

11/20

Hello, NAC_PAYA_UBI_800601

Change Language Change Password Log Out

My Desktop
Notice of Loss

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="18/02/2019 21:30"/>
Vehicle No.(For Motor)	<input type="text" value="SMA1458Y"/>	Certificate Number	<input type="text"/>

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5101572315		CHEN JUNLI	S8851407F	GPC	drive CLASSIC	SMA1458Y	SMA1458Y	22/06/2018	22/06/2019

Continue

▼ Policy Information

Policy No.	5101572315	Policyholder Name	CHEN JUNLI	Policyholder NRIC	S8851407F
Certificate No.					
Address	BLK 407 #10-47 PANDAN GARDENS SINGAPORE 600407				
Product Name	PRIVATE CAR INSURANCE	Plan	Group Policy Flag N		
Policy issue Date	22/06/2018	Effective Date	22/06/2018 00:00	Expiry Date	22/06/2019 23:59
Third Party Excess	0	Own damage Excess	600	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	600	Outside Singapore TP Excess	0		
Agent	INSMART (INSURANCE) AGENCY	Agent Tel.	68420766	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	BLK 407 #10-47	Address 2	PANDAN GARDENS	Address 3	SINGAPORE 600407
Address 4		Address Type	Singapore address	Post Code	600407
Unit No.	10-47	Related Policy Number	5101572315		

► Insured Object: SMA1458Y

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
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TP Claims against NTUC Income: Follow-Through Survey

21/2/2019

S/NO	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.	D.O.A	Estimate	Tentative repair cost
1	MT/1030932-002	COMFORT TRANSPORTATION PTE LTD	SHC 1958U	SLL 8181C	4/2/2019	\$8,566.83	\$2,244.29
2	MT/1031940-002	COMFORT TRANSPORTATION PTE LTD	SHA 3694C	SJL 3650Y	5/2/2019	\$1,785.68	\$900.00
3	MT/1033052-001	COMFORT TRANSPORTATION PTE LTD	SHA 3749D	GBH 6126R	15/2/2019	\$850.00	\$350.00
4	MT/1033055-001	COMFORT TRANSPORTATION PTE LTD	SHD 3199A	SLF 3432T	14/2/2019	\$2,399.06	\$1,200.00
5	MT/1031629-002	COMFORT TRANSPORTATION PTE LTD	SH 8548S	SJJ 8434H	12/2/2019	\$6,822.16	\$2,750.00
6	MT/1031383-002	COMFORT TRANSPORTATION PTE LTD	SHD 3198C	SJU 9736Y	9/2/2019	\$1,829.12	\$550.00
7	MT/1032845-002	COMFORT TRANSPORTATION PTE LTD	SHD 4145Z	SMA 1458Y	18/2/2019	\$2,574.90	\$1,000.00
8	MT/1033061-001	COMFORT TRANSPORTATION PTE LTD	SH 9493J	SJS 8276A	15/2/2019	\$5,712.08	\$2,750.00

Claim received from LKK Auto

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	19/02/2019 14:13
Date Of Accident	18/02/2019 21:30
Exact Location Of Accident	CHOA CHU KANG WAY TOWARDS CHOA CHU KANG NORTH 6
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SHD4145Z
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	SONATA
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	TAXI
Insurance Company	
Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	
Driver	
Name of Driver	GOH KEE THONG
NRIC No	S1518231H
Date Of Birth	11/09/1962
Occupation	OUTDOOR
Date Of Driving Pass	23/09/1980
Driving Experience	38 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90609800
Fax Number	
Contact Number	
Email Address	KEETHONG@SINGNET.COM.SG

Address	BLK 535 HOUGANG STREET 52 #07-14
Postcode	530535
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
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?	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: : - GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	CHANGKAT NPP
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO POLICE REPORT : T/20190219/2050

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMA1458Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHEN JUN LI
NRIC/Passport Number	S8851407F
Contact Number	
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD

Nature Of Damage

FRT

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

GOH KEE THONG

Approximate Age

56

Injuries Sustain

NOT FEELING WELL. ON 5 DAYS MC.

Injured person in which vehicle?

SHD4145Z

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

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.

