



**Teamwork Garage Pte Ltd**  
53 Ubi Avenue 1 #01-23/24 Singapore 408934  
Paya Ubi Industrial Park  
Tel: 6844 2475 Fax: 6844 2474  
Email: [claims@teamworkgarage.com](mailto:claims@teamworkgarage.com)  
GST Register No: 201015366H

11<sup>th</sup> November 2019

Our reference: 1812-38

Your reference: SFA3389H

**AIG Asia Pacific Insurance Pte Ltd**

**BY HAND**

78 Shenton Way

#08-16

Singapore 079120

**Attn: Motor Claims Department**

Dear Sir/ Madam,

Claimant : HITACHI CAPITAL ASIA PACIFIC PTE LTD

Address : 111 SOMERSET ROAD #14-05-15 111 SOMERSET SINGAPORE(238164)

We are instructed by the above named to claim damages against your insured/your insured's driver in connection with a road accident on **24/12/2018** along **7 JUNCTION BETWEEN PUNGGOL ROAD TOWARDS HOUGANG AVENUE 10** involving our client's vehicle registration number **SLV8532X** and vehicle registrations number **SFA3389H** driven by you/your insured's driver at the material time.

The accident was caused by your insured negligent driving and/or management of the vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

Cost of Repair	:	\$ 9,951.00
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Loss of Rental	:	\$ 3,240.00
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LTA Search Fee	:	\$ 7.45
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Total	:	\$ 13,198.45
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A copy of each of the following supporting documents are enclosed:-

- a) Our client's Accident Report/Police Report;
- b) COE/PARF Certificates;
- c) Owner / Driver's IC & Driving License;
- d) Certificate of Insurance;
- e) LTA Search;
- f) Letter Of Authorisation;
- g) Tax Invoice;
- h) Satisfaction & Discharge of Vehicle (After Repair);
- i) Rental Agreement & Official Receipt;

The demand herein is in respect of our client's claim for damages pertaining to their motor vehicle and any settlement following or subsequent of this demand shall not prejudice our client's claim in respect of damages and consequential loss in relation to personal injuries.

Please send to us an acknowledgement of receipt of this letter with 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer. Our client's claim is quantified based on the supporting documents in our file. Until a settlement is reached, all negotiations are conducted on the basis that the damages quantified herein are subject to revision if so instructed by our client.

Yours faithfully,



Teamwork Garage Pte Ltd

Encl.

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

### Vehicle Owner Particulars

Owner ID Type:	Company
Owner ID:	0399N

### Vehicle Details

Vehicle No.:	SLV8532X
Vehicle to be Exported:	Yes
Intended Deregistration Date:	28 Dec 2018
Vehicle Make:	AUDI
Vehicle Model:	A3 SEDAN 1.0 TFSI S TRONIC (LED & NAV)

Primary Colour:	Red
Manufacturing Year:	2017
Engine No.:	CHZ593861
Chassis No.:	WAUZZZ8V7J1028453
Maximum Power Output:	85.0 kW (113 bhp)
Open Market Value:	\$24,749.00
Original Registration Date:	18 Jan 2018
First Registration Date:	18 Jan 2018
Transfer Count:	0
Actual ARF Paid:	\$26,649.00

### Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	17 Jan 2028
PARF Rebate Amount:	\$19,986.00

### Intended COE Rebate Details

COE Expiry Date:	17 Jan 2028
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$41,400.00
COE Rebate Amount:	\$33,120.00
<b>Total Rebate Amount:</b>	<b>\$53,106.00</b>

The information contained herein is correct as at 27 Dec 2018

OK

AXA INSURANCE PTE LTD  
8 Shenlon Way, #24-01  
AXA Tower, Singapore 068811  
Customer Service Centre #B1-01  
Tel:(65)63387288 Fax:(65)63382522  
Website:www.axa.com.sg  
GST Registration Number: 199903512M  
customer.service@axa.com.sg



# CERTIFICATE OF INSURANCE

■ Motor Vehicles (Third-Party Risks and Compensation) Act. (Chapter 189) ■ Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 ■ Road Transport Act, 1987 (Malaysia) ■ Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

