NATIONAL Assessment Centre Services. (wef 1 Jan'08) MAA4900140X6

Date In: 28/01/2019 19:29	Job description	Date & Time Completed	Done by
Ref No: X88/NAC4900193914	SAS e-filing		
Veh No: SJS6138D	E-mail (Within 8hrs, AIC 2hrs)		
D.O.A 28/01/2019 17:25	i-Motor Claim Form	M1/103001-001	28/01/2019 19:42
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: SKX2749R. 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 (INCLUDING 6788 6016)	Date/Time Completed	Actions 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

NAC4900810

Claimant's Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:

Cat. 1:

: 2 / 3:

Invoice/Fee Information Checklist	Fee(s) Charged	Remarks / Invoice No.
1) AR : Accident Reporting ($30);		
2) DA : Damage Assessment ($100); INC ($80)		
3) TF : Towing Fee $40/$45		
4) FT : Follow-Through Survey $120		
5) FT : Follow-Through Survey (Resurvey) $30		
For claiming against INC Only (wef 10 Jan 2009) $75		
6) TR : Re-Inspection $160		
7) N1 : Idao DA + SMRT Survey		
8) NTUC Additional Services:-		
OD:		
• N5: Courtesy Car / Tpt Allowance $5		
• N6: Repair Co-ordination $10		
• N7: Post Repair Inspection $25		
• N8: DV / Collect Excess Coordination $5		
TF (N11) : TF (Non INC) against INC $20		
9) N12: Idao Mobile 30		
Invoice dated *Fee Charged*		
Invoice dated *Fee Charged*		

MNA419014026 / National Assessment Centre Services - Bukit Merah
ENTRY DATE & TIME: 29/01/2019 19:29
SUBMITTED BY: ROSLI BIN ABDUL WAHAB

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 witholding 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	29/01/2019 19:29
Date Of Accident	28/01/2019 17:25
Exact Location Of Accident	LORONG KILAT (OUTSIDE NO:12 AND 10A)
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJS6138D
Insured/Policyholder	
Name Of Registered Owner	LITTLE WHEELS PTE LTD
Co Reg No	201833015D
Email Address	A.ANDREW.C@GMAIL.COM
Mobile Phone No	(LOCAL) +65-93621303
Alternative Phone No	OFFICE-87534800
Vehicle Particulars	
Manufacturer	FORD
Model	MONDEO
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5106804607
Cover Note Number	
Driver	
Name of Driver	CHANG CHEE SENG (ZHENG ZHICHENG)
NRIC No	S7500091Z
Date Of Birth	09/01/1975
Occupation	INDOOR
Date Of Driving Pass	30/09/1993
Driving Experience	25 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93621303
Fax Number	
Contact Number	OTHERS-87534800
EMail Address	A.ANDREW.C@GMAIL.COM

Address	12 LORONG KILAT
Postcode	598118
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	COLLIDED INTO PARKED VEHICLE
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)	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	SKX2719R
Vehicle Make/Model/Colour	TOYOTA PRIUS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TING YEH
NRIC/Passport Number	S7732201I
Contact Number	98204759
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

IMPORTANT NOTICE

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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.

