

NATIONAL Assessment Centre Services

(wef 1 Jan 05) MNA 118147292

| | | | |
|-------------------------|--|-----------------------|---------|
| Date In: 12/11/18-16:54 | Job description | Date & Time Completed | Done by |
| Ref No: NA 118147292 | SAS e-filing | | |
| Veh No: 542561413 | E-mail (within 5hrs, AIC 2hrs) | | |
| D.O.A: 12/11/18-12:12 | i-Motor Claim Form | | |
| OD TP Reporting Only | i-Motor W/O (Within: OD 2hrs, TP 4hrs) | | |
| | i-Photo Uploaded | | |
| TP Insurer: | Assessment/Survey Report | | |
| | Ass't Report by Fax / Hand to Owner/Wksp | | |

| | | |
|--|--|-----------------------|
| Preferred Wksp / INC Assign Wksp / QW: (| Tel: (| Fax: (|
| TP Particulars: | Veh No: 542561413 | INC () / Non-INC () |
| Owner / Driver: (| Tel: (| |
| Policy No: (| Period: (| Cover Type: (|
| Confirmed by: (| Date: (| Time: (|
| Insured/Driver Liability: (| %) [Note-Est. Status (WO): N: 0-20%; P: 21-79% P: 80-100%] | |
| Year of Registration: (| Warranty: YES () / NO () | |
| Excess: (\$ | Loading: \$1,000 () / \$2,000 () | |

General Remarks:-

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co: ()

| Remarks:- | (INC hotline: 6788 6616) | Date & Time Completed | Done by |
|---|--------------------------|-----------------------|---------|
| 1) Apply for Transport Allowance () / Courtesy Car () | | | |
| 2) QC Check / Post Repair Inspection () | | | |
| 3) Upload Resurvey Photo [Repair Cost > \$3000] () | | | |

Injury: _____

| Date/Time | Actions |
|-----------|---------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

| | | | |
|---------------------------------|---|-------------|-----------|
| NA 118147292 | Invoice Preparation Checklist | Am't (\$) | Am't (\$) |
| | | Est Bill | Add Bill |
| Claimant's Particulars:- | 1) AR: Accident Reporting (\$30); | | |
| Driver/Owner: | 2) DA: Damage Assessment (\$100); INC (\$80) | | |
| Contact No: | 3) TF: Towing Fee \$40/\$45 | | |
| Damaged Portion: | 4) FT: Follow-Through Survey \$120 | | |
| | 5) FT: Follow-Through Survey (Resurvey) \$30 | | |
| | For claiming against INC Only (wef 10 Jan 2005) | | |
| | 6) TR: Re-inspection \$75 | | |
| | 7) N1: Idac DA + SMRT Survey \$160 | | |
| | 8) NTUC Additional Services:- | | |
| QC Checked by (Engr-In-Charge): | Q1* | | |
| | *N5: Courtesy Car / Tpt Allowance \$5 | | |
| | *N6: Repair Co-ordination \$10 | | |
| | *N7: Post Repair Inspection \$25 | | |
| | *N8: DV / Collect Excess Coordination \$5 | | |
| | TP (N11): TP (Non INC) against INC \$20 | | |
| | 9) N12: Idac Mobile 30 | | |
| Auditors' Comments:- | | | |
| Pat 1: | Invoice dated | Fee Charged | |
| Pat 2 / 3: | Invoice dated | Fee Charged | |

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 | 13/11/2018 16:54 |
| Date Of Accident | 13/11/2018 10:10 |
| Exact Location Of Accident | KPE TWDS ECP |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|-------------------------|
| Vehicle Registration Number | SGZ5614B |
| Insured/Policyholder | |
| Name Of Registered Owner | CONCERN TRADING PTE LTD |
| Co Reg No | 198004884E |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-67435415 |

Vehicle Particulars

| | |
|--|--------------------|
| Manufacturer | TOYOTA |
| Model | RUSH 1.5X A |
| Exact Purpose for which vehicle was being used at time of accident | WORKING |
| 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 | COMMERCIAL VEHICLE |

Insurance Company

| | |
|---------------------------|--------------------------------------|
| Name of Insurance Company | MSIG INSURANCE (SINGAPORE) PTE. LTD. |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | D300072605MCY |
| Cover Note Number | |

