

22/03/2002

ASS. REC. BY:

REF:

CS3/ASMI8018485/Gden

Special Instruction:

Survivor

Smart claim

GQ

ASSIGNMENT (Office)

From (Person):

Peter Wang

of

ASM

Date/Time: 11.10.2018 836am

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

FBM 5433J

Insured:

FBJ 7940P

at Workshop m/s

Asia Motorsport

Tel:

6745 3811

of

568 Geylang Rd

Policy No:

Claim No:

SBM00X54

Sum Insured:

Excess:

Make of Veh:

D.O.A.

08.10.2018

(Client's Record)

CA / REV / REP. / REV 24 HRS Wp

H.O.D. Endorsement:

Date/Time:

11.10.2018 10.44am

Person Contacted:

MI.100

Vehicle IN/OUT

Date/Time

Action/Instruction (X) Estimate

FBM 5433J - X

FBJ 7940P - X

Dianette: 17/10/2018

DATE: 15/12/17

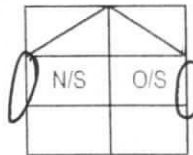
REF: AXA

ASSIGNMENT

From: _____ Date: _____
 Estimated Cost: _____
 OD / TP / WS / TP RES / OD RES / EVA / INV / MV
 To Inspect Vehicle No: _____
 at Workshop m/s **Asia Motorsport**
 of _____
 Insured: _____
 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.



Bal. or Market Value: _____
 IDAC Accident Rpt.: _____ Consistent? : Yes or No
 GIA / PR Seen: _____ Consistent? : Yes or No
 Est. Repairs: **3** days Res.: Yes or No
 Lum Sum: **20** % 3 Val.: Yes or No
 CA / REV / REP. / 24 HRS
 Date: _____ Person Contacted: _____
 Vehicle: IN / OUT

Veh No: **FBM5433J** Yr Regn: **Dec / 17**
 Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: **Yamaha** C.C. **847**
 Colour: **Grey** A/C: Insured / Std / NI / NA
 Sp.Reading: **24336** T/Radio: Insured / Std / NI / NA

Eng/No: _____
 C/No: **JYARN 435 000010363**
 Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / STD A/Rim or

Tyre Size: F: **120/70 8R17**
 R: **130/55 8R17**

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /
 TOYO / YOKO or

Front Rear
 R/Bal. **5** mm R/Bal. **5** mm
 L/Bal. mm L/Bal. mm
 D.O.A. D.O.I. **11-10-18**

Survey held at **w/s 4:45pm**

Des. of Damages : Frt / Rear / **O/S** / **W/S** / U/C / Rooftop or

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

Date / Time Action / Instruction
\$4000 - \$5000

Date/Time, File Pass to? ☐ : Preli. Report

1) ☐ : Final Report

Date/Time, File Return to?

2) _____

Days Of Repair: **3**

Resurvey No. of Trip: **1**

Survey Fee:

Transportation: **100**

Photos

Others

TOTAL

100

Report Format: **PRE**

Lump Sum / I.B.I. (\$) _____

Add Fee: ☐ : Site Insp (\$)

☐ : Interview (\$)

☐ : Tech. Invs (\$)

☐ : Weekend (\$)




Service Request Details

Claim

S8M00YS4

Reference

None 

Loss Date

October 8, 2018

Request Date

October 11, 2018

Due Date

October 18, 2018

Vendor Name

LKK AUTO CONSULTANTS PTE LTD (TP)

Type of Loss

Third Party Vehicle Damage

Services

Pending verification - Direct Settlement

Actions

Next Step

Agree to perform service

Decline Work

Accept Work

Vehicle Information

Incident Vehicle Registration #

FBM5433J

Make

TPVD

Model

TBC

Service Address

...

Primary Contact/Insured

HUANG RUIHENG RICKSON
638 WOODLANDS RING ROAD, #09-53, 730638, Singapore
97479664

Claim Handler

WANG Peter

peter.wang@axa.com.sg

Additional Instructions

NON REPORTED

Messages

Invoices

History

Documents

Assessment

Metrics

Notes

New Message

[> Back to OneMotoring](#)

Enquire Transfer Fee

Vehicle Details			
Vehicle No. :	FBM5433J		
Vehicle Type :	P00 - Passenger Motorcycle/Autocycle/Moped		
Vehicle Attachment 1 :	No Attachment		
Vehicle Scheme :	Normal		
Vehicle Make :	YAMAHA		
Vehicle Model :	MTN850A		
Chassis No. :	JYARN435000010363		
Propellant :	Petrol		
Engine No. :	N701E098430		
Engine Capacity :	847 cc		
Maximum Power Output :	-		
Maximum Laden Weight :	367 kg		
Unladen Weight :	193 kg		
Year Of Manufacture :	2017		
Original Registration Date :	11 Dec 2017		
Lifespan Expiry Date :	-		
COE Category :	D - Motorcycle		
Quota Premium :	\$6,101.00		
COE Expiry Date :	10 Dec 2027		
Road Tax Expiry Date :	10 Dec 2018		
Inspection Due Date :	10 Dec 2020		
Intended Transfer Date :	24 Oct 2018		
CO2 Emission :	-		
CO Emission :	-		
HC Emission :	-		
NOx Emission :	-		
PM Emission :	-		
The current road tax expiry is 10 Dec 2018. You may renew the road tax from 11 Sep 2018 with all pre-requisite(s) fulfilled. If the road tax is renewed after 10 Dec 2018, late renewal fee(s) will be imposed. Please use Enquire Road Tax Payable to check on the late fee(s) payable.			
Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.			
Amount Payable (From 11 Dec 2018 to 10 Jun 2019)			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Sub Total :			25.00
Nett Road Tax Amount (After Offsetting Over Payment) :	108.00	-	108.00
Total Amount Payable :			133.00
Amount Payable (From 11 Dec 2018 to 10 Dec 2019)			
	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee :	25.00	-	25.00
Sub Total :			25.00
Nett Road Tax Amount (After Offsetting Over Payment) :	216.00	-	216.00
Total Amount Payable :			241.00

You may print this page for reference.

OK

Print

[> Back to OneMotoring](#)**Enquire PARF/COE Rebate for Registered Vehicle**

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	6753A
Vehicle Details	
Vehicle No.:	FBM5433J
Vehicle to be Exported:	No
Intended Deregistration Date:	24 Oct 2018
Vehicle Make:	YAMAHA
Vehicle Model:	MTN850A
Primary Colour:	Grey
Manufacturing Year:	2017
Engine No.:	N701E098430
Chassis No.:	JYARN435000010363
Maximum Power Output:	-
Open Market Value:	\$8,629.00
Original Registration Date:	11 Dec 2017
First Registration Date:	11 Dec 2017
Transfer Count:	1
Actual ARF Paid:	\$2,565.00
Intended PARF Rebate Details	
PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00
Intended COE Rebate Details	
COE Expiry Date:	10 Dec 2027
COE Category:	D - Motorcycle
COE Period(Years):	10
QP Paid:	\$6,101.00
COE Rebate Amount:	\$5,568.00
Total Rebate Amount:	\$5,568.00

The information contained herein is correct as at 24 Oct 2018

OK

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 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. 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	08/10/2018 13:15
Date Of Accident	08/10/2018 06:40
Exact Location Of Accident	SLE TO CTE NEAR MANDAI AVE EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBM5433J
Insured/Policyholder	
Name Of Registered Owner	SAIFULBARRI BIN CHE OTHMAN
NRIC No	S9346753A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-87993279
Alternative Phone No	OFFICE-82793279

Vehicle Particulars

Manufacturer	YAMAHA
Model	MT-09-847CC
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	MOTORCYCLE

