



**TP Claims against NTUC Income: Follow-Through Survey**

Date : 06/05/2019

S/No	Income Reference	Claimant (Owner / Taxi Company)	Claimant Vehicle No.	Income Vehicle No.
1	MT/1041958-002	COMFORT TRANSPORTATION PTE LTD	SHC 8955G	SLH 2238J
2	MT/1042268-002	COMFORT TRANSPORTATION PTE LTD	SHC 2230D	XD 7779K
3	MT/1042493-002	COMFORT TRANSPORTATION PTE LTD	SHD 3252D	SBP 3006G
4	MT/1042595-002	COMFORT TRANSPORTATION PTE LTD	SHC 2767Y	GW 6100B
5	MT/1020313-003	SMRT TAXIS PTE LTD	SHC 4756R	SHC 6809J

[My Desktop](#)  
[Notice of Loss](#)

## Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="29/04/2019 17:27"/>							
Vehicle No.(For Motor)	<input type="text" value="GW6100B"/>	Certificate Number	<input type="text"/>							
<input type="button" value="Search"/>										
Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5069836241-04		ASK M&E PTE. LTD.	200815981K	GCV	Third Party, Fire & Theft	GW6100B	GW6100B	01/03/2019	29/02/2020
<input type="button" value="Continue"/>										

## 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	29/04/2019 15:43
Date Of Accident	29/04/2019 14:10
Exact Location Of Accident	HOUGANG AVE 3 BLK 15-18 CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC2767Y
<b>Insured/Policyholder</b>	
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	IONIQ HYBRID

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	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088936MFSH
Cover Note Number	

### Driver

Name of Driver	PNG SOON PENG
NRIC No	S1344930I
Date Of Birth	29/12/1958
Occupation	OUTDOOR
Date Of Driving Pass	25/01/1979
Driving Experience	40 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96654838
Fax Number	
Contact Number	
Email Address	PNGSOONPENG2912@YAHOO.COM

Address	BLK 601 JURONG WEST STREET 62 #07-173
Postcode	640601
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?	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

PLS REFER TO ATTACHED / Type Of Accident : 3P REVERSE

#### 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	GW6100B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	KAMSANI BIN MOHAMADI
NRIC/Passport Number	
Contact Number	83447068
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Nature Of Damage	REAR
No. Of Passenger (Including Driver)	

SKETCH PLAN

IMPORTANT NOTICE


1. Please report correctly the details of the accident to speed up the claims process.
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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.

COMFORT TRANSPORTATION PTE LTD  
CO. REG. NO. 199303821R

Policyholder's Signature  
Date & Time:

  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 29.04.2019@1530hrs

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

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 29.04.2019 @ 1410hrs I was travelling along Hougang Ave 3 Blk 15- 18 carpark with no passenger onboard.
As I was travelling straight suddenly veh(B) GW 6100B reversed his vehicle and hit onto my vehicle rear left portion.
As it took place so fast, I could not take evasive action to prevent the collision.
I have company video and photos at scene to support my claims.
No injury in this accident .
Veh(B) MR Kamsani Bin Mohamadi HP: 8344 7068

