

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	10/12/2018 16:24
Date Of Accident	10/12/2018 12:35
Exact Location Of Accident	38 ORANGE GROVE ROAD BASEMENT CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJW5069E /
Insured/Policyholder	
Name Of Registered Owner	BRAIN PHILLIP JAMES /
NRIC No	G5319683M
Email Address	PHILBRAIN33@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90250174
Alternative Phone No	OFFICE-90250174

Vehicle Particulars

Manufacturer	VOLVO
Model	XC60-3.0 T6 (A)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	/
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD /
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5095110807-01 /
Cover Note Number	

Driver

Name of Driver	GOODARE SHIRLEY ANNE /
Passport No/FIN	G3083870Q
Date Of Birth	08/08/1981
Occupation	INDOOR
Date Of Driving Pass	29/08/2017 /
Driving Experience	1 YEAR AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +85-92724074
Fax Number	
Contact Number	
Email Address	SHIRLEYGOODARE@HOTMAIL.COM

Address	22 NASSIM HILL ##04-07 THE LOFT
Postcode	258468
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PROPERTY
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	1
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) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

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
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	
Vehicle Make/Model/Colour	
Details Of Properties	WALL (ORANGE GROVE) /
Vehicle Category	NA/UNKNOWN
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

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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.
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' law yers/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' law yers/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 law yers/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.

GOODARE SHIRLEY ANNE

10/12/2018 15:57

Policyholder's Signature / Date & Time

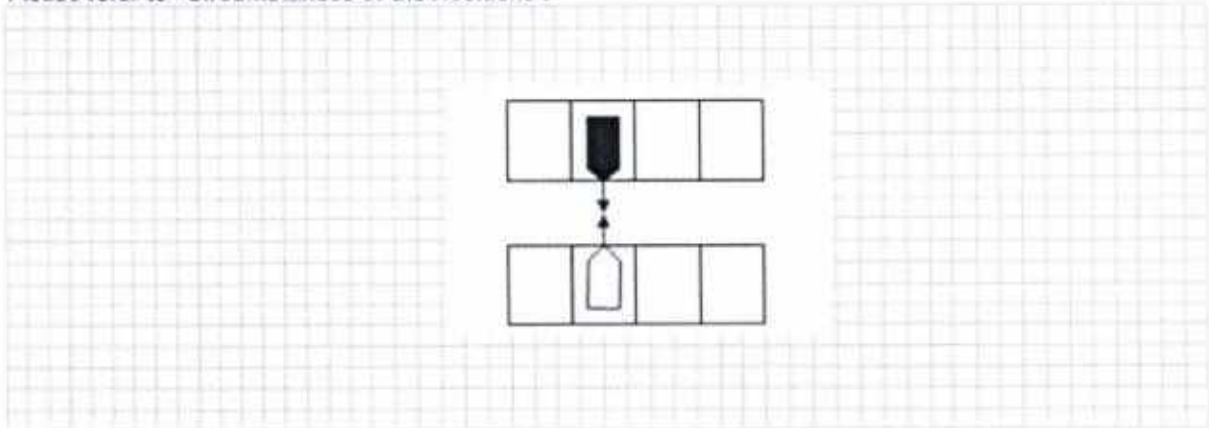
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan #2

Sketch Plan

The sketch plan is based on the closest scenario.
Please refer to "Circumstances of the Accident".



Describe Circumstances of the Accident

BLACK CAR : SJW5069E

WHITE CAR : WALL(ORANGE GROVE)

DESCRIPTION :

On 10 Dec 2018 at approximately 1235HRS I was reversing my vehicle out of a carpark, and suddenly my rear right corner of vehicle collided into the wall of Lobby D.

