

INSURANCE

INS. CASE OWNER

CC 4 / EQ1900 6150, T2 job

LKK IDAC

Surveyor:

Taufik

DOI

ASSIGNMENT

8/4/14

Date / Time:

8/4/14

Registered in Meritex:

Pre-assign / CCU / FTE



Insured Vehicle No. :

GDB 40674

Claim No. :

Name of Insured :

OFFER & SAVE SUPERSTORE

Policy No. :

OMP11218-023417

Insured Tel No. :

HP:

Make / Model :

Hymu DRT

Excess Sec II : \$

D.O.A :

5/4/14

Place of Accident :

EJE

Is driver the owner? (YES / NO)

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

wah hong

OI GIA REPORT: YES / NO :

TP GIA REPORT: YES / NO

Driver Tel No. :

(V/L YES / NO)

Insured Liability :

% Final ? Yes / No

8/4/14



INSRS: WSP: Tel: Liability: RMKS:

wah hong



INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:



INSRS: WSP: Tel: Liability: RMKS:

Date/Time	STAGE	DATE / PIC
8/4/14	Non-Reporting hr (1st)	
	Non-Reporting hr (2nd)	
	Non-Reporting hr (Final)	
	Notification hr (if non-pickup)	
	Call OI:	12-4-19 JUN
	After call hr to OI:	
	Documentation Check List:	Handler Typist
	Notification hr (if non-pickup)	<input checked="" type="checkbox"/>
	After call hr to OI:	<input checked="" type="checkbox"/>
	Authorisation To Act:	<input checked="" type="checkbox"/>
	Release Voucher:	<input checked="" type="checkbox"/>
	Final Repair Bill:	<input checked="" type="checkbox"/>
	Car Rental Invoice:	<input checked="" type="checkbox"/>
	Towing Invoice:	<input checked="" type="checkbox"/>
	LTA / GIA:	<input checked="" type="checkbox"/>
	Medical Bill:	<input checked="" type="checkbox"/>
	PIR:	<input checked="" type="checkbox"/>
	Mandate/Reject Instruction:	<input checked="" type="checkbox"/>
	LOD:	<input checked="" type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/>
	Post-Repair Photos:	<input type="checkbox"/>
	Others:	<input type="checkbox"/>

PRELIMINARY ADVICE Date/Time: Sent By:

FINALIZATION Date/Time: Confirm with Confirm by:

Repair Cost: \$5 (days) Reduction: % Email Call

FINAL SETTLEMENT Date/Time: 21/5/14 Confirm with TEE Email Call

Final Liability: % 100 (Agree / Assessed) BOLA S/N No. : 15

Repair Cost: GST \$5 1,605

Loss of Rental (LOR): \$5 (days)

Loss of Use (LOU): \$5 200 (50 x 4 days)

Loss of Income (LOI): \$5 (5 x days)

LOR only LOU only LOR + LOU LOR + LO [Tick only one]

GIA/LTA Search: \$5 -

Medical: \$5 -

Disbursement: \$5 - (e.g. Tow/Independent)

Legal Cost: \$5 -

Total: \$5 1,805 Global Sum \$5:

FINAL PAYMENT Date/Time: Confirm with Email Call

Payee 1: \$5 1,805 Name 1: WAH HONG MOTORS & CREDIT PTE LTD

Payee 2: (Strike if N.A.) \$5 X Name 2: X

Payee 3: (Strike if N.A.) \$5 X Name 3: X

BODY BENT

OK

Synoptic Transfer

REF:

4169 EQ

ASSIGNMENT

SSS9661L

COE 2028 Sep

From: _____ Date: **4.2019**

Estimated Cost: _____

OD: WS / TP RES / OD RES / EVA / INV / MV

To inspect Vehicle No: _____

at Workshop m/s: _____

of: _____

Insured: _____

Policy No: _____

Claims No: _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

Veh No: _____ Yr Regn: **2008 / Sep**

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

Make: **Mitsubishi Lancer cc 1499**

Colour: **Blue** AC: **Insured / Std / NI / NA**

Sp.Reading: **121251** T/Radio: **Insured / Std / NI / NA**

Eng/No: _____

C/No: **JMG SRC Y2A8400 7835**

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modi: Nil / SRim / STD A/Rim or

Tyre Size: F: **205/60R16**

R: _____

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

Front	Rear
R/Bal: 6 mm	R/Bal: 6 mm
L/Bal: 6 mm	L/Bal: 6 mm
D.O.A.	D.O.I: 8/4/19

Survey held at: **Wah-Hong**

Des. of Damages: **Frt / Rear / O/S / N/S / U/C / Rooftop or o/s Rear.**

The U/C / Chassis frame / Body Structure affected due to collision.