CONFIDENTIAL TRANSFORMATION PTE LTD
CO REG NO 19930321R

Policyholder's Signature
Date & Time:

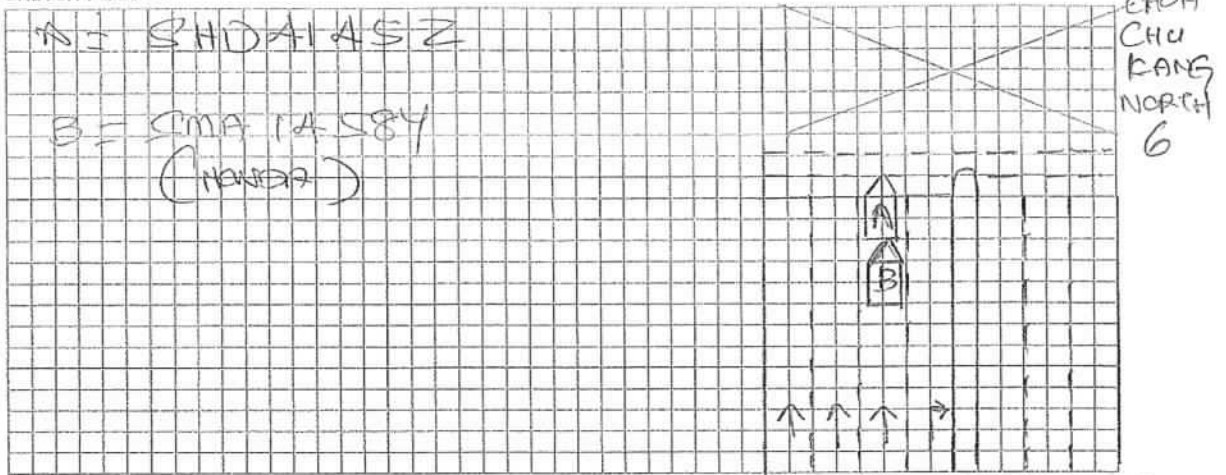
Driver's Signature
(If driver is not the policyholder)
Date & Time:

Olivia Wendy

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.: 19 FEB 2019

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

CHOA CHU KANG WAY

Police Report as per attached. (u)

1/2019 02 19 / 2050

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CO. SEC NO. 19269321R

Policyholder's Signature
Date & Time:

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

Olivia Wendy

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

19 FEB 2019



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Changkat NPP
109 Tampines Street 11 #01-261
SINGAPORE 521109
Tel No: 1800-7819999



T/20190219/2050

1 of 4

Report No. T/20190219/2050

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/02/2019 12:22	Vide Report No.:	Station Diary No.: 9
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Informant's Particulars				
Name of Informant: GOH KEE THONG		Address: APT BLK 535 HOUGANG STREET 52 #07-14 SINGAPORE 530535		
ID Type / ID No.: NRIC NO / S1518231H		Contact No.: Home/Office: Mobile: 90609800		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 56	Date of Birth: 11/09/1962	Type of Informant: Driver	
Race: Chinese		Language:		Institution / School Name:
Occupation: Taxi driver		Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/02/2019 21:30	Type of Location: T-Junction
Location: Along Road 1 CHOA CHU KANG WAY CHOA CHU KANG NORTH 6				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
SHD4145Z	Car	HYUNDAI	SONATA NF 2.0 CRDI AT ABS 2WD 4DR TURBO	Blue	Slightly Damaged	1
SMA1458Y	Car	HONDA	VEZEL 1.5X AUTO	Silver	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20190219/2050

2 of 4

Police Station Of Origin:
Changkat NPP
109 Tampines Street 11 #01-261
SINGAPORE 521109
Tel No: 1800-7819999

Report No. T/20190219/2050

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date
SHD4145Z	INDIA INTERNATIONAL INSURANCE PTE LTD	MCOM0015	01/01/2018	31/12/2020

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	GOH KEE THONG	ID No.	S1518231H
Related Vehicle	SHD4145Z (Car)	Contact No.	90609800
Hospital/Clinic	SUNSHINE CLINIC FAMILY PRACTICE & SURGERY	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	19/02/2019	Date Discharge	19/02/2019
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	CHEN JUN LI	ID No.	S8851407F
Related Vehicle	SMA1458Y (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 18/02/2019 at 2130hrs, I was driving my taxi together with a female passenger along Choa Chu Kang Way toward Choa Chu Kang North 7. When I was approaching the traffic light junction, I slowed down my vehicle as the traffic light was showing amber, I then came to a complete stop behind the stop line. That was when I felt a sudden impact from the rear, the impact cause my taxi to move forward and after which I saw a bright flash which I believe came from the traffic camera from the side of the road.