X

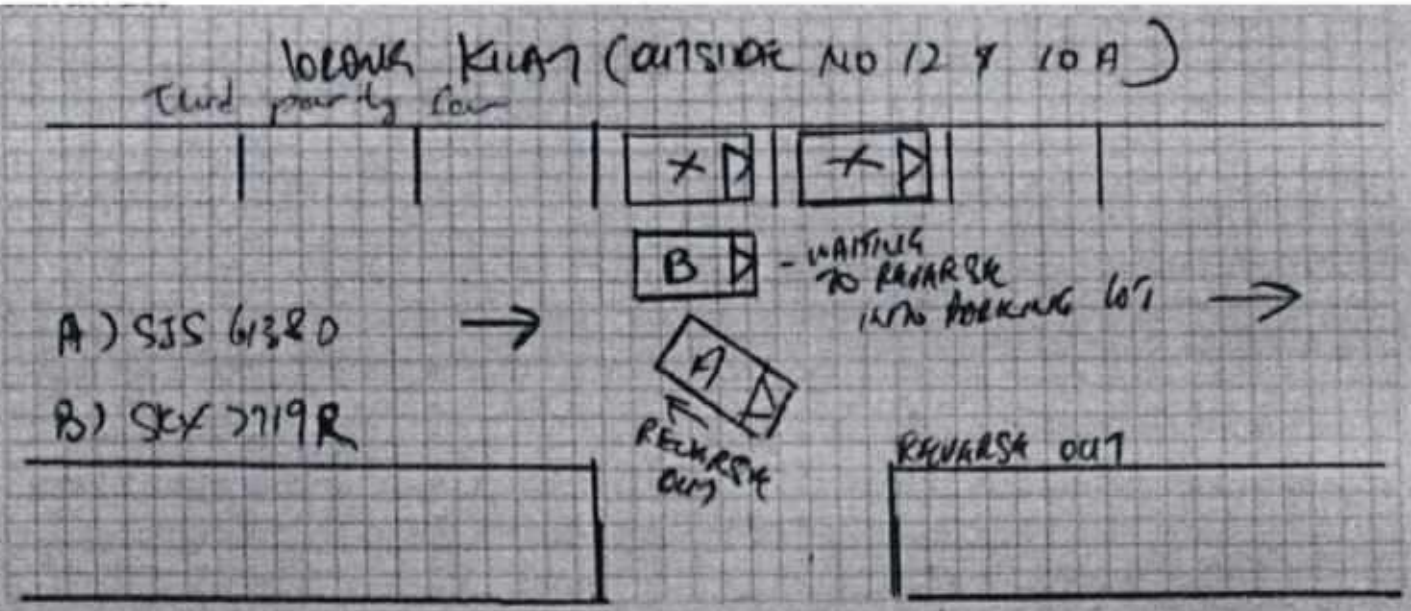
LITTLE WHEELS PTE. LTD.

Policyholder's Signature
Date & Time: 29th January 2019 1700 hours

Driver's Signature
(If driver is not the policyholder)
Date & Time: 29/01/2019 04:23 pm.

29/01/2019

Repairing Centre Personnel's Signature
Name: Rosli Mathos
NRIC/FIN No.:



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT [illegible]

I reverse out from my home at 12 Lorong Kilat and the bumper of my car knocked into the driver side door of the third party who was parked by the roadside waiting to reverse into a roadside parking lot.

DECLARATION

I/We declare the foregoing [illegible] are true in every respect.

X.

LITTLE WHEELS PTE LTD

Policyholder's Signature
Date & Time: 29th January 2019 1700 hours

Driver's Signature
(If driver is not the policyholder)
Date & Time: 29/01/2019 4:23 pm

29/01/2019

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

Claim Handling

The premium on this policy has not been collected.

Accident MT/1030091

Policy No.	3106804607	Vehicle No.	S3561380	GST Registration No.	
Certificate No.					
Policyholder Name	LITTLE WHEELS PTE LTD			Policyholder NRIC	201833515D
Product Code	FLEET INSURANCE	Cover Type	Third Party	Loading	0
Contact No.(Mobile)	93621303	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KPK	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

Accident Details

Report Date	29/01/2019 19:36	Accident Report Within 24 hrs	Yes	Accident Type	Collided into Parked Vehicle
Date of Accident	28/01/2019	Time of Accident hh:mm	17:25	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	LORONG KILAT (OUTSIDE NO:12 AND 10A)				

Excess

Own damage Excess	0.00	Additional Excess	0	Windscreen Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess	0.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		