## DECLARATION

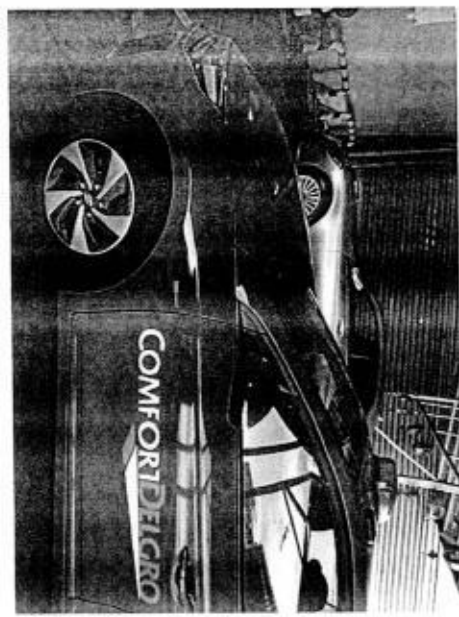
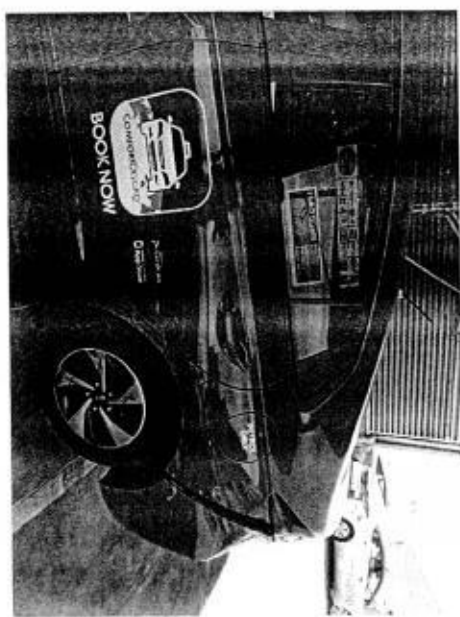
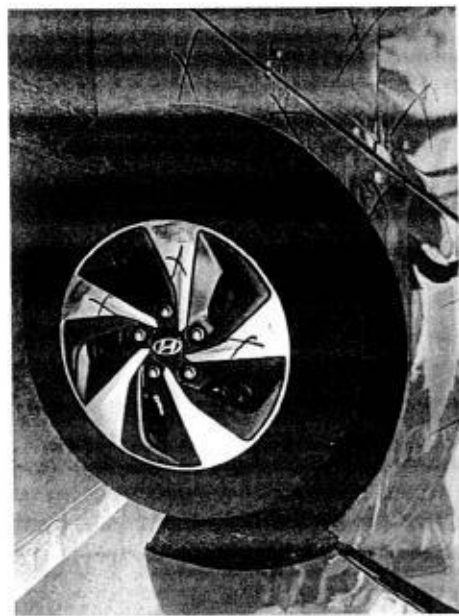
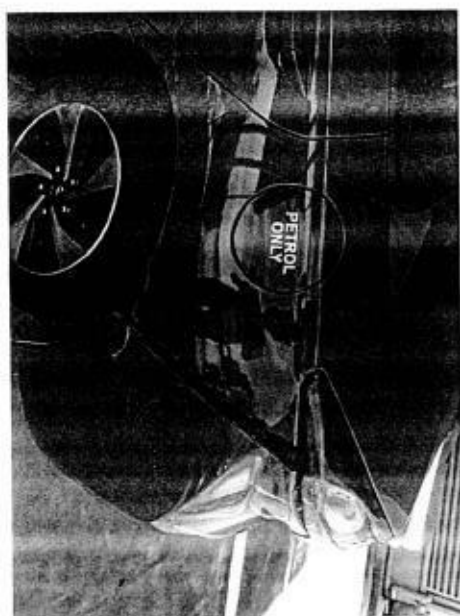
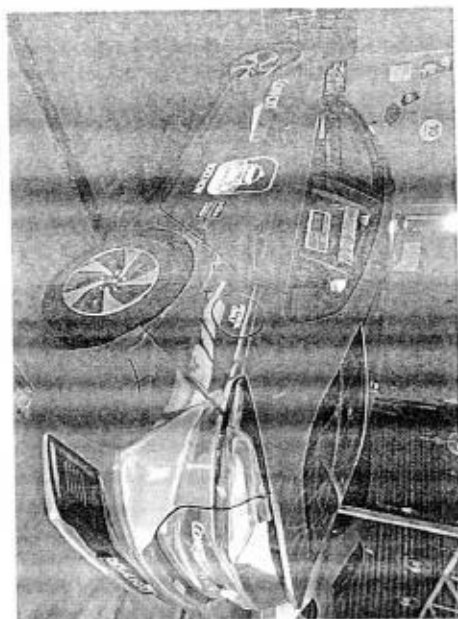
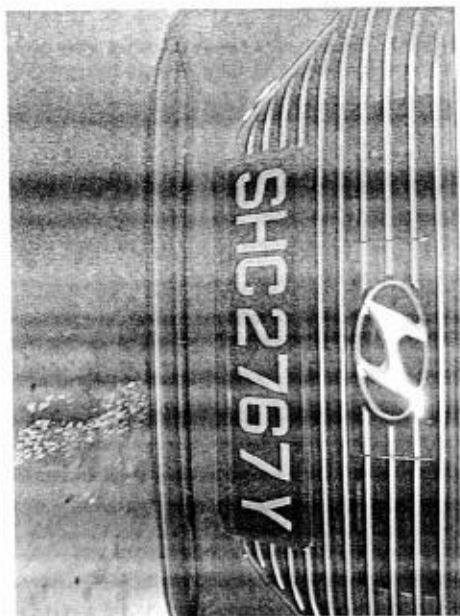
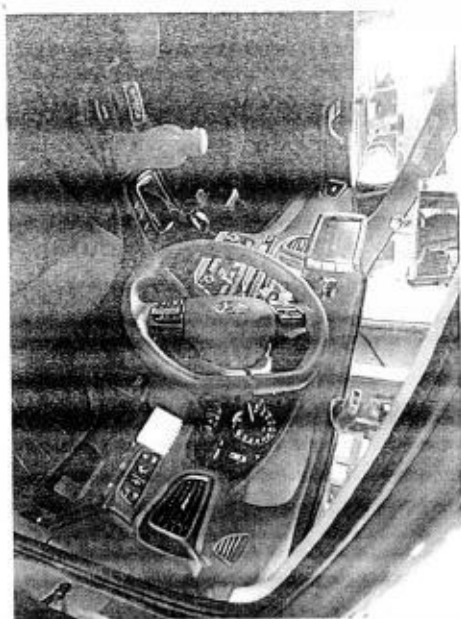
I/We declare the foregoing particulars are true in every respect.  
COMFORT TRANSPORTATION PTE LTD  
CO. REG. NO. 199303821R