**CERTIFICATE NO.** : VPX/P2075911 **Account No. :** 13075  
**Coverage** : Comprehensive  
**Sum Insured** : Market Value At The Time Of Loss  
**Name of Policy Holder** : HITACHI CAPITAL ASIA PACIFIC PTE LTD  
**Vehicle Registration No.** : SLV8532X  
**Period of Insurance** : From 18/01/2018 To 17/01/2019 (Both Dates Inclusive)

## PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE\*

The person who is driving on the basis of order or with their permission.  
Provided that the person driving is permitted in accordance with the licensing or other law of the State 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 with driving the Motor Vehicle.

## RESTRICTIONS AS TO USE:

- (a) Use for the carriage of passengers or goods in connection with the motor vehicle.
- (b) Use for social, domestic and pleasure purposes and business purpose or any person to whom the vehicle is hired.
- (c) Use for racing, price making, reliability trial or speed-testing.
- (d) Use while driving a trailer except one towing (other than for reward) or any one disabled temporarily propelled vehicle.
- (e) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

(04)

## EXCESS:

Section 1 - Any Authorized Driver : SGP 400.00

Exclusions under the Motor Vehicle (Third-Party Risks and Compensation) Act, (Chapter 189), and Rules, 1960, and the Road Transport Act, 1987 (Malaysia), are not to be included under this policy.

This policy is issued in accordance with the Motor Vehicle (Third-Party Risks and Compensation) Act, (Chapter 189), and Rules, 1960, and the Road Transport Act, 1987 (Malaysia), and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued by : ERMEDIA

Signature

The Premium Amount, Being the sum of the premium and the premium tax, shall be payable by the policyholder to the insurer at the time of the issue of the policy and at the time of the renewal of the policy. The premium shall be payable in advance and shall not be refundable. The premium shall be payable in advance and shall not be refundable.

The Premium Amount, Being the sum of the premium and the premium tax, shall be payable by the policyholder to the insurer at the time of the issue of the policy and at the time of the renewal of the policy. The premium shall be payable in advance and shall not be refundable. The premium shall be payable in advance and shall not be refundable.

> Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 27 Dec 2018 / 15:25:41

Receipt Date/Time : 27 Dec 2018 / 15:25:41

## Tax Invoice/Receipt

Receipt No. : ITNET-00000-181227-002364

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
	Result of Insurance Enquiry - SFA3389H As at 24 Dec 2018/20:55:00 Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.			
1	Insurance Enquiry - SFA3389H Enquiry Fee 20181227152352684909	7.00	0.49	7.49
	<b>Sub-Total</b>	7.00	0.49	7.49
	<b>Total Before Rounding</b>	7.00	0.49	7.49
	<b>Rounding Difference</b>			0.04
	<b>Total Amount Payable</b>			7.45
	Paid By			
	xxxxxxxxxxxx4633			
	Credit Card: Visa/MasterCard			7.45
	<b>Total</b>			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

Print Receipt

OK

Save as PDF

# LETTER OF AUTHORIZATION

To ALG and teamwork garage pte ltd (Third party insurance & Workshop)  
 Claimant HITACHI CAPITAL ASIA PACIFIC PTE LTD

Dear Sirs,

I/We, HITACHI CAPITAL ASIA PACIFIC PTE LTD owner of vehicle no. SLV 8532X  
 hereby authorize my/our repairer, TEAMWORK GARAGE PTE LTD  
 act as my/our agent and proceed on behalf for me/us with respect to my/our claim for repair costs and/or  
 rental and/or loss of use ("claim") for my/our vehicle no. SLV 8532X that was damage  
 pursuant to the accident which occurred at/along  
JUNCTION BETWEEN PUNGGOI ROAD TOWARDS  
HOUANG # ~~AVENUE~~ AVENUE 10  
 involving vehicle nos. SFA3389H

I/We hereby irrevocably assign absolutely to you that I/we have authorized and assigned all compensation  
 monies pertaining the above mentioned accident due to me/us to my/our repairer/solicitors  
TEAMWORK GARAGE PTE LTD. I/We hereby authorize you to forward and release  
 all compensation settlement cheques(s) due to the settlement to my/our repairer/solicitors  
TEAMWORK GARAGE PTE LTD pertaining to above said accident whom I/we  
 authorized and assigned to collect the said compensation monies.