Benefits

GST Registered Information

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

Policyholder Mailing Address

Address 1	22 SIN MING LANE	Address 2	#06-76 MIDVIEW CITY	Address 3	SINGAPORE 573969
Address 4		Address Type	Singapore address	Post Code	573969
Unit No.	06-76	Related Policy Number	3106804607		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	CHANG CHEE SENG (ZHENG ZH	Driver NRIC	S7500091Z	Driver DOB	09/01/1975
Register Date of Driver License	30/09/1993	Driver Age	44	Driving Experience	25
Contact No.(Mobile)	87534800	Contact No.(Office)		Contact No.(Home)	
Address 1	12 # LORONG KILAT	Address 2	SINGAPORE 598116	Address 3	
Address 4		Address Type	Foreign address	Post Code	598116
Unit No.					
Does he own a Singapore Registered car?	Yes No	Driver Vehicle No.	SJS6138D	Driver Insurer Company	NTUC

Declaration

Breathaliser or Blood Test Reading?	0 mg	Any Injury?	Yes No

Modification History

Claim 001 New

Claim Handling

The premium on this policy has not been collected.

Accident MT/1030091

Policy No.	3106804607	Vehicle No.	S3561380	GST Registration No.	
Certificate No.					
Policyholder Name	LITTLE WHEELS PTE LTD			Policyholder NRIC	201833515D
Product Code	FLEET INSURANCE	Cover Type	Third Party	Loading	0
Contact No.(Mobile)	93621303	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KPK	No Yes	TCA	No Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

Accident Details

Report Date	29/01/2019 19:36	Accident Report Within 24 hrs	Yes	Accident Type	Collided into Parked Vehicle
Date of Accident	28/01/2019	Time of Accident hh:mm	17:25	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	LORONG KILAT (OUTSIDE NO:12 AND 10A)				

Excess — **Total Excess Applicable**

Own damage Excess	0.00	Additional Excess	0	Windscreen Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess	0.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		
Excess Type		Windscreen Excess	0.00		
All Claims Excess					
YIED All Claim Excess		Driver is Covered?			
Total All Claim Excess Applicable					
OD Standard Excess		TP Standard Excess			
YIED OD Excess		YIED TP Excess		Driver is Covered?	
Additional Excess	0.00				
Total OD Excess Applicable		Total TP Excess Applicable			

Benefits

GST Registered Information

Policyholder Mailing Address

Address 1	22 SIN MING LANE	Address 2	#06-76 MIDVIEW CITY	Address 3	SINGAPORE 573969
Address 4		Address Type	Singapore address	Post Code	573969
Unit No.	06-76	Related Policy Number	3106804607		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	CHANG CHEE SENG (ZHENG ZH	Driver NRIC	S7500091Z	Driver DOB	09/01/1975
Register Date of Driver License	30/09/1993	Driver Age	44	Driving Experience	25

Contact No.(Mobile)	87534800	Contact No.(Office)		Contact No.(Home)	
Address 1	12 # LORONG KILAT	Address 2	SINGAPORE 598116	Address 3	
Address 4		Address Type	Foreign address	Post Code	598116
Unit No.					
Does he own a Singapore Registered car?	Yes ● No	Driver Vehicle No.	SJS6138D	Driver Insurer Company	NTUC

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	Yes ● No

Modification History

Claim 001 OD-MX | **New**

Claim Type *	OD-MX	Insured Name	LITTLE WHEELS PTE LTD	Insured NRIC	201833015D
Contact No.(Mobile)	93621363	Contact No. (Home)		Contact No. (Office)	+
Email Address		OI Vehicle Number	SJS6138D	TP Vehicle Number	SKX2719R
Claim Description	SJS6138D / SKX2719R ON 28 Jan 2019			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability	Fully at Fault		
Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	29/01/2019 19:42	Claim Close Date		Date Received	29/01/2019 00:00
Report Taken By	ROSLI WAHAB	Workshop Repairer		Total Loss but Repaired	

✓ Print AK letter

Save | Submit

Attachment

Accident No.	MT/1030091	Claim No.	001
Last Doc. Received	● Yes ○ No	Upload Date	29/01/2019 19:42

Path *		Category *	Confidential	Urgency *	Description *
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	
Choose File No file chosen	Clear	Please Select	NO	Normal	