Driver

| | |
|----------------------|---------------------------------|
| Name of Driver | LAURA ANTOINETTE CHEW TEOW BOON |
| NRIC No | S1572353Z |
| Date Of Birth | 01/06/1963 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 02/11/1989 |
| Driving Experience | 29 YEARS AND 0 MONTHS |
| Gender | FEMALE |
| Mobile Number | (LOCAL) +65-96783305 |
| Fax Number | |
| Contact Number | OFFICE-96783305 |
| Email Address | NOEMAIL |

| | |
|---|----------------------------------|
| Address | 1 SENGKANG EAST AVENUE #12-05 |
| Postcode | 544811 |
| Was driver an employee of the Insured's Company | YES |
| If No, Relationship of the Driver with the Insured | |
| Vehicle Registration Number of Driver's Own Vehicle | - |
| | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |
| | - |

General Information of the Accident

| | |
|--------------------|-----------------|
| Type Of Accident | CHAIN COLLISION |
| Weather Conditions | CLEAR |
| Road Surface | DRY |

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? | YES |
| 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) | 2 |
| Passenger 1 | NAME: : ALYCIA TANG CHENG WEN 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

REFER TO STATEMENT.

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 | SHA1858K |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | TAXI |
| 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 | SKW691D |
| Vehicle Make/Model/Colour | HONDA STREAM |
| 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 | LAURA ANTOINETTE CHEW TEOW BOON |
| Approximate Age | |
| Injuries Sustain | BODY |
| Injured person in which vehicle? | SGZ5614B |
| Were seat belts worn? | YES |
| Was this injured conveyed to hospital by ambulance? | NO |
| Address | |
| Postcode | |

DETAILS OF INJURED PERSON 2

| | |
|---|-----------------------|
| Name | ALYCIA TANG CHENG WEN |
| Approximate Age | |
| Injuries Sustain | BODY |
| Injured person in which vehicle? | SGZ5614B |
| Were seat belts worn? | YES |
| Was this injured conveyed to hospital by ambulance? | NO |
| Address | |
| Postcode | |

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 reassess 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:

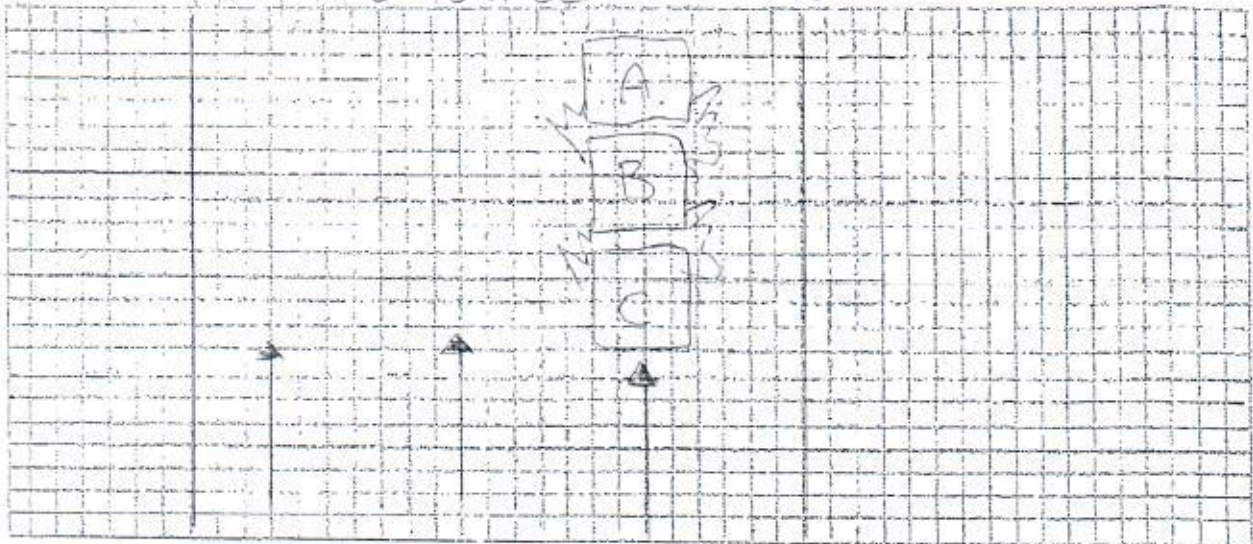
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Vehicle A: SGZ5614B
Vehicle B: SHA 1858K
Vehicle C: SKW 691D

SKETCH PLAN

Along KPE TUNNEL TOWARDS ECP



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 13 Nov 2018, at around 10.10, vehicle A was driving from KPE Tunnel the vehicle in front of vehicle A was slowing down, vehicle A follow to slow down.