(Policy Condition)

Remark: **The veh had commenced its repair at the time of inspection.**

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? **Yes or No**

GIA / PR Seen: _____ Consistent? **Yes or No**

Est. Repairs: **4** days Res.: **Yes or No**

Lum Sum: _____ % 3 Val: **Yes or No**

CA / REV / REP. / 24 HRS: **3330 pm**

Date: _____ Person Contacted: **Michael** Vehicle: **IN / OUT**

Date / Time	Action / Instruction
	38 Tok Guan #4-57
17-4-19	L/S \$1,500
	R (\$1510/2590)

Date/Time, File Pass to? : Prel. Report : Final Report

1) _____

Date/Time, File Return to? _____

2) _____

Report Format: _____

Lump Sum / I.B.I: (\$ _____)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: Site Insp (\$ _____) Interview (\$ _____) Tech. Invs (\$ _____) Weekend (\$ _____)

Survey Fee: _____

Transportation: _____

Other: _____

TOTAL: _____



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

511 BEAVE L, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL: (065) 62563561 FAX: (065) 62564315

Your ref: To Be Advised
Our ref: CC4/EQ119006150/T1jb3

Date: 10.04.2019

The Motor Claims Department
M/s EQ INSURANCE COMPANY LTD

Dear Sir/Madam,

PRELIMINARY ADVICE OF VEHICLE NO.

SJJ9661L

We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 08.04.2019 at the premises of M/s Wah Hong Motors & Credit Pte Ltd and have the following to report:-

Workshop Estimate Amount	: S\$	<u>2,010.00</u>
Revised Estimate Amount	: S\$	<u>1,810.00</u>
"Check" Items Amount	: S\$	-
Market Value	: S\$	-
LTA Reimbursement Value	: S\$	-
Nett Value	: S\$	-

Description of Damage:

The vehicle sustained damages at the
O/S Rear portion



Comments/Present Status:

Damages Consistent

Estimated normal period for repairs: 4 days

Yours faithfully,

MOHD. TAUFIKH
Licensed Appraiser



Name: TOH ENG WAH
 Address: Blk 550 Choa Chu Kang St 52 #10-59
 Singapore 680550
 Policy Number: DMCPHQ18-006084
 Quotation for Reinstatement / Repairs for Vehicle

Date: 5/4/19
 Vehicle No: SJJ9661L

Parts Replacement-Cost Price
 1 Pc Rear R/H Door

Cost Price
 \$ 936.67 ✓

LXX Auto Components hence notify the Repairer of the following:

- To survey before/after spray painting
- To display damaged part(s) during survey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No legal modification(s) is allowed
- Supplementary item(s) must be surveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
 Signature:
 Date:

1 job To remove and replace all the parts mentioned above and knocking and straighten up the necessary affected areas \$ 500.00 400.
 1 job To spray painting on affected areas \$ 650.00 550.

7. Remove & Replace door mechanism \$160 ✓
 Labour's Total: \$ 1,150.00
 Sub-Total: \$ 2,010.00
 GST 7%: \$ 140.70
 Grand Total: \$ 2,150.70

1852.40
 1500.

Tan Jiah 9749 5149 4 days
 4/4/19 @ 3:20 pm
 Reony after repair
 together @ 11:00 am
 4 days


 Michael Tee
 Wah Hong Motors & Credit Pte Ltd
 Tel: 67737377
 Fax: 68966321
 Email: michael@wahhong.sg



Name: TOH ENG WAH
 Address: Blk 550 Choa Chu Kang St 52 #10-59
 Singapore 680550
 Policy Number: DMCPHQ18-006084
 Quotation for Reinstste / Repairs for Vehicle

Date: 5/4/19
 Vehicle No: SJJ9661L

Parts Replacement-Cost Price		Cost Price
1 Pc	Rear R/H Door	\$ 860.00 <i>bt ✓</i>

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company

Acknowledged by Repairer
 Signature:
 Date:

1 job		\$ 860.00
	To remove and replace all the parts mentioned above and knocking and straighten up the necessary affected areas	\$ 500.00 <i>400</i>
1 job	To spray painting on affected areas	\$ 650.00 <i>550</i>

Labour's Total : \$ 1,150.00
Sub-Total : \$ 2,010.00
GST 7% : \$ 140.70
Grand Total : \$ 2,150.70


 Michael Tee
 Wah Hong Motors & Credit Pte Ltd
 Tel: 67737377
 Fax: 68966321
 Email: michael@wahhong.sg

Tanflin 97495749
WP
4/4/19 @ 3:20pm
Resurvey after repair
tanflin @ 11kntown
4 days

Joy Irene (LKKAuto)

From: Taufikh (LKKAuto)
Sent: Wednesday, 17 April 2019 12:53 PM
To: 'Michael Tee'
Cc: Joy Irene (LKKAuto)
Subject: RE: SJJ9661L (8) And Can You Finalisation
Attachments: EST SJJ9661L.pdf

Hi Micheal,

Refer attached. COR lumpsum \$1500 , 4 days.

Regards
Taufikh
Lkk AUTO

From: Michael Tee [mailto:michael@wahhong.sg]
Sent: Wednesday, 10 April 2019 2:28 PM
To: Taufikh (LKK Auto)
Subject: SJJ9661L (8) And Can You Finalisation

Motor Vehicle Claim Owner's Satisfaction / Discharge Voucher

Our Ref No :

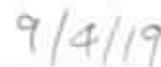
190404

Vehicle Owner : TOH ENG WAH
Policy No : PNPV2017-00007105-01
Registration No : SJJ9661L
Vehicle Make / Model : MITSUBISHI LANCER 1.5 GLX (A)
Accident Date : 05/04/2019
Time of Accident : 0720 HRS
Workshop's Name : Wah Hong Motors & Credit Pte Ltd
Workshop's Address : 38 Toh Guan Road East, #01-57 Enterprise Hub, Singapore 608581

I / We certify that the vehicle has been fully repaired to my entire satisfaction and that payment of the repairer's charges that are claimable under the policy will be deemed in full and final settlement of my claim.



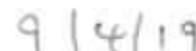
Policyholder's Signature



Date



(Witness)
Name : Michael Tee Lian HUAT
NRIC No : 80980825-F
H/P No : 224 Verde View
Address : Singapore 638769



Date



Date: 29 April 2019

EQ Insurance Company Limited
c/o LKK Auto Consultants Pte Ltd
Block 51, Paya Ubi Industrial Park
#02-25, Ubi Avenue 1
Singapore 408933

Via Email : vicalpeh@lkkauto.com

Your Ref : GBB4067Y
Our Ref : SJJ9661L - 190404

Dear Sir or Mdm.,

CLAIMANT: TOH ENG WAH
ACCIDENT INVOLVING VEHICLE : SJJ9661L & GBB4067Y ALONG CHOACHU
KANG WAY SLIP ROAD TO KJE/TUAS ON 05 APRIL 2019 AT 0720 HRS

We are pleased to inform that as per your adjuster's recommendation, our client's claim on the following terms:-

- | | |
|-------------------------------------|--------------|
| 1. Final Repair Bill (includes GST) | S\$ 1,605.00 |
| 2. Loss of Use (4 days x \$50.00) | S\$ 200.00 |

Reimbursement: -

- | | |
|------------------------------|--------|
| 3. GIA report / search fee : | S\$ na |
| 4. Medical Fee : | S\$ na |
| 5. Towing Charges : | S\$ na |

Total: S\$ 1,805.00

Enclosed are our Discharge Voucher/Owner's Satisfaction, Letter of Authority & Indemnity and our Invoice R75528. Please arrange the soonest possible payment of the settlement sum.

Yours faithfully,

Wah Hong Motors & Credit Pte Ltd

WAH HONG



Auto
Consultants
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 67414108

Our Ref: CC4/EQI19006150/T1jb3

12 APRIL 2019

OFFER & SAVE SUPERSTORE

Block 144
#01-221 Teck Whye Lane
Singapore 680144

Dear Sir/Madam,

ACCIDENT INVOLVING GBB 4067Y AND SJJ 9661L ON 05/04/2019

We refer to the above accident where we are acting for EQ INSURANCE COMPANY LIMITED to resolve the claim against you and/or your authorized driver under the Auto Insurance policy taken up with them.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Should you however wish to further discuss on the matter prior to our negotiations and settlement, please contact us within 10 days from the date of this letter.