Declaration

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

GOODARE SHIRLEY ANNE

10/12/2018 15:57

Policyholder's Signature / Date &
Time

Driver's Signature (if driver is not the policyholder) / Date
& Time

Witnessed by Reporting Centre
Personnel

From: Clarence Richard Anthony <clarence.anthony@income.com.sg>
Sent: Monday, 10 December, 2018 4:58 PM
To: LKK Bukit Merah (rsbm@lkkauto.com); ODsupport
Subject: DA for SJW5069E (MT/1023236)
Attachments: SAS+2018-12-10.pdf

Dear Rosli

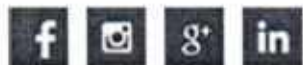
OF had done the reporting for the subject, however the OI will be proceeding to your centre for the assessment.

I have sent the DA to you. Please key the DA once you have assessed the car.

You may bill us for the assessment charges.

Regards

Clarence Anthony
Manager
Motor Insurance
T +65 6430 7877
www.income.com.sg



At Income, we are 'In with You' on Performance, Growth, Innovation and Impact. These attributes reflect what we promise as an employer and what we want our people to exemplify.
Find out more at Income.com.sg/careers



Disclaimer

This e-mail contains privileged or confidential information which is intended only for the use of the recipient(s) named above. If you have received this message in error, please notify the sender immediately and delete all copies of it. Thank you.

To Simon

By Assessor- 1) Initial Information

- 1) Vehicle hit Vehicle: ☐ a) Motorcar ☐ b) Motorcycle ☐ c) Bicycle
- 2) Vehicle hit ?? ☐ a) Pedestrian ☐ b) Animal
- 3) Vehicle hit Road Side Objects: ☐ a) Govn Property ☐ b) Road Work Object ☐ c) Private Property
- 4) Vehicle drop into drain ☐
- 5) Damage due to Act of God: ☐ a) Fallen Object ☐ b) Flood ☐ c) Other
- 6) Parked & Found Damaged: ☐ a) Vandalism ☐ b) Hit by Moving Object
- 7) Theft Case ☐ a) Stolen ☐ b) Damage found when recovered
- 8) Fire ☐ a) Whilst driving ☐ b) Parked
- 9) Accident date more than 24hrs ☐

Remarks for Internal Information

Remarks to appear in Works Order & Assessment report

- 1) Potential Total Loss ☐
- 2) SRS Light on ☐
- 3) ABS Light on ☐

By Assessor- 2) Vehicle Information

Vehicle: SJ05069 E Page: March 2010

Type: M.Car / M.Cycle / Bus / Van / Lorry / Trail / Prime Mover / ☐ / Truck / Trailer or

Make & Model: Volvo XC60 76 c.c. 2958

Colour: Black Transmission Type: Auto / Manual

Eng.No: B6304704011607493 Sp. Reading: 90101

C/Nor: YV1D29956A2105304

Gen. Cond: Good / Fair / Poor / Burnt or

Steering: In Order / Jammed / Leaked / Burnt or

Brake: In Order / Jammed / Leaked / Burnt or

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

Tyre Size: F: 235/60 R18
R: 235/60 R18

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

Front	Rear
R/Bal. <u>6</u> mm	R/Bal. <u>6</u> mm
L/Bal. <u>6</u> mm	L/Bal. <u>6</u> mm

Parallel Import: Yes ☒ No

Repair Type: LS / I.B.I

No of Repair Days: 4

D.O: 10/12/2008

Towed-In: Yes ☐ No ☒

Towing Required: Yes ☐ No ☒

Vehicle in Idac: Yes ☐ No ☒

Time: 1730

By Assessor- 2) Comments

- 1) Damages not due to recent accident.
- 2) Damages do not seem hit onto:
- a. Vehicle ☐ b. Motorcycle ☐ c. Bicycle ☐ d. Pedestrian ☐
- e. Animal ☐ f. Govn Object ☐ g. Road Work Object ☐
- h. Private Property ☐ i. Drain ☐ j. Road Kerb/Grass Verge ☐
- 3) Vehicle does not seem damaged as a result of:
- a. Fallen Object ☐ b. Flood ☐ c. Vandalism ☐ d. Fire ☐
- e. Moving Object ☐ f. Stolen ☐ g. Stolen & Recovered ☐