Insurance Company

Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	PNMC2017-00001720
Cover Note Number	

Driver

Name of Driver	SAIFULBARRI BIN CHE OTHMAN
NRIC No	S9346753A
Date Of Birth	16/12/1993
Occupation	INDOOR
Date Of Driving Pass	27/11/2017
Driving Experience	0 YEAR AND 10 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-87993279
Fax Number	
Contact Number	OFFICE-82793279
EMail Address	NOEMAIL

Address	BLK 329 WOODLANDS STREET 32 #03-87
Postcode	730329
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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?	YES
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	WOODLANDS WEST NPC
Police Station Address	ROAD: 9 MARSILING LANE , POSTCODE: 739146 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHMENT

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBJ7940P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number GR2434R
Vehicle Make/Model/Colour
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)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SJN8448Y
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 RIDER
Approximate Age
Injuries Sustain
Injured person in which vehicle? FBJ7940P
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?
Address
Postcode

DETAILS OF INJURED PERSON 2

Name SAIFULBARRI BIN CHE OTHMAN
Approximate Age
Injuries Sustain
Injured person in which vehicle? FBM5433J
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?
Address
Postcode

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 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:
 - (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' 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:
 - (i) 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.

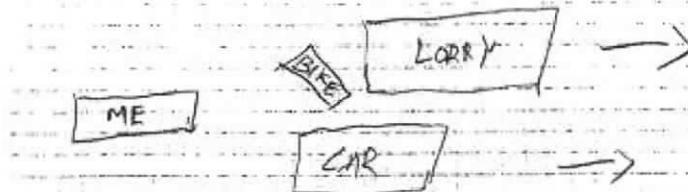
Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer
To
Police
Report.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20181008/2103

1 of 3

Report No. T/20181008/2103

Police Station Of Origin:
Woodlands West N.P.C.
9 Marsiling Lane SINGAPORE 739146
Tel No: 1800-363 9999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:
08/10/2018 16:23

Vide Report No.:
J/20181008/0073

Station Diary No.:
47

Informant's Particulars

Name of Informant:
SAIFULBARRI BIN CHE OTHMAN

Address:
APT BLK 329 WOODLANDS STREET 32 #03-87 SINGAPORE
730329

ID Type / ID No.:
NRIC NO / S9346753A

Contact No.:
Home/Office: Mobile: 87993279

Nationality:
SINGAPORE CITIZEN

Email:

Sex: Age: Date of Birth:
Male 24 16/12/1993

Type of Informant:
Rider

Race:
Boyanes

Language:

Institution / School Name:

Occupation:
CIVIL SERVANT

Driving Licence Information:
Class:

Date of Expiry:

General Information of the Accident

Type of
Accident:

Injury
Conveyed By Ambulance

Drink
Drive:
No

Date/Time of
Accident:
08/10/2018 06:40

Type of Location:
Straight Road

Location:
Along Road 1 Traveling Toward Road 2
SELETAR EXPRESSWAY
CENTRAL EXPRESSWAY
Before exit of Mandai Avenue

Weather:
Clear

Road Surface:
Dry

Road Speed Limit:

Traffic Flow:

Traffic Control:

Traffic Volume:

Type of Collision:

Anyone conveyed by
ambulance:
No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBJ7940P	Motorcycle					0
FBM5433J	Motorcycle	YAMAHA	MTN850A	Grey		0
GR2434R	Lorry					0
SJN8448Y	Car					0



**SINGAPORE
POLICE FORCE**



T/20181008/2103

2 of 3

Police Station Of Origin:
Woodlands West N.P.C.
9 Marsiling Lane SINGAPORE 739146
Tel No: 1800-363 9999

Report No: T/20181008/2103

CONTINUATION OF REPORT

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBM5433J	FWD Singapore Pte. Ltd	PNMC2017-00001720	12/12/2017	11/12/2018

Details of Person Involved

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA

Rider

Name	SAIFULBARRI BIN CHE OTHMAN	ID No.	S9346753A
Related Vehicle	FBM5433J (Motorcycle)	Contact No.	87993279
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	08/10/2018	Date Discharge	08/10/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On above mentioned date, time and location, I was travelling between lane 1 and lane 2 with my Motorbike (FBM5433J) along SLE towards CTE.