Message Read

Send Message

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CD)
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 29 Jan 2019 19:42	Photos	Normal	Photos 2019-1-29	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 29 Jan 2019 19:42	Photos	Normal	Photos 2019-1-29	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 29 Jan 2019 19:42	Photos	Normal	Photos 2019-1-29	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 29 Jan 2019 19:42	Photos	Normal	Photos 2019-1-29	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 29 Jan 2019 19:43	Photos	Normal	Photos 2019-1-29	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 29 Jan 2019 19:42	Photos	Normal	Photos 2019-1-29	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 29 Jan 2019 19:42	Photos	Normal	Photos 2019-1-29	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 29 Jan 2019 19:42	Photos	Normal	Photos 2019-1-29	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 29 Jan 2019 19:42	SAS	Normal	SAS 2019-1-29	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 29 Jan 2019 19:42	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-1-29	

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action

Display in New Window | Scan and uploading

ACCIDENT STATEMENT

ACCIDENT DATE: (28/01/2019) (DD/MM/YYYY). TIME: (17:25) (HH:MM)

LOCATION: Lorong Kilat (outside No. 12 and 10A)

1. DETAILS OF VEHICLE
   a) VEHICLE NUMBER: SJS6138D
   b) INSURANCE COMPANY: NTUC INCOME
   c) POLICY NUMBER: 516804607
   d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE &THEFT)
   e) MAKE & MODEL: Ford
   f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
   g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
   h) PURPOSE OF USING AT ACCIDENT TIME: Private use
   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: Little Wheels Pte Ltd (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: 2018378015D CONTACT: 93627303 (Kenneth)
   c) ADDRESS: email: Kenneth_lauw@hotmail.com

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

*No of passenger (including driver) (1)

3. DRIVER
   a) NAME: Chang Chee Seng (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: S7500091Z CONTACT: 87534800
   c) ADDRESS: 12 Lorong Kilat, S598116
   *d) DATE OF BIRTH: (09/01/1975) (DD/MM/YYYY)
   e) OCCUPATION: (INDOOR / OUTDOOR)
   f) DATE OF DRIVING PASS 30/09/1993
4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
   IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: Hirer
5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS Clear)
   b) ROAD SURFACE: (DRY / WET / OTHERS Dry)
6. WAS ANYBODY INJURED (YES / NO)
7. a) REPORTED TO POLICE (YES / NO)
   IF YES, PLEASE STATE WHICH POLICE STATION:
8. THIRD PARTY VEHICLE

* No of passenger (including driver) (1)

   a) VEHICLE NUMBER: SKX2719R MODEL: Toyota Prius
   b) DRIVER'S NAME: Ting YEH
   c) NRIC/FIN/PASSPORT: S7732201I CONTACT: 98204759
9. THIRD PARTY VEHICLE

* No of passenger (including driver) (1)

   d) VEHICLE NUMBER: MODEL:
   e) DRIVER'S NAME:
   f) NRIC/FIN/PASSPORT: CONTACT:

email = a.andrew.c@gmail.com

VIDEO

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7500091Z

Name

CHANG CHEE SENG
(ZHENG ZHICHENG)

郑 旨 程

Race
CHINESE

Date of birth
09-01-1975

Sex
M

Country/Place of birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

S7500091Z

CHANG CHEE SENG
(ZHENG ZHICHENG)

Birth Date: 09 Jan 1975

Issue Date: 21 Feb 2018

5887817

NRIC No. S7500091Z

Date of issue
21-02-2018

12 LORONG KILAT
SINGAPORE 598116

NRIC No: S7500091Z Date: 11/06/2018

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

		EFFECTIVE DATE
Class 3	Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg	30 Sep 1993

NP 428A

Licence No:S7500091Z

eBaoTech

GeneralClaim

Hello, NAC_BUKIT_MERAH_800676

· Change Language · Change Password · Log Out

My Desktop

Notice of Loss

Policy Query

Policy No.

Vehicle No.(For Motor) SJS6138D

Date of Accident 28/01/2019 16:15

Certificate Number

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
○	5106804607		LITTLE WHEELS PTE LTD	201833015D	GFT	Third Party	SJS6138D	SJS6138D	04/01/2019	

Continue