Please note that your No-Claim Discount (NCD)(if any) will be affected and reduced by 30% (20% for commercial vehicles) upon next renewal due to this Third Party claim. However, if your policy has a NCD protector feature, it will be deemed utilized for this claim and your NCD will be protected.

Please call us if you have further queries.

Yours faithfully,

Joy Irene

DID: 6841 2409

FAX: 6741 4108

Email: joyirene@lkkauto.com

c.c. EQ INSURANCE COMPANY LIMITED
(Motor Claims Dept)

LETTER OF AUTHORITY & INDEMNITY

To: Wah Hong Motors & Credit Pte Ltd

ACCIDENT INVOLVING VEHICLE NO. SJJ9661L AND GBB4067Y AT
ALONG CHOA CHU KANG WAY SLIP ROAD TO KJE/TUAS ON 05/04/2019.

1. I/We, the owner of vehicle no. SJJ9661L hereby instruct and authorize you to commence repairs to the said vehicle. I/We clearly understand that the Manufacturer's Normal Warranty maybe void due to the accident repair done at your workshop.
2. You are further authorized to appoint solicitors on my/our behalf and give the solicitors full instructions as if the appointment is made and instructions are given by me/us with respect to the conduct of my/our claim against the third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
3. You have my/our full authority to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit or to instruct my/our solicitors as per paragraph 2 to do the same. Upon settlement of my claim, you are authorized to sign any Discharge Voucher or any document to confirm my acceptance of the settlement as full and final discharge of my claim, on my behalf.
4. Upon resolving my/our claim, you are authorized to agree with my/our solicitors on the amount of their professional costs and disbursements of acting for me/us and to receive payment of the balance of the settlement sum on my/our behalf directly into your account.
5. In the event that I/we am/are required to attend at my/our solicitors' office or to attend Court in connection with my/our claim, I/we shall render full co-operation.
6. In the event that my/our claim against the third party and/or his insurers is not successful or cannot be proceeded with, I/we authorize you to make a claim against my/our own insurers for the cost of repairs and any other losses recoverable under my/our policy of insurance. In this respect, I/we understand and accept that the excess amount applicable under the policy of insurance shall be borne by me/us. I/We shall also be personally liable to bear all Legal Costs incurred by you in claiming back for the repair costs by your Solicitors.
7. If for whatever reason, my/our insurer(s) or the third party insurer(s) reject my/our claim for indemnity for the cost of repairs and/or any losses recoverable under the policy of insurance or make an offer to pay less than the amount claimed by you, I/we agree and undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred on my/our behalf or to pay you the difference in amount, as the case may be.
8. ***I/We hereby confirm I/we have read and understand the contents of this document and the same. I/We acknowledge receipt of a copy of the same.***

Dated this 5th day of April 2019.



Policyholder's Signature
Name: Toh Eng Wah
NRIC No: S1723168E
Contact No :97715650

Driver's Signature (if driver is not the policyholder)
Name :
NRIC No:
Contact No :



Witness's Signature
Name : Michael Tee Lian Hwat
NRIC No: S0980925-F
Contact No : 224 Verde View
Singapore 688769



Wah Hong Motors & Credit Pte Ltd
38 Toh Guan Road East #01-57
Enterprise Hub, Singapore 608581
GST. REG. NO.: 199806235M
CO. REG. NO.: 199806235M
TEL : 6773 7377
FAX: 6896 6321

<u>Tax Invoice</u>	R75528
<u>Date</u>	17 Apr 2019
<u>Due Date</u>	17 Apr 2019
<u>Terms</u>	Cash on Delivery

Bill To:

Vehicle No:

EQ INSURANCE COMPANY LIMITED

EQ INSURANCE COMPANY LIMITED
SJJ9661L & GBB4067Y DOA 5/4/19

Description	Quantity	Price	Amount
Lump Sum Repair Parts & Labour	1	\$1,500.00	\$1,500.00
4 Days Loss Of Use	4	\$50.00	\$200.00

Subtotal \$1,700.00

7% GST \$105.00

Total \$1,805.00

Thank you for your business!



