DA + Si 8) NTUC Additional OII*  *N5: Courtesy Ca *N6: Repair Co-o *N7: Fost Repair	ssment (\$100); INC  gh Survey gh Survey (Resurvey) at INC Only (wef 10 Jan 2)  MRT Survey Services:-  / Tpt Allowance dination aspection	(\$80) \$40/\$45 \$120 \$30 (005) \$75 \$160 \$5 \$50 \$50	
Date/Fime Actions  NA/804364  Claimant's Particulars:-  Oriver/Owner:  Contact No:  Damaged Portion:  OC Checked by (Engr-In-Charge):  Auditors! Comments :-		1) AR: Accident Rep 2) DA: Damage Ass 3) TF: Towing Fee 4) FT: Follow-Throu 5) FT: Follow-Throu For claiming again 6) TR: Re-inspection 7) N1: Idae DA + Si 8) NTUC Additional OII.*  *N5: Courtesy Ca *N6: Repair Co-o *N7: Post Repair *N8: DV / Collect	rorting (\$30); essment (\$100); INC  igh Survey igh Survey (Resurvey) at INC Only (wef 10 Jan 2)  MRT Survey Services:-	(\$80) \$40/\$45 \$120 \$30 005) \$75 \$160	Amt (\$)
Date/Time Actions  NA/804364  Claimant's Particulars:- Driver/Owner: Contact No: Damaged Portion:  OC Checked by (Engr-In-Charge):		1) AR: Accident Rep 2) DA: Damage Ass 3) TF: Towing Fee 4) FT: Follow-Throu 5) FT: Follow-Throu For claiming again 6) TR: Re-inspection 7) N1: Idae DA + Si 8) NTUC Additional OII.*  *N5: Courtesy Ca *N6: Repair Co-o *N7: Post Repair *N8: DV / Collect	ssment (\$100); INC  gh Survey gh Survey (Resurvey) at INC Only (wef 10 Jan 2)  dRT Survey Services:-  / Tpt Allowance diantion inspection Excess Coordination	(\$80) \$40/\$45 \$120 \$30 005) \$75 \$160 \$25 \$30 \$25 \$30 \$30 \$30 \$30 \$30 \$30 \$30 \$30	

### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

- 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.

600000091	
<b>以上的产品的基础的</b>	ACCIDENT STATEMENT
Date Of Report	10/07/2018 10:58
Date Of Accident	07/07/2018 19:50
Exact Location Of Accident	JUNCTION OF HOUGANG AVENUE 3/TAMPINES ROAD
Country/State of Loss	SINGAPORE
DO THE RESIDENCE OF THE PARTY O	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SJC694M
Insured/Policyholder	
Name Of Registered Owner	TAN CHAT PING
NRIC No	S1600214C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97976597
Alternative Phone No	OTHERS-97976597
Vehicle Particulars	
Manufacturer	HONDA
Model	STREAM-1.8 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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 CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE, LTD,
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100062475-10
Cover Note Number	
Driver	
Name of Driver	TAN CHAT PING
NRIC No	S1600214C
Date Of Birth	22/11/1963
Occupation	INDOOR
Date Of Driving Pass	31/08/1982
Driving Experience	35 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97976597
Fax Number	
Contact Number	OTHERS-97976597
EMail Address	NOEMAIL
	MACONO CULTA PARTE DE LA CONTRACTOR DE L

Address

BLK 117A RIVERVALE DRIVE

#06-86

Postcode

541117

OWNER

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

140

Vehicle Registration Number of Driver's Own

Vehicle

\*

Insurance Company of Driver's Own Vehicle

-

madratice company of briver's own vertice

.

General Information of the Accident

Type Of Accident

COLLISION - HEAD TO REAR

Weather Conditions

RAINING

Road Surface

WET

Other Information

Was any foreign vehicle involved in this accident?

NO

Number of vehicles involved in the accident

3

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)

NO

soliciting/offering accident claims assistance.

3

Number of Passengers (Including Driver)

: WIFE

Passenger 1

NAME:

AAILE

GENDER:

: FEMALE

Passenger 2

NAME:

: DAUGHTER

GENDER:

: FEMALE

**Details of Police Action** 

Was the accident reported to the police?

NO

If Yes, Please state which Police Station Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

YES NO

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number

SLC776R

Vehicle Make/Model/Colour

AUDI

**Details Of Properties** 

PRIVATE CAR

Vehicle Category

Name of Driver

AMINORASHID BIN MOHD KARDANY

NRIC/Passport Number

S7217846G

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SHC7652L

HYUNDAI NF SONATA 2.0 CRDI F/L

TAXI

LIM TECK SENG

S1539268A

### 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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 lodgment 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' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - 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' 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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Rersonnel's Signature

Name:

NRIC/FIN No.