Motorbike(FBJ7940P) was travelling in front of me on the 3rd lane at that point of time while a lorry V2(GR2434R) was on the 2nd lane. Motorbike(FBJ7940P) then tried to switch lane from 3rd lane to in-between 2nd lane and 1st lane and over take the lorry(V2). however while doing so, Lorry(V2) brake and Motorbike(FBJ7940P) collided onto the right side of the lorry and fell to the ground. The Motorbike then skidded and hit another car(SJN8448Y) which was on the first lane. I was the unable to stop in time and collided into motorbike(FBM5433J). I suffered slight injuries to my left leg and both arms. The rider of Motorbike(FBJ7940P) was conveyed to by the ambulance. I was given 3 days of MC.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Woodlands West N.P.C.
9 Marsiling Lane SINGAPORE 739146
Tel No: 1800-363 9999



T/20181008/2103

3 of 3

Report No. T/20181008/2103

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:

J/
Staff Sgt G·H ZHONG SHENG, JOHNSON

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:

TP / GIT /
Sr Staff Sgt YUS MASTARI I KHAZALI
Contact No: 65476214 SN 127

Authentication Stamp

NP150

Signature 1

Singapore Police Force

Signature Of Informant:

[Handwritten Signature]

Date/Time:

08/10/2018 16:23

Classification Of Case:


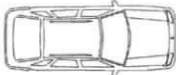
**LKK Auto Consultants Pte Ltd**

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				
AXA INSURANCE PTE LTD		Ref: CS3/ASM18018485/Gcbe2		
8 SHENTON WAY #24-01 AXA TOWER		Date: 26-10-2018		
SINGAPORE 068811				
ATTN : PETER WANG		Code: ASM		
1. Policy Particulars :- (THIRD PARTY CLAIM)				
Insured Veh.	FBJ 7940P	Veh. Inspected	FBM 5433J	
Policy No.		Coverage (\$)	0.00	
Claim No.	S8M00YS4	Excess (\$)	0.00	
Assign From	PETER WANG	Assign Date	11/10/2018	
2. Vehicle Particulars & Condition				
Make & Model	YAMAHA	c.c	847	
Engine No.	HIDDEN	Year of Reg.	2017	
Chassis No.	JYARN435000010363	Colour	GREY	
Odometer	21336 KM	Steering	IN ORDER	
Brakes	IN ORDER	Modification	NIL	
General	GOOD			
3. Conditions of Tyres				
	Size	Make	Balance	
R/H Front Tyre	120/70Z R17	DUNLOP	5 mm	
L/H Front Tyre			mm	
R/H Rear Tyre	130/55Z R17	DUNLOP	5 mm	
L/H Rear Tyre			mm	
4. Description of Damages				
THE VEHICLE SUSTAINED DAMAGES AT THE O/S AND N/S BODY.				
5. General Information				
Accident Date	08/10/2018	Inspect Date / Time	11/10/2018 (04:45 PM)	
Survey held at	ASIA MOTORSPORTS SOLUTION PTE LTD 568 GEYLANG ROAD SINGAPORE 389514			
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. D) THE ESTIMATED REPAIR COST OF THE DAMAGED VEHICLE IS IN THE REGION OF \$4,000-\$5,000				
5b. Estimate Days of Repair				
ESTIMATED NORMAL PERIOD FOR REPAIR:		3 Working Days		

Report Ref No. CS3/ASM18018485/Gcbe2

Inspected By

XING GUO QIANG

M.MATAI, AMSAE-A

Automotive Assessor



K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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