Time Started

Time Completed

1) CSO

2) ABS

3) Entire Operation Completed Time:

MOTORCAR (Rear)

(1)Jitter (2)Jammed (3)Distorted (4)Jagged (5)Wavy (6)Unbalanced
(7)Unfocused (8)Shriller (9)Backlog (10)Broken (11)Corrupt
(12)Missing (13)Torn (14)Unconfirmed (15)Not Working

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doi:10.1017/S0022292404001617 Printed in the United Kingdom

Vehicle No: SW 5067 E

Rear Portion

NAC	INC	Item	CON	AC	Qty
1137	993626	Rear Number Plate			
1138	993627	Rear Number Plate Base			
1139	993630	Rear Number Plate Garnish			
1140	993632	Rear Number Plate Lamp			
1141	992958	Rear Bumper	CU	✓	
1142	993085	Rear Bumper Upper			
1143	993017	Rear Bumper Lower			
1144	993054	Rear Bumper Side			
1145	993103	Rear Bumper Tow Cover			
1146	992341	Rear Bumper Clips	NAL	✓	
1147	992976	Rear Bumper Bracket	RR	✓	
1148	993068	Rear Bumper Side Retainer	R/L NAC	✓	
1149	993045	Rear Bumper Reinforcement			1
1150	992970	Rear Bumper Beam			2
1151	993077	Rear Bumper Sponge			
1152	992999	Rear Bumper Damper			
1153	993040	Rear Bumper Protector			
1154	993036	Rear Bumper Pad			
1155	993026	Rear Bumper Moulding			
1156	993044	Rear Bumper Reflector	RH		1
1157	993023	Rear Bumper Lower Spoiler			
1158	994023	Reverse Sensor			
1159	993327	Rear End Panel			
1160	993339	Rear End Panel Top Garnish			
1161	993333	Rear End Panel Inner Trim			
1162	990333	Boot Compartment Inner Trim			
1163	993851	Rear LH Taillamp			
1164	993853	Rear LH Taillamp Garnish			
1165	993859	Rear LH Taillamp Panel			
1166	995116	Rear RH Taillamp	RR	✓	
1167	993853	Rear RH Taillamp Garnish			1
1168	993859	Rear RH Taillamp Panel			
1169	993554	Rear Apron Panel			
1170	992895	Bootlid			
1171	991328	Bootlid Emblem			
1172	990356	Bootlid Handle			
1173	995250	Bootlid Moulding			
1174	990376	Bootlid Reflector			
1175	995222	Bootlid Lamp LH			
1176	992899	Bootlid Lamp RH			
1177	995243	Bootlid Lock			
1178	990377	Bootlid Rubber			
1179	990382	Bootlid Hinge			
1180	993577	Bootlid Spoiler			
1181	994543	Tailgate			
1182	991328	Tailgate Emblem			
1183	994643	Tailgate Outer Handle			
1184	994640	Tailgate Moulding			
1185	994545	Tailgate Garnish			
1186	994648	Tailgate Reflector			
1187	994549	Tailgate Lamp			
1188	994646	Tailgate Protector			
1189	994676	Tailgate Wiper Arm			
1190	994677	Tailgate Wiper Blade			
1191	994679	Tailgate Wiper Nozzle			
1192	994555	Tailgate Wiper Motor			
1193	994602	Tailgate Glass			
1194	994606	Tailgate Glass Rubber			
1195	994604	Tailgate Glass Moulding			
1196	994607	Tailgate Glass Sealant			
1197	994629	Tailgate Lock			
1198	994651	Tailgate Rubber			
1199	994611	Tailgate Hinge			
1200	994594	Tailgate Damper			
1201	994613	Tailgate Inner Board			

[illegible]