	2	(A)	SJC 694m			
SEKETCH PLAN	5	1 0	SCC 766R			
	James 1					
	10	6	) SHC 7652 L Hougang	ALR 3		
	3 - '		<del>-</del>			_
I	<del>,</del> — †	-		-		
$=$ $ \Rightarrow$		->				
	-12-	314	0			75 -
	- =	=	1			₹ -
	7 1	1			+	
	1 12	<b>-</b>	5			
	000					
	70	/				
DESCRIBE CIRCUMSTANCE	S OF THE ACCIDENT					
on 07/07/18 @ abou	u+ ISOPHO 10	m ten	rellina along	Hougan	a Ave 3	I wish
to turn jed into p	anding CRd	my law	Che and st	vaight a	nd tur	Right.
I Stopped u+ tw	a the face la	املان لم	tion of it is	i her I	laut. W	e are all
I STOLLED WY TO	Diag Com	4- 6	e ant i ache	s + 4	tio biob	+ AP face
waiting for the	ut t t	000	amin), I f	Dif an	in Part	on my
	10 MVP	- urean			The second secon	The second secon
Luc whom is a	0, 1 400 50	Ma I	Saw floor 4	hove is	anath	Da 101 1010
Har Portion, Wh	uln 1 got son	Mr.	sau that t	were is	anoth	or reliable
Ctaxil was bein	uln 1 got 600 a damayed fo	M, I	sauthat t	here is	ne th	or reside
Ctaxil was being wants to change	a damageo f	m, 1 b. the	Sauthat to die faxi hittel	here is	ne th	or reside
Ctaxil was being wants to change	uln 1 got 600 a damayed fo	m, 1 b. the	Sauthat to die faxi hittel	here is	ne th	or reside
Ctaxil was being wants to change	a damageo f	m, 1 b. the	Sauthat to die faxi hittel	here is	ne th	or reside
Ctaxil was being wants to change	a damageo f	m, 1 b. the	Sauthat to die faxi hittel	here is	ne th	or reside
Ctaxil was being wants to change	a damageo f	m, 1 b. the	Sauthat to die faxi hittel	here is	ne th	or reside
Ctaxil was being wants to change	a damageo f	m, 1 b. the	Sauthat to die faxi hittel	here is	ne th	or reside
Ctaxil was being wants to change	a damageo f	m, 1 b. the	Sauthat to die faxi hittel	here is	ne th	or reside
Ctaxil was being wants to change	a damageo f	m, 1 b. the	Sauthat to die faxi hittel	here is	ne th	or reside
Ctaxil was being wants to change	a damageo f	m, 1 b. the	Sauthat to die faxi hittel	here is	ne th	or reside
Ctaxil was being wants to change	a damageo f	m, 1 b. the	Sauthat to die faxi hittel	here is	ne th	or reside
Ctaxil was being wants to change	a damageo f	m, 1 b. the	Sauthat to die faxi hittel	here is	ne th	or reside
Ctaxil was being wants to change	a damageo f	m, 1 b. the	Sauthat to die faxi hittel	here is	ne th	or reside
Ctaxil was being wants to change	a damageo f	m, 1 b. the	Sauthat to die faxi hittel	here is	ne th	or reside
Ctaxil was being wants to change	a damageo f	m, 1 b. the	Sauthat to die faxi hittel	here is	ne th	or reside

Policyholder's Signature Date & Timer Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Cenzfe Legonnel's Six Jature
Name:
NRIC/FIN No XOF JUNNING