I/We further acknowledge that any settlement the workshop may reach on my/our behalf is on a without  
 prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s  
 concerned.

I/We acknowledge that the Discharge Voucher applies only to my/our property damage and will not affect  
 any of the personal injuries claim(s) involved and/or uninsured losses claim in a later date. Further the  
 settlement terms herein should not be used as an evidence to prejudice to any personal injuries claim(s)  
 involved and/or other uninsured losses claim arising of the subject matter in the action.

Thank you.

Dated this 26 day of 12 (month) 20 18 (year)

Signature of owner vehicle (claimant): [Signature]

Name of owner of vehicle (claimant): .....

NRIC Number (claimant): [Signature]

**Bill To:**

AIG ASIA PACIFIC INSURANCE PTE LTD  
AIG BUILDING  
78 SHENTON WAY  
#08-16 SINGAPORE 079120

## Tax Invoice

Invoice number : TI-7106

Date : 09-11-19

Terms : C.O.D.

Vehicle number : SLV8532X

Make / Model : AUDI A3

Description	Amount (S\$)
<p>ACCIDENT INVOLVING SLV8532X / SFA3389H ON 24/12/2018 @ JUNCTION BETWEEN PUNGGOL ROAD TOWARDS HOUGANG AVENUE 10</p> <p>INCLUSIVE OF SUPPLYING PARTS , LABOUR , PANEL BEATING AND SPRAY PAINTING</p> <p>LUMP SUM REPAIR</p> <p>SINGDOLLARS : NINE THOUSAND NINE HUNDRED AND FIFTY-ONE DOLLARS ONLY</p> <p><i>Thank you for your business and have a nice day !</i></p>	\$9,300.00
Reference : 1812-38	Subtotal \$9,300.00
* Cheque payment should be issued in favour to TEAMWORK GARAGE PTE LTD	Add: GST 7% \$651.00
** Please ensure that your vehicle is of good condition upon the point of collection.	Total Inc GST 7% \$9,951.00
E. & O. E	Less: Deposit \$0.00
	Balance Due \$9,951.00





## SATISFACTION & DISCHARGE OF VEHICLE (AFTER REPAIR)

I/We, MOHD HDZIR BIN MOHD ISMM owner/driver\* of vehicle no. SLV 8532X

declare that the repairs of my/our vehicle has been completed and to my/our satisfaction and I/we agree that I/We hereby irrevocable absolutely accept the settlement amount and the liability from the 3<sup>rd</sup> party on the repair costs and/or rental and/or loss of use which are final and that the sum of amount are to be release and payment to TEAMWORK GARAGE PTE LTD for such repairs are in full

discharge of my/our claim in respect of the damages caused in the accident at/along JUNCTION BETWEEN PUNGOL ROAD TOWARDS  
HOUANG AVENUE 10

I/We further acknowledge that any settlement the workshop may reach on my/our behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s concerned.

I/We acknowledge that the Discharge Voucher applies only to my/our property damage and will not affect any of the personal injuries claim(s) involved and/or uninsured losses claim in a later date. Further the settlement terms herein should not be used as an evidence to prejudice to any personal injuries claim(s) involved and/or other uninsured losses claim arising of the subject matter in the action.

Dated this 21 day of Jan (month) 2019 (year) @ 1900hrs.

Signature of owner/ \*driver (on behalf of owner vehicle) : 

Name of owner of vehicle / \*driver (on behalf of owner vehicle) : .....

NRIC Number of owner/ \*driver (on behalf of owner vehicle).....

\* Please note that by signing of this document, the driver's signature will represent the decision/approval and on behalf of the owner which is final and irrevocable.