Policyholder's Signature  
Date & Time:

Driver's Signature  
(if driver is not the policyholder)  
Date & Time: 29.04.2019@1530hrs

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









**COMFORTDELGRO ENGINEERING PTE LTD**  
**REPAIR ESTIMATE\***

VEHICLE NO : SHC 2767Y

DATE 29/4/2019 17:05

MAKE :

MODEL : HYUNDAI IONIQ

NEW - JH  
PIP

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rear Bumper <i>cut</i>			\$ 459.40
	Rear Bumper Side Bracket (LH) <i>x 2</i>			\$ 33.10
	Rear Fender (LH) <i>x repair</i>			\$ 1,768.30
	Rear Fender Inner Lining (LH) <i>x 5m</i>			\$ 73.60
	Rear Windscreen Moulding <i>x 1m</i>			\$ 28.20
	Rear Wheel Hub Cap, LH <i>x 1m</i>			\$ 346.00
	<i>Rear Door (LH) x repair</i>			
	<b>SUB TOTAL</b>			<b>\$ 2,708.60</b>
	<b>LESS 20%</b>			<b>\$ 541.72</b>
	<b>DISCOUNTED TOTAL</b>			<b>\$ 2,166.88</b>
	Rear Windscreen Sealant <i>x 1m</i>			\$ 46.00
	Rear Door Comfortdelgro & Apps Sticker (LH) <i>✓</i>			\$ 80.00
				<b>\$ 126.00</b>
	<b>Labour Charge</b>			
	Panel Beating			\$ <del>800.00</del> <i>400</i>
	Spray Painting Charge			\$ <del>900.00</del> <i>600</i>
	Wiring Charge			\$ <del>50.00</del> <i>x 11</i>
	Tuff Kote			\$ <del>50.00</del> <i>x 11</i>
	Remove/Refix Cushion & Upholstery Rear			\$ <del>150.00</del> <i>50</i>
	Remove/Refix Rear Windscreen Glass			\$ <del>120.00</del> <i>x 11</i>
	Remove/Refix Reverse Sensor			\$ <del>120.00</del> <i>30</i>
	Rear Wheel Alignment			\$ <del>120.00</del> <i>x 11</i>
	<b>TOTAL LABOUR</b>			<b>\$ 2,310.00</b>
	<b>ESTIMATE TOTAL</b>			<b>\$ 4,602.88</b>
				<i>4667.88</i>

LKY Auto Consultants hence notify the Repairer of the following:  
 • To resurvey before/after spray painting  
 • To display damaged part(s) during resurvey  
 • Part 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:

*Kah' 11/11/19*  
*30/4/19 1145h*  
*3 Pys*  
*PIP Defect Panel pht*

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

DESCRIPTION	QTY	ESTIMATE	REMARKS
REAR BUMPER MAT	1	NE \$50.00	NET
FUEL TANK 'PETROL ONLY' STICKER	1	NE \$15.00	NET - 1% 17.50
CHECK ITEMS			
TOTAL:		\$65.00	JUMANI