Date of Accident	: 07/07/18 Accident Time: 7.50 PM (24-HR-FORMAT)
Accident Place	: Hougang Aver3 and Tampines Rd.
Vehicle Reg. No (Car plate No.)	: STC 694 M
Vehicle Make/Model	Honda Stream 1.8
	The state of the s
Insurance Company	
Owner or Company Names /IC No	0: Tan Chat Pang /516002140
Owner or Company Contact No.	: 9797 6597 Owner's HPCompany Tel
DRIVER'S Name & IC no.	: Tan chaf rung /S16002/4C
DRIVER'S Date of Birth	: 11/11 / 1963 DRIVER'S License Pass Date 31/08/1982
Relationship bet. Owner & Driver	: Spouse \ Parents \Children\ Sibling \ Employee\ Others: _04116_
DRIVER'S Address	: BIK 117A Rivervale prive #06-86 (5) 5/117
DRIVER'S Contact No./ Alt No.	:1) 9797 6597 2)
DRIVER'S Occupation	: INDOOR QUTDOOR (eg. working inside or outside of an ofc) in spector
Email Address	<u>:</u>
Weather & Road Surface	: CLEAR & DRY (RAINING & WET) AFTER RAIN & WET
Reporting Type	: Reporting Only Claim Other Party \ Claim Own Ins
Number of Passengers (including	Driver): 3 WIFE & DOUGHTAIR
Was there any video Captured by Exact purpose for which vehicle was	car camera: YES \NO being used at the time of accident: Private use \ Work purpose
(A) Oth	ner Party Driver's Particulars (if any)
Vehicle Reg No: SLC 766R	Vehicle Reg No:SHC 76 St L-
Vehicle Make\Model: Au \(	Vehicle Make Model: Hyunbal Sonata Tax;
Name DRIVER: Aminorashib	Bla mohd kardany Name DRIVER: Lim Teck seng
IC No. DRIVER: 572178466	IC NO. DRIVER: 5/53 9168 A
DRIVER'S Contact & add:	DRIVER'S Contact & add:



# REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1600214C





TAN CHAT PANG

陈澤邦

CHINESE 140-31 (47) 22-11-1963

where or best

SINGAPORE

### YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

PASS DATE

Class 3

NP 428A

Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms-

31 Aug 1/62

Licence No: S1600214C



S1600214C

2757225

15-12-130

NRICMO: S1600214C Dute: 26/04/1990 Nove 27-17-21-1 APT BIK 117A RIVER VALE Drive #06-86 Singapore 541117.



# CERTIFICATE OF INSURANCE

### AUTOPLAN PRIVATE VEHICLE

Name of Policyholder

: Tan Chat Pang

Period of Insurance

: 30 Jan 2018 To 29 Jan 2019

Engine No.

: R18A1750233

: RN61044585 Chassis No.

Vehicle No.

: SJC694M

Policy No.

: 2100062475-10

Endorsement No.

**Issued Date** 

: 24 Jan 2018

### ABOUT THE COVER

Make/Model

: HONDA STREAM 1.8

Engine Capacity/Tonnage : 1,799.00 CC

Sum Insured : Market Value

First Year of Registration : 2008

Driver Restriction

: NA

Off Peak Car No

Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive\*

at The Policyfusider. Its Any other person who is develop on the Policyfulder's exfer or with his/her personalish.
This Policy will indemnify the Policyfulder or any authorised driver only if hershe meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young brittin livexpallenced Driver Excess" ("YIDR") If You are or Your Authorised Driver (named or unmarred) is under the eye of 23 and/or have less more 2 years' driving experience

Age Condition

: All Age Condition

Limitation as to use\*

Use any for solder, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for live or reward, driving funion, driving test, racing, pace-holding, rehability trial or speed-lessing, the carriage of goods other than samples is comestion with foliar Tradit.

Lunitations rendered importance by Section 6 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) this Section 95 of the Read Transport Act, 1987 (Malgyriar), are not to be milluded under these headings

#### EXCESS

Fire - 50 Own Damage - 5600 Theft - 50 Floor Cover - 50

Section 2

Property Damage - \$9

Windscreen : \$100

Named Driver and Excess (when applicable).

Tari Chat Pang - \$600 (Own Damage)

## APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Approxed Reporting Centrum AIG Authorised Reprints (For claims effect separat)
Any accident repairs to the Vehicle can be carried out at the separate planes specifically excused by Util
For Approved Reporting Centres/AIG Authorised Repaired, planes carried out at the separate out 24-hour accident emergency holling at +65 sizz8 sizz0. Alternativally, you may refer to AIG separate sww.aej.com siz.or AIGSC Mobile App. Simply search and download "AIG-3G from Fluxes or Google Play."

### **IMPORTANT NOTES**

Hire Purchase Company/Employer's Loan: DBS BANK LTD

I/We hereby certify that the policy to which this Cortificate of insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189). Part IV of the Road Transport Act, 1987 (Mellaywa) and Motor Vehicles (Third Party Risks) Rules. 1959 (Mellaysia)

0500722000

CYCLE & CARRIAGE FULCO-MIT 22 UBI ROAD 4 FULCO BUILDING SINGAPORE 408617 ANSP-MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd. AUTHORISED REPRESENTATIVE