After that vehicle A (SGZ5614B) feel an impact from the back of the car. Vehicle A went down and notice back side was damage by vehicle B.

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.:

Date of Accident : 13/11/2018 Accident Time: 10:10 (24-HR-Format)
Accident Place : KPE TUNNEL Towards ECP
Vehicle Reg. No. (Car Plate No.) : SGZ 5614B
Vehicle Make/Model : TOYOTA RUSH
Insurance Company : MSIG Policy No. _____
Owner or Company Name / IC No. : Concern Trading Pte Ltd
Owner or Company Contact No. : 6743 5415 Owner's Hp _____ Company Tel _____
DRIVER'S Name / IC No. : LAURA ANTOINETTE CHEW TEOW BOON
DRIVER'S Date Of Birth : 01/06/1963 DRIVER'S License Pass Date 02 Nov 1989
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: _____
DRIVER'S Address : 1 SENGKANG EAST AVENUE #12-05, S544811
DRIVER'S Contact No. / Alt No. : 1) 9678 3305 2) _____
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address : weiyuan0312@gmail.com
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including Driver): 2

Was there any video Captured by car camera: YES \ NO

Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Other Party Driver's Particular (if any)

^B
Vehicle Reg. No: SHA 1858K

Vehicle Make/Model: _____

Name Driver: _____

IC No. Driver: _____

Driver's Contact & Add: _____

^C
Vehicle Reg. No: SKW 691D

Vehicle Make/Model: Honda Stream

Name Driver: _____

IC No. Driver: _____

Driver's Contact & Add: _____

**BizInsights****Business Profile (BPFCOY)****CONCERN TRADING PTE LTD****Company Particulars**

| | |
|--|---|
| Name | : CONCERN TRADING PTE LTD |
| Registration Number / UEN | : 198004884E |
| Date of Registration | : 31-12-1980 |
| Date of Change (Name) | : - |
| Country of Incorporation | : SINGAPORE |
| Company Type | : EXEMPT PRIVATE COMPANY LIMITED BY SHARES |
| Registered Address | : 105 SIMS AVENUE #07-08 CHANCERLODGE COMPLEX SINGAPORE 387429 |
| Date of Change (Address) | : - |
| Status | : LIVE COMPANY |
| Status Effective Date | : 31-12-1980 |
| Principal Activity Code (I) | : 46900 |
| Principal Activity Description (I) | : GENERAL WHOLESALE TRADE (INCLUDING GENERAL IMPORTERS AND EXPORTERS) |
| Principal Activity Code (II) | : 46100 |
| Principal Activity Description (II) | : WHOLESALE ON A FEE OR CONTRACT BASIS (EG COMMISSION AGENTS) |
| Amalgamation Details | : - |

Previous Alias(es)

This company has no previous alias

Capital

| Type | No. of Shares | Issued Amount | Paid-Up Amount | Currency |
|------------|---------------|---------------|----------------|--------------------|
| Ordinary | 2,000,000 | 2,000,000.00 | 2,000,000.00 | SINGAPORE, DOLLARS |
| Preference | 0 | 0.00 | 0.00 | SINGAPORE, DOLLARS |
| Others | 0 | 0.00 | 0.00 | SINGAPORE, DOLLARS |

Auditor(s)

Name : J. TAN & CO
Date of Appointment : 03-06-2016

Charge(s)