COMFORTDELGRO

Date/Time: 29.04.2019 16:13 Page : 1

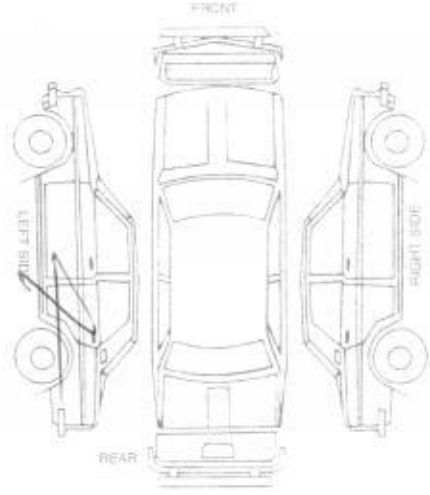
Team: ARC Repair TP(CLSO)1 JOB CARD Sales Order: JC NO.: 305291498

MER	COMFORT TRANSPORTATION PTE LTD	REGN NO.	SHC2767Y	MILEAGE
MER NO.	7010045	MAKE:	HYUNDAI	FUEL
SS	383 SIN MING DRIVE	MODEL	IONIQ(G2)	E.....1/2.....F
	Singapore SINGAPORE 575717	YR OF MANU	11.12.2018	DATE/TIME IN
	65508755	CHASSIS CODE	KMHC851CVKU122151	29.04.2019 14:50
				TARGET DATE
				COMPLETION DATE/TIME
INT CARD NO.				

JOB DESCRIPTION

Accident Date: 29.04.2019  
NATURE: 3P 29.04.19

3/NO LABOR CODE DESCRIPTION



ED & PASSED OUT BY:

SERVICE ADVISOR CUSTOMER'S SIGNATURE

dgement Slip	Exit Pass
Vehicle No.: SHC2767Y JU NTUC LKK	Vehicle No.: SHC2767Y
Service Advisor	Name of Service Advisor
Signature/Date	Date
igned to Service Reception upon collection	To be kept by Security Guard

## COMFORTDELGRO ENGINEERING PTE LTD

## REPAIR ESTIMATE

Date: 03.05.2019

Time: 17:32:06

Page: 1

COMPANY : THIRD PARTY'S CLAIMS (CAS)  
CUSTOMER: 7010045  
ADDRESS : COMFORT TRANSPORTATION PTE LTD  
383 SIN MING DRIVE  
SINGAPORE SINGAPORE 575717  
65508755

JOB NO : 305291498  
REGN NO : SHC2767Y  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : IONIQ(G2)  
DATE OF REGN : 11.12.2018  
DATE/TIME IN : 29.04.2019 14:50  
ACCIDENT DATE : 29.04.2019

## JOB / PARTS DESCRIPTION

## QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0104-2282-G	IONIQVC COVER-RR BUMPER#	1 L	459.40	20.00	367.52
0002 03-01-0104-2061-G	IONIQV1/3 CAP ASSY-WHEEL	1	346.00	20.00	276.80
0003 28-01-0103-2013-A	I40V3 APP LOGO REAR DOOR	1 N	80.00	10.00	72.00
0004 28-01-0302-2017-A	PRIVC FUEL TANK LID (PETR	1 N	15.00	10.00	13.50
0005 04-01-0104-1150-A	IONIQVC PROTECTOR MAT	1	50.00	1.00-	50.00

SUB-TOTAL : 779.82

JOB NATURE

0000 PB	PANEL BEATING	400.00
0001 SP	SPRAYPAINT CHARGE	600.00
0002 20-204	REMOVE/REFIX UPHOLSTERY ASST REPAIR	50.00
0003 L	REMOVE/REFIX REVERSE SENSOR	30.00

SUB-TOTAL : 1,080.00

COMFORTDELGRO ENGINEERING PTE LTD

Date: 03.05.2019

REPAIR ESTIMATE

Time: 17:32:06

Page: 2

COMPANY : THIRD PARTY'S CLAIMS (CAS)  
CUSTOMER: 7010045  
ADDRESS : COMFORT TRANSPORTATION PTE LTD  
383 SIN MING DRIVE  
SINGAPORE SINGAPORE 575717  
65508755

JOB NO : 305291498  
REGN NO : SHC2767Y  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : IONIQ(G2)  
DATE OF REGN : 11.12.2018  
DATE/TIME IN : 29.04.2019 14:50  
ACCIDENT DATE : 29.04.2019

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

TOTAL : 1,859.82

MVA NAME & SIGNATURE  
DATE :

AUTHORISED : YES / NO  
SURVEYOR NAME & SIGNATURE  
DATE :



# COMFORTDELGRO ENGINEERING

Our Job Ref No 305291498

Date : 03/05/19

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

## FINALIZATION FORM

To : LKK

Fax :

