

NATIONAL Assessment Centre Services

MMAY 19064113

Date In: 17/05/2019 10:57	Job description	Date & Time Completed	Done by
Ref No: N1801200190087674	SAS e-filing		
Veh No: GBC 45409	E-mail (within 8hrs. AIC 2hrs)		
D.O.A: 16/05/2019 09:45	i-Motor Claim Form	mm/1044966-001	17/05/2019 12:20
OD: TP (Reporting Only)	i-Motor W/O (within 8hrs. TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: ()	Tel: ()	Fax: ()
TP Particulars:	Veh No: 4P2106P	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%; F: 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: (INC hotline: 6788 6616)	Date & Time Completed	Done 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

<p>NA1903719</p> <p>Claimant's Particulars:-</p> <p>Driver/Owner:</p> <p>Contact No:</p> <p>Damaged Portion:</p> <p>QC Checked by (Engr-In-Charge):</p> <p>Auditors' Comments:-</p> <p>Cat. 1:</p> <p>Cat. 2/3:</p>	<p>Invoice Preparation Checklist</p> <p>1) AR: Accident Reporting (\$30);</p> <p>2) DA: Damage Assessment (\$100); INC (\$40)</p> <p>3) TP: Towing Fee \$40/\$45</p> <p>4) FT: Follow-Through Survey \$120</p> <p>5) FT: Follow-Through Survey (Resurvey) \$30</p> <p>For claimant's request INC Only (wef 10 Jan 2005)</p> <p>6) TR: Re-inspection \$75</p> <p>7) N1: Idem DA + SMRT Survey \$160</p> <p>8) NTUC Additional Services:-</p> <p>9) N12: Idem Mobile \$30</p>		<p>Am't (\$)</p> <p>1st Bill</p>	<p>Am't (\$)</p> <p>Add. Bill</p>
	<p>*N3: Courtesy Car / Tpt Allowance \$5</p> <p>*N6: Repair Co-ordination \$10</p> <p>*N7: Post Repair Inspection \$25</p> <p>*N8: DV / Collect Excess Coordination \$5</p> <p>TP (N11) - TP (Non INC) against INC \$20</p>			
	<p>Invoice dated</p> <p>Fee Charged</p>			

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	17/05/2019 10:57
Date Of Accident	16/05/2019 09:45
Exact Location Of Accident	CHINATOWN PLAZA LOADING AND UNLOADING BAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC4540S
Insured/Policyholder	
Name Of Registered Owner	SOH KOK HONG
NRIC No	S1578171H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97302854
Alternative Phone No	OTHERS-97302854

Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5061313367-05
Cover Note Number	

Driver

Name of Driver	SOH KOK HONG
NRIC No	S1578171H
Date Of Birth	31/07/1963
Occupation	OUTDOOR
Date Of Driving Pass	29/04/1982
Driving Experience	37 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97302854
Fax Number	
Contact Number	OTHERS-97302854
Email Address	NOEMAIL

Address	BLK 51 CIRCUIT ROAD #05-799
Postcode	370051
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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	YP2106P
Vehicle Make/Model/Colour	MITSUBISHI FUSO
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	CAO KUGUI
NRIC/Passport Number	G8414579W
Contact Number	85893259
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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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**.
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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.

Policyholder's Signature
Date & Time:

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

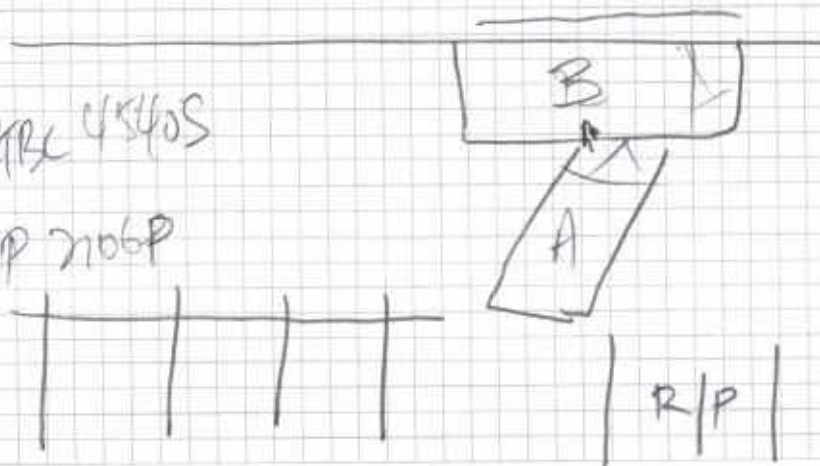
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

China Town Plaza Loading & Unloading Bay
CTP

A) GRX 4540S

B) VP 2106P



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 16/05/2019 AT ABOUT 09:45HRS I WAS AT CHINA TOWN PLAZA LOADING BAY & WANTED TO MAKE A 3 POINT TURN. BUT I ACCIDENTALLY HIT THE Lorry VP 2106P WHICH PARK AT THE DUB DOUBLE YELLOW LINE. THE MIRROR OF MY Lorry HIT THE OTHER Lorry & WAS JUST A SMALL SCRATCH. THAT ALL. NOBODY WAS INJURED. NO AMBULANCE & NO POLICE.

DECLARATION

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

Policyholder's Signature
Date & Time:

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

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

Claim Handling

Accident MT/1044298

Policy No.	506131367-05	Vehicle No.	GBCA5405	GST Registration No.	
Certificate No.				Policyholder NRIC	S1578171H
Policyholder Name	SOH KOK HONG	Driver Type	Comprehensive	Loading	0
Product Code	COMMERCIAL VEHICLE INSURANCE	Contact No.(Office)		Contact No.(Home)	
Contact No.(Mobile)	97302854	Special Remark		eCode	No
Email Address		TCA	No	eCode Reason	
KPI	No	ACD Entitlement(%)	10	Private Hire	No
NCI Protection	No				

Accident Details

Report Date	17/05/2019 12:02	Accident Report Within 24 hrs	Yes	Accident Type	Collided into Parked Vehicle
Date of Accident	16/05/2019	Time of Accident(hh:mm)	09:45	Country of Accident	Singapore
Reporting Centre		Orange Force		ICH No.	
Accident Location	CHINATOWN PLAZA LOADING AND UNLOADING BAY				

Excess

Own damage Excess	500.00	Additional Excess		Windscreen Excess	100.00
Named Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			

Benefits

GST Registered Information

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

Policyholder Mailing Address

Address 1	BLK 51 #03-799	Address 2	CIRCUIT ROAD	Address 3	SINGAPORE 370051
Address 4		Address Type	Singapore address	Post Code	370051
Unit No.		Related Policy Number	506131367-05		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	31/07/1963
Unnamed driver Name	SOH KOK HONG	Driver NRIC	S157817H	Driving Experience	37
Register Date of Driver License	29/04/1982	Driver Age	56	Contact No.(Office)	
Contact No.(Mobile)	97302854	Contact No.(Office)		Address 3	HACHERSON GARDEN
Address 1	BLK 51 #03-799	Address 2	CIRCUIT ROAD	Post Code	370051
Address 4	SINGAPORE 370051	Address Type	Foreign address		
Unit No.	03-799			Driver Insurer Company	NTUC
Does he own a Singapore registered car?	Yes = No	Driver Vehicle No.	GBCA5405		

Declaration

Breathalyzer or Blood Test Reading?	0 mg	Any injury?	Yes = No
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Modification History

Claim 001 New

Claim Type *

Contact No.(Mobile)

Email Address

Claim Description

Preferred Workshop

Ratified No.