| No. | Charge No. | Name | Date of Registration | Amount Secured | Currency |
|-----|------------|------------------------------|----------------------|----------------|--------------------|
| 1 | 8103510 | OVERSEAS UNION BANK LIMITED | 27-08-1981 | 30,000.00 | SINGAPORE, DOLLARS |
| 2 | 8201985 | OVERSEAS UNION BANK LIMITED | 01-06-1982 | 20,000.00 | SINGAPORE, DOLLARS |
| 3 | 8401995 | OVERSEAS UNION BANK LIMITED | 28-04-1984 | 50,000.00 | SINGAPORE, DOLLARS |
| 4 | 8402983 | OVERSEAS UNION BANK LIMITED | 27-06-1984 | 40,000.00 | SINGAPORE, DOLLARS |
| 5 | 9301265 | OVERSEAS UNION BANK LIMITED | 23-03-1993 | 630,000.00 | SINGAPORE, DOLLARS |
| 6 | 9405063 | OVERSEAS UNION BANK LIMITED | 02-09-1994 | 730,000.00 | SINGAPORE, DOLLARS |
| 7 | 9405063 | OVERSEAS UNION BANK LIMITED | 02-09-1994 | All Monies | - |
| 8 | C200405279 | UNITED OVERSEAS BANK LIMITED | 26-10-2004 | All Monies | - |
| 9 | C200602274 | UNITED OVERSEAS BANK LIMITED | 07-04-2006 | All Monies | - |

Officer(s)

| No. | Name | UEN / ID No. | Origin / Nationality | Position | Date of Appointment |
|-----|---------------------|--------------|----------------------|----------|---------------------|
| 1 | CHEW ONG AH,ANTHONY | S0374274A | SINGAPORE CITIZEN | DIRECTOR | 31-12-1980 |

Address

52A FLORENCE ROAD SINGAPORE 549507

| No. | Name | UEN / ID No. | Origin / Nationality | Position | Date of Appointment |
|-----|---------------------|--------------|----------------------|-------------------|---------------------|
| 2 | CHEW ONG AH,ANTHONY | S0374274A | SINGAPORE CITIZEN | MANAGING DIRECTOR | 19-01-1981 |

Address

52A FLORENCE ROAD SINGAPORE 549507

| No. | Name | UEN / ID No. | Origin / Nationality | Position | Date of Appointment |
|-----|------------|--------------|----------------------|-----------|---------------------|
| 3 | KOH KIM EE | S0877378E | SINGAPORE CITIZEN | SECRETARY | 19-01-1981 |

Address

15 FARRER DRIVE #02-09 POLLEN & BLEU SINGAPORE 259296

| No. | Name | UEN / ID No. | Origin / Nationality | Position | Date of Appointment |
|--|----------------|--------------|----------------------|----------|---------------------|
| 4 | CHEW TIAW KEWI | S1340006G | SINGAPORE CITIZEN | DIRECTOR | 31-12-1980 |
| Address | | | | | |
| 28 SERANGOON AVENUE 1 SINGAPORE 556145 | | | | | |

| No. | Name | UEN / ID No. | Origin / Nationality | Position | Date of Appointment |
|---|-----------------|--------------|----------------------|----------|---------------------|
| 5 | CHEW TEOW KIANG | S1428921F | SINGAPORE CITIZEN | DIRECTOR | 24-08-2017 |
| Address | | | | | |
| 170 TAI KENG GARDENS TAI KENG GARDEN SINGAPORE 535441 | | | | | |

| No. | Name | UEN / ID No. | Origin / Nationality | Position | Date of Appointment |
|--|----------------|--------------|----------------------|----------|---------------------|
| 6 | CHEW TEOW BOON | S1572353Z | SINGAPORE CITIZEN | DIRECTOR | 25-10-1988 |
| Address | | | | | |
| 1 SENGKANG EAST AVENUE#12-05 RIVERSOUND RESIDENCE SINGAPORE 544811 | | | | | |

| No. | Name | UEN / ID No. | Origin / Nationality | Position | Date of Appointment |
|---|----------------|--------------|----------------------|----------|---------------------|
| 7 | CHEW TEOW MENG | S1625415J | SINGAPORE CITIZEN | DIRECTOR | 04-07-1991 |
| Address | | | | | |
| 10 UPPER SERANGOON VIEW #15-03 RIO VISTA SINGAPORE 534198 | | | | | |

| No. | Name | UEN / ID No. | Origin / Nationality | Position | Date of Appointment |
|------------------------------------|---------------------|--------------|----------------------|----------|---------------------|
| 8 | CLARA CHEW TIAW HAW | S1717119D | SINGAPORE CITIZEN | DIRECTOR | 29-11-2001 |
| Address | | | | | |
| 52A FLORENCE ROAD SINGAPORE 549507 | | | | | |