\* Any amendments make in this form will not be valid unless approved and endorsed by the management of the workshop



# K & t Cars

53 Ubi Ave 1 #01-23 Paya Ubi Ind Park Singapore 408934  
Tel: 6844 5938 Fax: 6285 5228 Email : kntcars@gmail.com  
Biz Reg. No.: 53208965X

No.: 3332

## OFFICIAL RECEIPT

Date: 09/11/2019

Received from HITACHI CAPITAL ASIA PACIFIC PTE LTD

The Sum of Dollars THREE THOUSAND TWO HUNDRED  
AND FORTY DOLLARS ONLY

Being payment of SMG3065C 26/12/2018 - 21/01/2019

\$ 3240

K & t Cars

*[Signature]*



Cheque No.: \_\_\_\_\_

Authorised Signature

# K & t Cars

53 Ubi Ave 1 #01-23 Paya Ubi Ind Park  
Singapore 408934  
Tel: 6844 5938 Fax: 6285 5228  
Email: kntcars@gmail.com  
Biz Reg. No.: 5320865X

## VEHICLE RENTAL AGREEMENT

NO.: KT- 03936

Veh. No.: <u>SLV 8532X</u>	Replace Veh. No.: <u>SMG30656</u>
Veh. M / M: <u>Avi A3</u>	Replace Veh. M / M: <u>Mazda 3</u>

HIRER'S PARTICULAR		DRIVER'S PARTICULAR	
Name: <u>HITACHI CAPITAL ASIA PACIFIC LTD</u>		Name: <u>MOHD HIDZIR BIN MOHD ISMAIL</u>	
Address:		Address: <u>BK 205A COMPASSVALE</u> <u>Lane #02-H S1541205</u>	
I/C: <u>199400399N</u>	D.O.B:	I/C: <u>SG839310H</u>	D.O.B: <u>30/11/1968</u>
Contact:	Pass Date:	Contact: <u>98166470</u>	Pass Date: <u>22/08/1998</u>

	A - ACCIDENT	Hirer's acceptance
	C - CRACKED	
	D - DENTS	Driver's acceptance
	S - SCRATCHES	

RENTAL DETAILS					
Mileage Out		REMARKS	Mileage In		REMARKS
Date Out	<u>26/12/2018</u>		Date In	<u>21/01/2019</u>	
Time Out	<u>1500</u>		Time In	<u>1900</u>	
ASSIGNED BY			CHECKED BY		

RENTAL CHARGES				PETROL / DIESEL LEVEL					
Daily	@ \$	<u>120</u>	<u>27</u> Days @ \$ <u>3240</u>	OUT	E	1/4	1/2	3/4	F
Weekly	@ \$		Wks @ \$						
Monthly	@ \$		Mth @ \$	IN	E	1/4	1/2	3/4	F
Hours	@ \$		Hrs @ \$						
*Inclusive of additional charges (if any)				Petrol Charges YES NO AMT: _____ CDW YES NO AMT: _____ Security Deposit YES NO AMT: _____ Advance Payment YES NO AMT: _____					
Payment: <input type="checkbox"/> CASH <input type="checkbox"/> NETS <input type="checkbox"/> CHQ <input type="checkbox"/> VISA <input type="checkbox"/> MAST Bank / Cheque No.:									

I/We have read and agree to the terms and conditions stated on this page and overleaf. I/We am/are also aware that should there be any parking and/or traffic offence committed during the leasing period when the vehicle is in my/our possession, we will be billed accordingly. Subsequently, our personal details may be tender accordingly to the government parking and/or traffic offence department. With us undersigning below, I/We am/are sure that all information I/We have given to K & t CARS in connection with this agreement are true and accurate.

### IMPORTANT INFORMATION (To be go through by the personnel of K & t CARS to the hirer and/or driver upon leasing of vehicle)

- Only persons above 26 and below 60 years of age with 2 years driving experience, authorised, licensed and signing this agreement may drive the vehicle.
- Vehicle is strictly for Singapore use only and may not be driven out of Singapore without prior consent of the company K & t CARS.
- Use of the vehicle illegal purpose such as in connection with theft, drug peddling or trafficking, smuggling is strictly prohibited.
- Additional drivers are required to register with us before they are allowed to drive the vehicle. Otherwise, he/she will not be protected by the insurance cover.
- The hirer shall be liable for excess charges for any late return of the rate shown per hour or on a per day basis.
- In case of any accident, the hirer MUST report to K & t CARS immediately regardless of the seriousness of the impact occurred. If there are bodily injuries, a police report MUST be made within the next 24 hours.
- In view of all accident, the hirer will bear the full responsibility for the SGD\$3,500/- excess payable to K & t CARS and also the first SGD\$3,500/- excess for damaged to the third party vehicle.