I then got out of my vehicle and made a check on the damages of my car and I found scratches on the rear bumper. I then exchange particulars from the driver of SMA1458Y and we went on our way. My passenger told me that she will walk the rest of the way while I drove to my workshop at Loyang Way. I am not sure what is the cost of repair. On the 19/02/2019, I went to the doctor as I was not feeling well. The doctor gave me 5 days of Medical Leave and told me to rest.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Changkat NPP
109 Tampines Street 11 #01-261
SINGAPORE 521109
Tel No: 1800-7819999



T/20190219/2050

3 of 4

Report No. T/20190219/2050

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20190219/2050

Police Station Of Origin:
Changkat NPP
109 Tampines Street 11 #01-261
SINGAPORE 521109
Tel No: 1800-7819999

4 of 4

Report No. T/20190219/2050

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

G /

Sgt 3 MUHAMAD ZHAERI BIN REJAB

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

19/02/2019 12:22

Officer In Charge Of Case:

TP / AEIT /

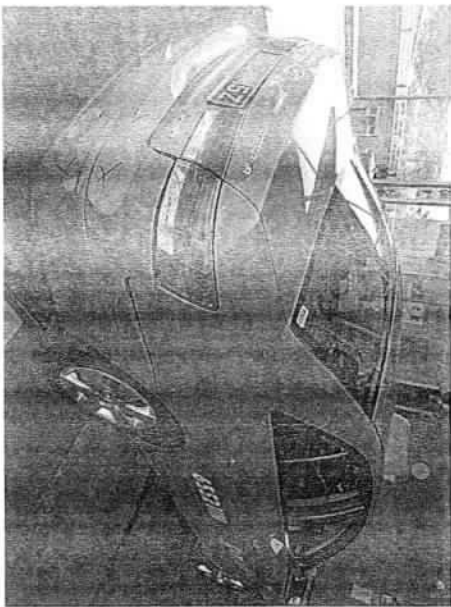
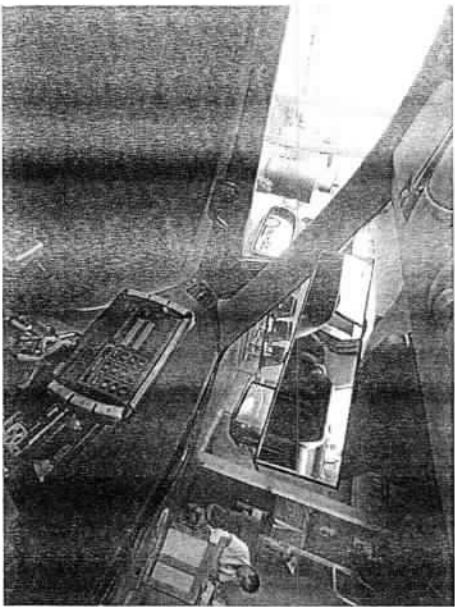
Sr Staff Sgt MOHAMAD ZULFAZDLI BIN
ABDULLAH