| No. | Name | UEN / ID No. | Origin / Nationality | Position | Date of Appointment |
|------------------------------------|-----------------------|--------------|----------------------|----------|---------------------|
| 9 | CHOI PO KUM CHRISTINA | S2009386B | SINGAPORE CITIZEN | DIRECTOR | 16-07-1981 |
| Address | | | | | |
| 52A FLORENCE ROAD SINGAPORE 549507 | | | | | |

| No. | Name | UEN / ID No. | Origin / Nationality | Position | Date of Appointment |
|--|-----------------------|--------------|----------------------|-----------|---------------------|
| 10 | WONG GIT MAY CAMILLAG | S6932905E | SINGAPORE CITIZEN | SECRETARY | 01-03-2004 |
| Address | | | | | |
| 86 TAI HWAN HEIGHTS TAI HWAN GARDEN SINGAPORE 555431 | | | | | |

Shareholder(s)

| No. | ShareHolder Name | UEN / ID No. | Origin / Nationality | Address |
|-----|---------------------|-----------------|----------------------|--|
| 1 | CHEW TIAW ERN | S0200911J | SINGAPORE CITIZEN | 128 GEYLANG EAST AVENUE 1#13-127 SINGAPORE 380128 |
| | Share Category | Share Type | Share Allocation | Currency |
| | INDIVIDUAL | ORDINARY SHARES | 56,335 | SINGAPORE, DOLLARS |
| No. | ShareHolder Name | UEN / ID No. | Origin / Nationality | Address |
| 2 | CHEW ONG AH,ANTHONY | S0374274A | SINGAPORE CITIZEN | 52A FLORENCE ROAD SINGAPORE 549507 |
| | Share Category | Share Type | Share Allocation | Currency |
| | INDIVIDUAL | ORDINARY SHARES | 400,000 | SINGAPORE, DOLLARS |
| No. | ShareHolder Name | UEN / ID No. | Origin / Nationality | Address |
| 3 | KOH CHAR BOH | S0876295C | SINGAPORE CITIZEN | 11 JALAN MATA AYER#01-60 EUPHONY GARDENS SINGAPORE 759154 |
| | Share Category | Share Type | Share Allocation | Currency |
| | INDIVIDUAL | ORDINARY SHARES | 267,695 | SINGAPORE, DOLLARS |
| No. | ShareHolder Name | UEN / ID No. | Origin / Nationality | Address |
| 4 | KOH KIM EE | S0877378E | SINGAPORE CITIZEN | 15 FARRER DRIVE #02-09 POLLEN & BLEU SINGAPORE 259296 |
| | Share Category | Share Type | Share Allocation | Currency |
| | INDIVIDUAL | ORDINARY SHARES | 324,032 | SINGAPORE, DOLLARS |
| No. | ShareHolder Name | UEN / ID No. | Origin / Nationality | Address |
| 5 | CHEW TIAW KEWI | S1340006G | SINGAPORE CITIZEN | 28 SERANGOON AVENUE 1 SINGAPORE 556145 |
| | Share Category | Share Type | Share Allocation | Currency |
| | INDIVIDUAL | ORDINARY SHARES | 338,032 | SINGAPORE, DOLLARS |
| No. | ShareHolder Name | UEN / ID No. | Origin / Nationality | Address |
| 6 | CHEW TEOW KIANG | S1428921F | SINGAPORE CITIZEN | 170 TAI KENG GARDENS TAI KENG GARDEN SINGAPORE 535441 |
| | Share Category | Share Type | Share Allocation | Currency |
| | INDIVIDUAL | ORDINARY SHARES | 55,000 | SINGAPORE, DOLLARS |
| No. | ShareHolder Name | UEN / ID No. | Origin / Nationality | Address |
| 7 | CHEW TEOW BOON | S1572353Z | SINGAPORE CITIZEN | 1 SENGKANG EAST AVENUE#12-05 RIVERSOUND RESIDENCE SINGAPORE 544811 |
| | Share Category | Share Type | Share Allocation | Currency |
| | INDIVIDUAL | ORDINARY SHARES | 75,000 | SINGAPORE, DOLLARS |