No of Items: _____ Assessor: _____

Claim Handling

Task Transfer Exit

Accident MT/1023236

LOGS TAB SUB

Policy No.	5095110807-01	Vehicle No.	SIW5069E	GST Registration No.	
Certificate No.					
Policyholder Name	BRAIN PHILLIP JAMES	Cover Type	Drive CLASSIC	Policyholder NRIC	G5319683M
Product Code	PRIVATE CAR INSURANCE	Contact No. (Office)		Loading	0
Contact No. (Mobile)	90250174	Special Remark		Contact No. (Home)	
Email Address				eCode	No
KFR	+ No Yes	TCA	+ No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	10	Private Hire	No

Accident Details

Report Date	10/12/2018 16:38	Accident Report Within 24 hrs	Yes	Accident Type	Collided into Property
Date of Accident	10/12/2018	Time of Accident hh:mm	12:35	Country of Accident	Singapore
Reporting Centre	Redzuan Bin Hussein	Orange Force	No	JCM No.	
Accident Location	38 ORANGE GROVE ROAD BASEMENT CARPARK				

Excess

Own damage Excess	500.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

Benefits

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	22 NASSIM HILL	Address 2	#04-07 THE LOFT	Address 3	SINGAPORE 258468
Address 4		Address Type	Singapore address	Post Code	258468
Unit No.		Related Policy Number	5095110807-01		

OI Driver Info

Driver Name	SHIRLEY ANNE GOODARE	Driver Type	Named Driver	Driver DOB	08/08/1981
Unnamed driver Name		Driver NRIC	G3083870Q	Driving Experience	20
Register Date of Driver License	03/03/1998	Driver Age	37	Contact No. (Home)	
Contact No. (Mobile)	92724074	Contact No. (Office)		Address 1	SINGAPORE 258468
Address 1	22 NASSIM HILL	Address 2	# THE LOFT	Post Code	258468
Address 4		Address Type	Singapore address		
Unit No.					
Does he own a Singapore Registered car?	Yes + No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes + No
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Modification History

Investigation

Claim 001 OD-MD

Claim Case Officer Tan Siew Choo

LOGS TAB SUB

Claim Type	OD-MD	Insured Name	BRAIN PHILLIP JAMES	Insured NRIC	G5319683M
Contact No. (Mobile)	90250174	Contact No. (Home)		Contact No. (Office)	
Email Address	PHILBRAIN33@GMAIL.COM	Q1 Vehicle Number	SIW5069E	TP Vehicle Number	
Claim Description	SIW5069E ON 10 Dec 2018				
Preferred Workshop Contact	Yes	Preferred Repair Option	Insured at liability report	Fully at Repair	
Date Registered	10/12/2018 16:47	Claim Close Date		Date Received	10/12/2018 16:34
Report Taken By	REDZUAN	Workshop Repairer		Total Loss but Repaired	
Print AK letter				OD Excess Collected by Workshop	

Modification History

Special Claim Creation Approval

Approval	Reason
Remarks	

damage assessment Attachment

Vehicle Info

Vehicle Make	VOLVO	Vehicle Model	XC60	Engine Capacity	
Date of Registration	29/03/2010	Class No.	YV1029956A2105304		
Towing Required	Yes No	Vehicle in IDAC	Yes No	Parallel Import	Yes No
Type of Tender	Own Damage	Assessor Name	BOSLI WAHAB	Survey Current Status	

12/11/2018

Claim Handling (damage assessment Claim Task MT/1023236 / Claim 001 OD-MD)

IDAC/Workshop
Name

IDAC/Workshop Location

Windscreen
Parts & Labour
Cost

Total Loss *

☐ Yes ☒ NoMarket
Value(\$)

Scrape Value(\$)

Economic Repair Value(\$)