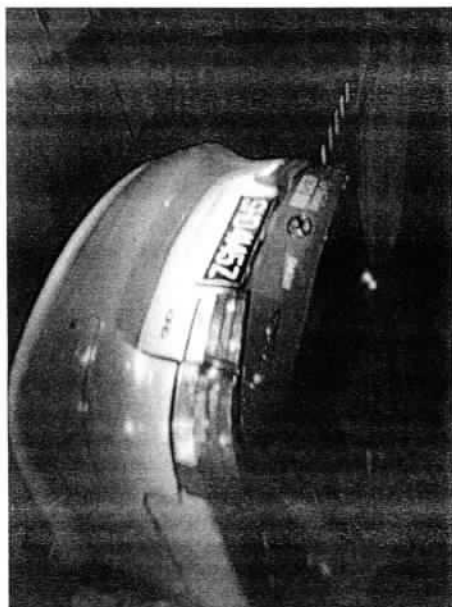
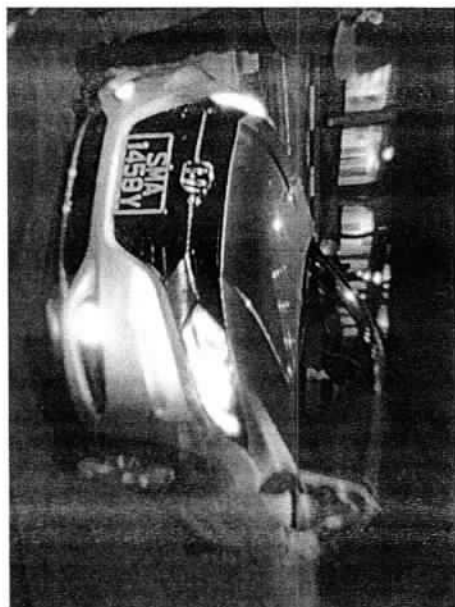
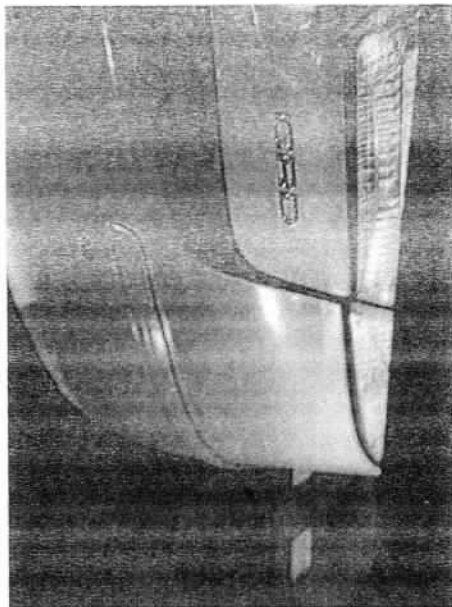
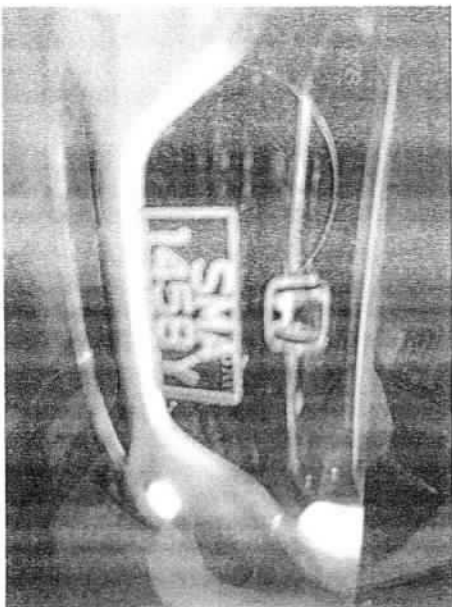
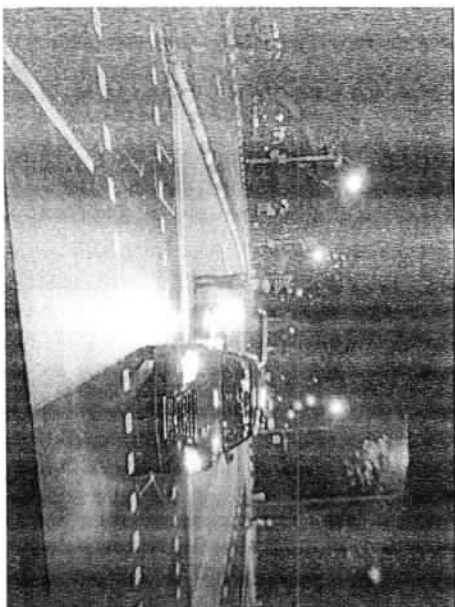
Contact No: 65476204

Classification Of Case:

Authentication Stamp

NP168

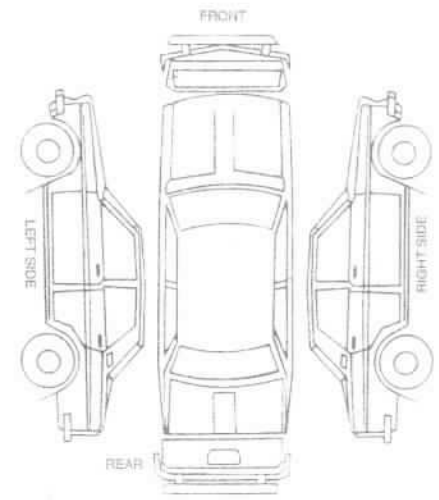




Team: ARC Repair TP(CLSO)1 JOB CARD Sales Order: JC NO.: 305270520

MEMBER NO. 383 SIN MING DRIVE Singapore SINGAPORE 575717 65508755 (O)	REGN NO.: SHD4145Z	MILEAGE
	MAKE: HYUNDAI	FUEL E.....1/2.....F
	MODEL SONATA	DATE/TIME IN 18.02.2019 23:00
	YR OF MANU 27.04.2012	TARGET DATE
	CHASSIS CODE KMHE41VMCA824534	COMPLETION DATE/TIME:
	UNT CARD NO.	