| No. | ShareHolder Name | UEN / ID No. | Origin / Nationality | Address |
|----------------|-----------------------|-----------------|----------------------|---|
| 8 | CHEW TEOW MENG | S1625415J | SINGAPORE CITIZEN | 10 UPPER SERANGOON VIEW #15-03 RIO VISTA SINGAPORE 534198 |
| Share Category | | Share Type | Share Allocation | Currency |
| INDIVIDUAL | | ORDINARY SHARES | 58,371 | SINGAPORE, DOLLARS |
| No. | ShareHolder Name | UEN / ID No. | Origin / Nationality | Address |
| 9 | CLARA CHEW TIAW HAW | S1717119D | SINGAPORE CITIZEN | 52A FLORENCE ROAD SINGAPORE 549507 |
| Share Category | | Share Type | Share Allocation | Currency |
| INDIVIDUAL | | ORDINARY SHARES | 43,000 | SINGAPORE, DOLLARS |
| No. | ShareHolder Name | UEN / ID No. | Origin / Nationality | Address |
| 10 | CHOI PO KUM CHRISTINA | S2009386B | SINGAPORE CITIZEN | 52A FLORENCE ROAD SINGAPORE 549507 |
| Share Category | | Share Type | Share Allocation | Currency |
| INDIVIDUAL | | ORDINARY SHARES | 382,535 | SINGAPORE, DOLLARS |

Compliance Records

Date of Last AGM : 29-06-2018
Date of Last AR : 27-07-2018
Date of A/C Laid at Last AGM : 31-12-2017

Disclaimer

The information in this report is extracted by BizInsights from a database comprising information filed with Accounting & Corporate Regulatory Authority (ACRA) on or before 27 October 2018 and presented using a business intelligence solution from Elixir Technology Pte Ltd. The statements or ratios published by Elixir Technology are solely statements of opinion and not statements of fact or recommendations to purchase, hold, or sell any securities or make any other investment decisions. Subscribers should not rely on any such statements or ratios in making any investment decision. This report may not be reproduced in whole or in part in any form or manner. The report may contain information compiled from information which ACRA, Elixir Technology and BizInsights do not control and which has not been verified unless indicated in this report. Whilst every endeavor is made to ensure that the information provided is updated and correct, ACRA, BizInsights and Elixir Technology disclaim any liability for any damage or loss that may be caused as a result of any error or omission arising out of or in any way related to the contents of this report. Certain figures in the financial statements may have been adjusted for analytical classification purposes in accordance with established methodology and research processes.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1572353Z



Name



LAURA ANTOINETTE CHEW
TEOW BOON

周兆文

Race

CHINESE

Date of Birth

01-06-1963

Sex

F

Country of Birth

SINGAPORE

S1572353Z

0 1 7 9 5 8 E



NRIC No. S1572353Z



Blood Group

O+

Date of issue

10-12-1991

1 SENGKANG EAST AVENUE #12-05
SINGAPORE 544811

NRIC No. S1572353Z

Date: 10/12/2015

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1572353Z**
Name:
**LAURA ANTOINETTE CHEW
TEOW BOON**

Birth Date: **01 Jun 1963**
Issue Date: **31 Oct 2003**



 000967167G

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

| | | PASS DATE |
|---------|--|-------------|
| Class 3 | Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms | 02 Nov 1989 |

NP 428A



**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.
4 Shenton Way, #21-01, SGX Centre 2, Singapore 068807
Tel +65 6827 7888, Fax +65 6827 7800
Co.Reg No. 200412212G GST Reg. No. 20-0412212G
A Member of **MS&AD** INSURANCE GROUP

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

**MOTORMAX PLUS
Comprehensive**

Certificate No. D 300072605 MCY

Excess : SGD300

Windscreen Excess : SGD100

1. **Index Mark and Registration Number of Vehicle**
SGZ5614B

2. **Name of Policyholder**
Concern Trading Pte Ltd

3. **Effective Date of the Commencement of Insurance for the purposes of the Act**
06/11/2018

4. **Date of Expiry of Insurance**
05/11/2019

5. **Persons or Classes of Persons entitled to drive***

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. **Limitations as to Use ***

Use only for social domestic and pleasure purposes and for the Policyholder's business. The Policy does not cover use for hire or reward racing pace-making reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risk and Compensation) Act (Chapter 189) and Chapter 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

PLEASE NOTE ALL CLAIMS RELATED REPAIR MUST BE CARRIED OUT AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offense under the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189).

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.

Approved Insurers

Michael W Gourlay
Chief Executive Officer