To : M/s EQ INSURANCE COMPANY LTD

Date: 29/05/2019

THIRD PARTY DIRECT SETTLEMENT

Vehicle No.	GBB 4067Y (Insd Veh)	Your Ref. No. : DMCPHQ18-003487
	SJJ 9661L (TP Veh)	Our Ref. No. : C4/EQ19006150/T1jb3q2
Date of Accident	5/4/2019	

Liability	100%	
Final Repair Cost	: \$ 1,605.00	
Loss of Use	: \$ 200.00	4 days
Rental (If any)	: \$	days
Others:	: \$	
	: \$	
	1,805.00	
Final Settlement Sum	: \$ 1,805.00	
Remarks	:	

<u>Payment Instruction: Payee's Breakdown</u>		
1)	WAH HONG MOTORS & CREDIT PTE LTD	: \$ 1,805.00
		: \$

JOANNE LEE
LKK Auto Consultants Pte Ltd



LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

EQ INSURANCE COMPANY LTD

Ref : CC4/EQ19006150/T1jb3q2

5 MAXWELL ROAD
#17-00 TOWER BLOCK
MND COMPLEXSINGAPORE 069110

Date : 29-05-2019



Code : EQ1

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GBB 4067Y	Veh. Inspected	SJJ 9661L
Policy No.	DMCPHQ18-003487	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From	JOEL	Assign Date	08/04/2019

2. Vehicle Particulars & Condition

Make & Model	MITSUBISHI LANCER	c.c	1499
Engine No.	HIDDEN	Year of Reg.	2008
Chassis No.	JMYSRCY2A8U007835	Colour	BLUE
Odometer	121251	Steering	IN ORDER
Brakes	IN ORDER	Modification	SPORTS RIM
General	GOOD		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60 R16	CONTINENTAL	6 mm
L/H Front Tyre	205/60 R16	CONTINENTAL	6 mm
R/H Rear Tyre	205/60 R16	CONTINENTAL	6 mm
L/H Rear Tyre	205/60 R16	CONTINENTAL	6 mm

4. Description of Damages

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

5. General Information

Accident Date	05/04/2019	Inspection Date	08/04/2019
Survey held at	WAH HONG & CREDIT PTE LTD 38 TOH GUAN ROAD EAST #01-57 ENTERPRISE HUB SINGAPORE 608581		

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:	4 Working Days
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LKK Auto Consultants Pte Ltd

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

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SJJ 9661L

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	REAR R/H DOOR	BENT	936.00	936.00
	LESS 10% DISCOUNT		-	-93.60
			936.00	842.40
	LABOUR			
	TO REMOVE AND REPLACE ALL THE PARTS MENTIONED ABOVE AND KNOCKING AND STRAIGHTEN UP THE NECESSARY AFFECTED AREAS.		500.00	400.00
	TO SPRAY PAINTING ON AFFECTED AREAS.		650.00	550.00
	TO REMOVE & REPLACE DOOR MECHANISM.		60.00	60.00
			1,210.00	1,010.00
GRAND TOTAL			2,146.00	1,852.40
RECOMMENDED COST OF LUMP SUM REPAIRS (TO ITS PRE-ACCIDENT CONDITION)				1,500.00

Report Ref No. CC4/EQI19006150/T1jb3q2

MOHAMAD TAUFIKH

M.MATAI, AMSAE-A

Automotive Assessor

HO LEONG CHUAN

Automotive Assessor

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report.

No liability of responsibility whatsoever, in contact 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.

Joanne Lee (LKK Auto)

From: Joanne Lee (LKK Auto) <report@lkkauto.com>
Sent: Friday, 31 May 2019 2:59 PM
To: 'eqiprs@eqinsurance.com.sg'
Cc: 'Joylrene@lkkauto.com'
Subject: TP Direct Settlement - Accident Involving GBB 4067Y (OI) and SJJ 9661L (TP) on 05/04/2019
Attachments: LKK REPORT & PHOTO.pdf; TP DS SUPPORTING DOCUMENT.pdf

Dear Sir/Madam,

Please be informed that the above-mentioned case had been settled.

Enclose herewith final report & relevant documents for your necessary action please.

Thank you.

Best Regards,

JOANNE | Reports

LKK Auto Consultants Pte.Ltd.

Phone: 6256-3561 Ext.111 Fax: 6741-4108 email: report@lkkauto.com

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