Accident Date: 18.02.2019
NATURE: 3P 18.02.19 -

S/NO	LABOR CODE	DESCRIPTION
		

KED & PASSED OUT BY: _____

SERVICE ADVISOR _____ CUSTOMER'S SIGNATURE _____

edgement Slip	Exit Pass
No.: SHD4145Z JU NTUC LKK	Vehicle No.: SHD4145Z
Service Advisor _____	Name of Service Advisor _____
Signature/Date _____	Date _____
turned to Service Reception upon collection.	To be kept by Security Guard

NOTE - Ju

VEHICLE NO : SHD 4145Z

DATE 19/2/2019 15:09

MAKE :

MODEL : HYUNDAI SONATA

Page 1 of 1

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508969
Fax: 6546 8156

Date : 20/02/2019

Fax :

Date of Accident : 18/02/2019

2. The finalized amount shall be:

Total for Part-By-Part Repair Cost _____

(c.)	Lumpsum Repair (if applicable)		
	Total for Lumpsum repair cost after Less:	20%	\$1,000.00
	Final Lumpsum Repair cost		

3. Estimated normal period for repairs: 2 working days

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature: _____

Name : Kahr

Date : 21/2/19

Fax : 65468156

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		N		
3. Survey Fees				
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:



National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC19003234/K1sd3e2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 22-02-2019

189556



Code: INC4

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	SMA 1458Y	Veh. Inspected	SHD 4145Z
Policy No.	5101572315	Coverage (\$)	0.00
Claim No.	MT/1032845-002	Excess (\$)	0.00
Assign From		Assign Date	19/02/2019

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI SONATA	c.c	1991
Engine No.	HIDDEN	Year of Reg.	2012
Chassis No.	KMHET41VMCA824534	Colour	BLUE
Odometer	372687	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	215/60 R16	HANKOOK	7 mm
L/H Front Tyre	215/60 R16	HANKOOK	7 mm
R/H Rear Tyre	215/60 R16	HANKOOK	7 mm
L/H Rear Tyre	215/60 R16	HANKOOK	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE REAR O/S PORTION. DAMAGES SEE DETAILS.
--

5. General Information

Accident Date	18/02/2019	Inspection Date	19/02/2019
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
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**National Assessment Centre Services**

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



Page No.:1 of 2

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 4145Z

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<u>REPLACEMENT OF PARTS</u>				
1	BOOT LID SONATA PLATE	NOT NECESSARY	43.60	-
1	BOOT LID HYUNDAI PLATE	NOT NECESSARY	24.20	-
1	BOOT LID 'H' EMBLEM	NOT NECESSARY	26.10	-
1	BOOT LID CRDI PLATE	NECESSARY	22.70	22.70
1	REAR BUMPER	DEFORMED	578.40	578.40
1	REAR BUMPER REINFORCEMENT	SERVICEABLE	483.30	-
1	REAR BUMPER CLIP	NECESSARY	22.00	22.00
1	REAR BUMPER SPONGE	SERVICEABLE	137.40	-
1	REAR BUMPER UNDER COVER	SERVICEABLE	185.80	-
1	REAR BUMPER PROTECTOR (RH)	TO REPAIR SEE LABOUR	38.00	-
	LESS 20% DISCOUNT		-312.30	-124.62
			1,249.20	498.48
<u>SPECIAL NETT ITEMS</u>				
1	BOOT LID COMFORT LOGO & TEL NO. STICKER (SN)	NOT NECESSARY	30.00	-
1	REAR BUMPER REVERSE SENSOR (SN)	SHORTED	135.70	135.70
			165.70	135.70
<u>LABOUR</u>				
	PANEL BEATING. INCLUSIVE OF THE REPAIR OF REAR BUMPER PROTECTOR (RH).		400.00	200.00
	SPRAY PAINTING CHARGE.		600.00	400.00
	WIRING CHARGE.	NOT NECESSARY	30.00	-
	TUFF KOTE.	NOT NECESSARY	50.00	-
	REMOVE / REFIX REVERSE SENSOR.		80.00	30.00
			-	-
			-	-
			1,160.00	630.00
GRAND TOTAL			2,574.90	1,264.18
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION) (CONFIRMED)				1,000.00

Report Ref No. NS/INC19003234/K1sd3e2

Report Ref No. NS/INC19003234/K1sd3e2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator



K.K.LAU CPT(RET)

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

REGD Auto Consultant-SAE, Licensed Appraiser

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No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.