ACKNOWLEDGEMENT	
 Signature of hirer / driver (company stamp if any)	 For and on-behalf of K & t CARS (authorised signature only)

## 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	26/12/2018 17:37
Date Of Accident	24/12/2018 20:55
Exact Location Of Accident	JUNCTION BETWEEN PUNGGOL RD TOWARDS HOUGANG AVE 10
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLV8532X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HITACHI CAPITAL ASIA PACIFIC PTE LTD
Co Reg No	199400399N
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98005643
Alternative Phone No	OFFICE-98166470

### Vehicle Particulars

Manufacturer	AUDI
Model	A3-999CC SEDAN TFSI (A)

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 PRIVATE CAR

### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P2075911
Cover Note Number	

### Driver

Name of Driver	MOHD HIDZIR BIN MOHD ISMAIL
NRIC No	S6839310H
Date Of Birth	30/11/1968
Occupation	INDOOR
Date Of Driving Pass	22/08/1998
Driving Experience	20 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98166470
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 205A COMPASSVALE LANE #02-47 SINGAPORE
Postcode	541205
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - CROSS JUNCTION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
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)	3
Passenger 1	NAME: : MUHAMMAD IZZDINIE BIN MOHD NIDZIR GENDER: : MALE
Passenger 2	NAME: : MUHAMMAD IMAANUL MIRZA BIN MOHD NIDZIR GENDER: : MALE

#### 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 THE ATTACH STATEMENT RECORDED BY PEI WEN - PROGRESSIVE CAR CARE PTE LTD TEL 6741 5336

#### 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	SFA3389H
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)

### Sketch Plan

[illegible]

1. Please report immediately the details of the accident or speed up the claim process.
2. This Form must be completed by the policyholder or the authorised Online.
3. Inform the provided contact person truthful and cooperate as soon as possible. The insured or policyholder's cooperation and facts may allow the insurer to expedite the claims valuation.
4. The issue and handling of this Form is for internal company use only. It is not to be shared with any third parties, including the insurance companies.
5. Any false report may be considered as fraud by the insurer.
6. The report will be forwarded by the insurer to the GIC Benefits Manager or the relevant link of the GIC Value of Insurance Association of Singapore (GIVAS) for further assistance. It will not be used for any other purposes, including any claim process by insureds or insureds.
7. By the judgment of the insurer, a copy of the report may be sent to the relevant authorities, including the police, if the report be not made in good faith.


☐ **K** Consent under the Personal Data Protection Act (PDPA)

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- [illegible]

Polsterholder's signature

DATE: 8/11/77

  
 Robert A. Kohn  
 President, American Chemical Society  
 11 Dupont Circle, N.W.  
 Washington, D.C. 20036

Driver's Signature \_\_\_\_\_

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if driver is not the policyholder;
  Rate = 2.00;

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### Reporting Centre Personnel: Senators

Name: \_\_\_\_\_  
 UBRIC/FIN No: \_\_\_\_\_

### Sketch Plan #2

### DETERMINE CIRCUMSTANCES OF THE RECEIPT

[illegible]

## DECLARATION

Please be advised that your insurer may have a 30 day clause whereby the claim against own policy must be made within the stipulated timeframe from the date of occurrence. Kindly check your policy for more details.

DATE 3 JAN 68 PLE, LTD

Driver's Signature: \_\_\_\_\_  
(I declare as per the policyholder)  
Date & Time: \_\_\_\_\_

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

1. The first step is to identify the problem or issue that needs to be addressed. This involves gathering information and understanding the context of the problem.