Attn : KALVIN

: SHC2767Y

Date of Accident : 29.04.19

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: NTUC --- GW6100B  
###
2. The finalized amount shall be:
 

(a) Spare Parts after List discount		<u>\$779.82</u>
(b) Labour Charges	###	<u>\$1,080.00</u>
<b>Total for Part-By-Part Repair Cost</b>		<b><u>\$1,859.82</u></b>
N		
(c.) Lumpsum Repair (if applicable)		
Total for Lumpsum repair cost after Less: <u>20%</u>		<u>                    </u>
Final Lumpsum Repair cost		<u>                    </u>

3. Estimated normal period for repairs: 3 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 : JUMANI

Tel : 6214 8315

Fax : 65468156

Signature : 

Name : KALVIN

Date : 6/5/19

### For Official Use Only

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/INC19007645/K1qd3n2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE  
189556

Date: 08-05-2019



Code: INC4

### 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	GW 6100B	Veh. Inspected	SHC 2767Y
Policy No.	5069836241-04	Coverage (\$)	0.00
Claim No.	MT/1042595-002	Excess (\$)	0.00
Assign From		Assign Date	30/04/2019

### 2. Vehicle Particulars & Condition

Make & Model	HYUNDAI IONIQ	c.c	1580
Engine No.	HIDDEN	Year of Reg.	2018
Chassis No.	KMHC851CVKU122151	Colour	BLUE
Odometer	32504	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

### 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	MICHELIN	7 mm
L/H Front Tyre	195/65 R15	MICHELIN	7 mm
R/H Rear Tyre	195/65 R15	MICHELIN	7 mm
L/H Rear Tyre	195/65 R15	MICHELIN	7 mm

### 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S REAR PORTION. DAMAGES SEE DETAILS.
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### 5. General Information

Accident Date	29/04/2019	Inspection Date	30/04/2019
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.
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### 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	3 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. SHC 2767Y**

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
<b><u>REPLACEMENT OF PARTS</u></b>				
1	REAR BUMPER	CUT	459.40	459.40
1	REAR BUMPER SIDE BRACKET (LH)	SERVICEABLE	33.10	-
1	REAR FENDER (LH)	TO REPAIR SEE LABOUR	1,768.30	-
1	REAR FENDER INNER LINING (LH)	SERVICEABLE	73.60	-
1	REAR WINDSCREEN MOULDING	NOT NECESSARY	28.20	-
1	REAR WHEEL HUB CAP, LH	GRAZED	346.00	346.00
1	REAR DOOR (LH) (NPA)	TO REPAIR SEE LABOUR	-	-
	LESS 20% DISCOUNT		-541.72	-161.08
			2,166.88	644.32
<b><u>NETT ITEMS</u></b>				
1	REAR DOOR COMFORTDELGRO & APPS STICKER (LH) (N)	NECESSARY	80.00	80.00
1	FUEL TANK 'PETROL ONLY' STICKER (N)	NECESSARY	15.00	15.00
	LESS 10% DISCOUNT		-	-9.50
			95.00	85.50
<b><u>SPECIAL NETT ITEMS</u></b>				
1	REAR WINDSCREEN SEALANT (SN)	NOT NECESSARY	46.00	-
1	REAR BUMPER MAT (SN)	NECESSARY	50.00	50.00
			96.00	50.00
<b><u>LABOUR</u></b>				
	PANEL BEATING. INCLUSIVE OF THE REPAIR OF REAR FENDER (LH) AND REAR DOOR (LH).		800.00	400.00
	SPRAY PAINTING CHARGE.		900.00	600.00
	WIRING CHARGE.	NOT NECESSARY	50.00	-
	TUFF KOTE.	NOT NECESSARY	50.00	-
	REMOVE/REFIX CUSHION & UPHOLSTERY REAR.		150.00	50.00
	REMOVE/REFIX REAR WINDSCREEN GLASS.	NOT NECESSARY	120.00	-
	REMOVE/REFIX REVERSE SENSOR.		120.00	30.00

Report Ref No. NS/INC19007645/K1qd3n2



## 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.:2 of 2

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REAR WHEEL ALIGNMENT.	NOT NECESSARY	120.00	-
			2,310.00	1,080.00
GRAND TOTAL			4,667.88	1,859.82
RECOMMENDED COST OF REPAIRS (CONFIRMED)				1,859.82

Report Ref No. NS/INC19007645/K1qd3n2

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

**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 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.