Remark

Remark for
Supplementary

▼ Damage Listing

Find a Part	No.	Part No.	Description	Qty *	Repair Code *	
root						
Not Applicable	1	16000102	BUMPER (REAR)	1	Replace	X
ABS	2	16002402	BUMPER CLIPS (REAR)	1	Replace	X
ABSORBER	3	16001304	BUMPER BRACKET (REAR RIGHT)	1	Replace	X
ACCELERATOR	4	16005104	BUMPER RETAINER (REAR RIGHT)	1	Replace	X
ACTUATOR	5	16005002	BUMPER REINFORCEMENT (REAR)	1	Unconfirm	X
ADVERTISEMENT STICKER	6	16005902	BUMPER SPONGE (REAR)	1	Unconfirm	X
AIR BAG	7	16004904	BUMPER REFLECTOR (REAR RIGHT)	1	Unconfirm	X
AIR BLOWER	8	42000102	TAIL LAMP (RIGHT)	1	Replace	X
AIR BOX	9	420002	TAIL LAMP GARNISH	1	Unconfirm	X
AIR CHAMBER BOX	10	25400106	FENDER (REAR RIGHT)	1	Replace	X
AIR CLEANSER	11	25400904	FENDER INNER SHIELD (REAR RIGHT)	1	Unconfirm	X
AIR COMPRESSOR						
AIR CON						
AIR CON (VAN)						
AIR COOLER						
AIR DISTRIBUTOR						
AIR FILTER						
AIR FLOW						
AIR GRILLE						
AIR HORN						

Save Submit

ACCIDENT STATEMENT

ACCIDENT DATE: (10 / 12 / 18) (DD/MM/YYYY). TIME: (12 : 40) (HH:MM)

LOCATION: The Orange Grove, 38 Orange Grove Rd.

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: STW 5069E
b) INSURANCE COMPANY: NTUC
c) POLICY NUMBER: 5095 110807-01
d) POLICY TYPE: (COMPREHENSIVE) THIRD PARTY / THIRD PARTY FIRE & THEFT
e) MAKE & MODEL: Volvo XC60
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS) SW
g) VEHICLE CATEGORY: (PRIVATE) / COMMERCIAL / MOTORCYCLE
h) PURPOSE OF USING AT ACCIDENT TIME: Private usage
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: BRAIN, Phillip James (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: G5319693M CONTACT: 9025 0174
c) ADDRESS: 22 Nassim Hill, 4-07 The Loft
Singapore 258468

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Gradare, Shirley Anne (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: G3083870Q CONTACT: 9272 4074
c) ADDRESS: 22 Nassim Hill, 4-07 The Loft
258468

* d) DATE OF BIRTH: (08 / 08 / 1991) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 29/8/17

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Spouse

5. a) WEATHER CONDITION: (CLEAR) / RAINING / OTHERS

b) ROAD SURFACE: (DRY) / WET / OTHERS

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION:

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: MODEL:

b) DRIVER'S NAME:

c) NRIC/FIN/PASSPORT: CONTACT:

9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: MODEL:

e) DRIVER'S NAME:

f) NRIC/FIN/PASSPORT: CONTACT:

email = phil/brain33@gmail.com
VIDEO

REPUBLIC OF SINGAPORE

FIN G3083870Q



Name

GOODARE SHIRLEY ANNE

Date of Birth

08-08-1981

Sex

F

Nationality

NEW ZEALANDER

G3083870Q

GA0021488

25-05-2018

DEPENDANT'S PASS

Immigration Regulations



Download SGWorkPass
App to check status



FIN G3083870Q



YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.

REPUBLIC OF SINGAPORE **DRIVING LICENCE**



Licence Number: **G 3083870Q**

Name:

GOODARE SHIRLEY ANNE

Birth Date: **08 Aug 1981**

Issue Date: **29 Aug 2017**

Valid Till **28/08/2022**



002718837E

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

EFFECTIVE DATE

Class 3	Motor cars with unladen weight $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq$ 2500kg	29 Aug 2017
----------------	--	--------------------

NP 428A



Hello, NAC_BUKIT_MERAH_800676

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Policy Query

Policy No.

Date of Accident

Vehicle No.(For Motor)

Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
☐	5095110807-01		BRAIN PHILLIP JAMES	G5319683M	GPC	drive CLASSIC	SJW5069E	SJW5069E	25/10/2018	24/10/2019