Date Registered

Report Taken By

Print AX letter

GD-MK	Insured Name	SOH KOK HONG	Insured NRIC	S1578171H
	Contact No. (Home)		Contact No. (Office)	
	Vehicle Number	GBCA5405	TP Vehicle Number	YP2106P
			Name of Preferred Workshop	

GBCA5405 / YP2106P ON 16 May 2019

17/05/2019 12:39

BOSLI WAHAB

Save Submit

Attachment

Accident No.

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17/05/2019 12:39

Confidential

Urgency *

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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 May 2019 12:20	Photos	Normal	Photos 2019-5-17
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 May 2019 12:19	Photos	Normal	Photos 2019-5-17
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 May 2019 12:19	Photos	Normal	Photos 2019-5-17
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 May 2019 12:19	Photos	Normal	Photos 2019-5-17
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 May 2019 12:19	Photos	Normal	Photos 2019-5-17
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 May 2019 12:19	NAC/ Driving License	Normal	NAC/ Driving License 2019-5-17
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 17 May 2019 12:19	SAS	Normal	SAS 2019-5-17

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
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Display in New Window

Scan and uploading

ACCIDENT STATEMENT

ACCIDENT DATE: 16 / 05 / 2019 (DD/MM/YYYY), TIME: 0945hrs (HH:MM)

LOCATION: China Town Plaza Loading & Unloading Place

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GBG 45405
 b) INSURANCE COMPANY: NTUC
 c) POLICY NUMBER: 5061381367
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: Nissan Cabstar
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: Working
 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: SOH KOK HONG (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S1578171H CONTACT: 97302854
 c) ADDRESS: BK SI CIRCUIT RD
#05-799, SC3700541

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: SOH KOK HONG (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S1578171H CONTACT: _____
 c) ADDRESS: BK SI CIRCUIT RD
#05-799 SC3700541

*d) DATE OF BIRTH: 31 / 07 / 63 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 29/4/1982

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: OWNER

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: MRT FUSE

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: YP 218P MODEL: Mrt Fuso
 b) DRIVER'S NAME: CAO FUGU
 c) NRIC/FIN/PASSPORT: G 8414 579W CONTACT: 85893259

9. THIRD PARTY VEHICLE

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

* No of passenger
 (Including driver)
 ()

* No of passenger
 (Including driver)
 ()

* No of passenger
 (Including driver)
 ()

Email =

VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1578171H



Name

SÔH KOK HONG

苏国宏

Race

CHINESE

Date of birth

31-07-1963

Sex

M

Country of birth

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



Identity Number S1578171H

SÔH KOK HONG

Valid Until 31 Jul 1963

Issued Until 31 Mar 2003



NRIC No. S1578171H



Date of issue

07-09-2009

APT BLK 51 CIRCUIT ROAD #05-789
SINGAPORE 370051

NRIC No: S1578171H

Date: 12/07/2011

No: 6740762

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

Issue Date

29 Apr 1963

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

Class 4 Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms

23 May 1965

Licence No: S1578171H



NP 426A

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 Number : 5061313367-05

Cover : Comprehensive

- | | |
|---|---|
| 1. Index mark and Registration Number of Vehicle | : GBC4540S |
| Chassis Number | : JN15C2F24Z0850376 |
| 2. Name of Policyholder | : SOH KOK HONG |
| 3. Effective Date of Insurance | : 17 Aug 2018 |
| 4. Expiry Date of Insurance | : 16 Aug 2019 |
| 5. Persons or Classes of Persons entitled to drive# | |
| (a) The Policyholder. | |
| (b) Any other person who is driving on the Policyholder's order or with his/her permission. | |
| | Provided that the person driving is permitted in accordance with the licensing or other laws or regulations 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 from driving the Motor Vehicle. |
| 6. Limitations as to Use# | |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession. | |
| (b) Use for the carriage of passengers or goods in connection with the Policyholder's business. | |

This Policy does not cover:

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: MAYBANK
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : HOCK KAH MOTOR PTE LTD (00000570886)

Date of Issue : 02 Aug 2018 11:02 hrs




Countersigned By:

Authorised Officer

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive