



WITHOUT PREJUDICE

Our Ref: SGS 822L

Your Ref: SML 8401G

19th June 2020

ATTN: LKK Auto Consultants Pte Ltd
INSURER: AIG Asia Pacific Insurance Pte Ltd

Dear Asher,

Accident Involving: SGS 822L and SML 8401G
Date of Accident: 10 July 2019
Location of Accident: Ang Mo Kio Ave 6 towards Yishun

We refer to the aforementioned accident and hereby submit our claim as below:

Cost of Repair as agreed	\$	6,400.00	
TOTAL LOR/U DAYS	9 DAYS	2 Days PRS (10/11 Jul) + 6 Repair Days Agreed (12/13/15/16/17/18 Jul) + 1 Sunday (14 Jul)	
Add Loss of Rental	\$	642.00	5 Days - Inv#A40419
Add Loss of Use	\$	320.00	4 Days
Total	\$	7,362.00	
Add 3rd Party Report Fee	\$	29.00	
GRAND TOTAL	\$	7,391.00	

Kindly pay the Grand Total Amount of **\$7,391.00** to:

Team AutoPro Pte Ltd
160 Sin Ming Drive #02-12
Sin Ming AutoCity
Singapore 575722

For further query, please feel free to contact us at 6258 1955 or email: teamautooffice@gmail.com

Thank you.



Regards,
Adel (Ms)

Team AutoPro Pte Ltd Co Reg No: 201811621K

160 Sin Ming Drive #02-12 Sin Ming AutoCity Singapore 575722
Tel: 6258-1955 Fax: 6258-1956 Email: teamautooffice@gmail.com / teamautoprl@gmail.com

PROFORMA INVOICE

**ATTENTION:**

Cheong Hon Fai Roy

PI Number	P2006-0916
PI Date	19-Jun-2020
Vehicle No.	SGS 822L
Accident Date	10-Jul-2020

S/No	Description	Unit Price	Quantity	Amount
1	Spare Parts and Labour for Accident Repair of Vehicle Nos. SGS 822L	COR Lump Sum		\$ 6,400.00

Notes:

1) All payments must be made only in the form of cash or crossed cheque payable to "Team AutoPro Pte Ltd".

Total Amount	\$ 6,400.00
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Authorized Signature



TAX INVOICE

GST REG. NO.: 200106276D

INVOICE TO
C/O TEAM AUTOPRO PTE LTD CHEONG HON FAI ROY BLK 121 ANG MO KIO AVENUE 3 #10-1703 SINGAPORE 560121

DATE	INVOICE NO.
22-Jul-2019	A 40419

	VHA NO.	DUE DATE	VEH. NO.
	A 40419	22-Jul-2019	SLM 3646 G
DESCRIPTION	NO. OF DAYS	RATE	AMOUNT
RENTAL FROM 10 JULY 2019 TO 15 JULY 2019 (ELANTRA) YOUR REF: SGS 822 L	5	120.00	600.00
GST @ 7%			\$42.00
TOTAL			\$642.00

All cheques must be made payable to BKW Rent A Car Pte Ltd.
Please write the vehicle and invoice number on the reserve.

VEHICLE HIRING AGREEMENT

Workshop: *Team M's Pro*

HIRER'S PARTICULARS

Name (as in I/C): **CHEONG HON FAI ROY**
NRIC/Passport No: **7512255A** Date of Birth: **19/4/1975**
Address: **BLK 121 ANG MO KIO AVENUE 3 #10-1703** Age: **S(560121)**

Name & Address of Employer

Occupation: **21/2/2008** Driving Exp: **21/2/2008**
Driving Licence No: **21/2/2008** Passed Date: **21/2/2008**
D/L Type: Local/Int'l/Others: **21/2/2008**

DRIVER'S PARTICULARS

Name (as in I/C): **21/2/2008**
NRIC/Passport No: **21/2/2008** Date of Birth: **21/2/2008**
Address: **21/2/2008** Age: **21/2/2008**
Occupation: **21/2/2008** Driving Exp: **21/2/2008**
Driving Licence No: **21/2/2008** Passed / Expiry Date: **21/2/2008**
D/L Type: Local/Int'l/Others: **21/2/2008** Contact No: **21/2/2008**

Hirer's Own Vehicle No: **505822L** Replace Veh No: **505822L**

Loan Vehicle No: **LM36466** VR No:

Make & Model: **H. elentra** Auto/Manual Group:

CHARGES : \$ cts

Daily **5** day @ \$ **120** Per day **\$600**

Weekly/Monthly week @ \$ Per week/Monthly

Others

CDW/PAI @ \$ Per day/Monthly

Delivery/Collection Svc

GST **7%** **\$42**

OR No: **(A) SUB-TOTAL** **\$642**

Petrol Level & Surchage **OUT** **E** **1/4** **1/2** **3/4** **F**

First **120** km FREE per day

Excess mileage is chargeable at **120** cents per km

GST

TOTAL CHARGES



NON WAIVER EXCESS (Subject to GST): \$ **2000**

ACCESSORIES CHECK

- ☐ Data Cards ☐ Camera Systems ☐ Hub Cap ☐ Radio / CD Cartridge
☐ Jack ☐ Tyre Opener ☐ Petrol Cap ☐ Spare Tyre

Hirer's Signature :

Additional Driver's Signature :

SINGAPORE Use Only

I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge/credit card for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have been given BKW Rent A Car Pte Ltd in connection with this agreement is true.

IMPORTANT

- The Hirer and the authorized driver must be over 23 years of age and under 65 years and be holding valid driving licenses and have a minimum of 2 years regular and qualified driving experience. Failure to observe stipulation may return all damages costs to be borne by the Hirer/the Authorised Driver.
- All vehicles are supplied with petrol and should returned with petrol level likewise. A service charge of \$5 on top of a petrol surcharge is payable by the hirer should he fail to return the vehicle at the appropriate petrol level.
- No refund for early return of vehicle. The hirer shall be liable for additional charges for any late return at the rate shown per hour per day, inclusive of CDW and/or PAI where applicable. Any returns after our operation hours will be charged as a full day rental.
- Use of the vehicle for illegal purpose (For instance: in connection with theft, drug peddling or trafficking, smuggling), is strictly prohibited.
- Vehicle strictly for Singapore use only and may not be driven out of Singapore without prior written consent of BKW Rent A Car Pte Ltd. The hirer is liable for a penalty fee of \$200 in addition to the appropriate insurance top up in the case of non-disclosure of Malaysia usage.
- The hirer and/or driver shall be responsible for all damages or losses howsoever caused, all traffic violations, fines and penalties imposed on the vehicle for whatsoever reason in respect of or in connection with its use or operation.
- The hirer and/or driver shall be responsible for all claims, damages, losses, increased insurance premiums, non-waiver excess and cost expense (including

- legal costs on a full indemnity basis), whatsoever and howsoever brought against, suffered or incurred by you in respect of the vehicle or the use or the operation of the vehicle. Full excess amount have to be paid immediately in the event of an accident. The owner reserve the right not to replace a replacement vehicle if an accident occurred. Any damage to the car will be repair at BKW authorized workshop.
- Smoke or permit smoking and transport of pets in the vehicle are not allowed. Any offensive smell e.g. cigarette, durian or pet's smell, the hirer and/or driver shall bear the cost of removing the offensive smell or pet's hair between \$200 - \$400.
 - The Hirer agrees that a punctured tyre, empty petrol tank, loss of vehicle's key or locked keys inside of vehicle, by itself, does not constitute a breakdown and that in the event the owner's 24-Hours Emergency Service is called upon to respond to such occurrence, the Hirer shall bear the cost of such response at \$50.00 per trip.
 - In case of accident, the hirer shall report to rental office immediately. An accident report must be made within 24 hours. Failure to comply, the hirer will have to borne all liability from all parties claim. Full excess amount have to be paid immediately in the event of an accident.
 - The hirer/Driver also have the responsibility to ensure that the radiator water level in the car is sufficient and do not drive when the vehicle is stall and does not have sufficient water. Any damage to the engine will be bear by the hirer/driver.
 - All customers' data will be kept strictly confidential and is solely used for the purpose of completing the sales transactions and other relating matters.
 - I understand and agree to the personal data collection statement stated on the Terms and Conditions Page.

Date Out	Time Out	Mileage	Check By	Remarks
14/7/17	10:30	50937	Alxyl	

Hirer's/Driver Signature

Return Of Vehicle: The Hirer Driver Is Required To Sign In The Column "Signature Of Hirer Driver Failing Which The Day And Time Inserted Below Shall Be Deemed To Be The Day And Time The Vehicle Is Returned To BKW Rent A Car Pte Ltd And The Same Shall Be Accepted As Conclusive Evidence Of The Same And Shall Not Be Challenged Or Questioned On Any Account Whatsoever. And I had cleared my belonging items from the rental vehicle (cashcard, parking coupons, etc)"

Date In	Time In	Mileage	Check By	Remarks
15/7/19	3:32pm	57036	KIMI	15.45

Hirer's/Driver Signature

TAX INVOICE

Our Ref No: GR-19-112380

Date of Request: 12/07/2019

Your Ref No: WALK IN LEE

TEAM AUTOPRO PTE LTD
385 SIN MING DRIVE, #01-02 VICOM INSPECTION CENTRE
SINGAPORE 575718

Dear Sir/Madam,

Your Vehicle No: SGS822L
Date of Accident: 10/07/2019
Place of Accident: AMK AVE 6
Involving Vehicle No: SML8401G

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque

TAX INVOICE

Our Ref No: GR-19-112381
Date of Request: 12/07/2019

Your Ref No: WALK IN LEE

TEAM AUTOPRO PTE LTD
385 SIN MING DRIVE, #01-02 VICOM INSPECTION CENTRE
SINGAPORE 575718

Dear Sir/Madam,

Date of Accident: 10/07/2019
Vehicle No: SGS822L
Place of Accident: ANG MO KIO AVENUE 6 TOWRADS YISHUN
Involving Vehicle No: SML8401G

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SML8401G	ANG MO KIO AVENUE 6 TOWRADS YISHUN	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque

To : **Team AutoPro Pte Ltd**
CRN : **201811621K**
located at : **385 Sin Ming Drive #01-02 Vicom Inspection Centre Singapore 575718**

Letter of Authorization & Undertaking

In Respect of Accident Involving my/our Vehicle No.: SGS822L
and SML8401G and
and and
@ Ang Mo Kio ave 6 Towards Yishun
dated 10/07/2019.

1. I/We hereby irrevocably authorize you to demand claim- settle/receive whatever amount settled/payable by the third party and/or its insurer in my/our name, for the costs of repair, loss of use/rental and all other necessary costs related to my/our vehicle that was damaged pursuant to the aforesaid accident.
2. I/We acknowledge that any settlement you may reach on my/our behalf is on a "Without Prejudice" and "Without Admission Of Liability" basis.
3. I/We agree to assign the whole proceeds of my/our third party claim to you. The third party and /or its insurer shall accept this letter as my irrevocable authorization to pay the compensated amount directly to you – in the form of payment cheque made in favor to **Team AutoPro Pte Ltd.**

In the event that the payment cheque is being made in my/our favor, I/we hereby undertake to return the full amount to you, within 7 days from receiving and clearance of the said payment cheque. Failing which, you will have the legal rights to take legal proceedings against me/us to recover the said sum, with further costs and disbursements to be incurred by me/us.

4. I/We further authorize you to settle the aforesaid claim in a manner that you deem fit and to utilize the monies to pay your charges without further reference to me/us. The payment to you shall amount to a good discharge of your obligation to me/us in respect of the settlement monies.
5. Should the third party claim be unsuccessful due to untruthful statements from me/us, I/we undertake to pay for all your expenses, costs and fees incurred, immediately upon your demand.
6. This authorisation shall remain in force until revoked by me/us in writing to you, subject to terms and conditions being agreed by both parties. I/We further understand that revocation is not allowed once your workshop has commenced on the repair of my/our vehicle.

Yours faithfully,



Claimant Signature & Co's Stamp (if applicable)

Date: 10-07-2019

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	11/07/2019 16:37
Date Of Accident	10/07/2019 07:50
Exact Location Of Accident	ANG MO KIO AVENUE 6 TOWRADS YISHUN
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGS822L
Insured/Policyholder	
Name Of Registered Owner	CHEONG HON FAI ROY (ZHANG HANHUI ROY)
NRIC No	S7512255A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91275552
Alternative Phone No	OFFICE-91275552

Vehicle Particulars

Manufacturer	RENAULT
Model	MEGANE
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5099259672-01
Cover Note Number	

Driver

Name of Driver	CHEONG HON FAI ROY (ZHANG HANHUI ROY)
NRIC No	S7512255A
Date Of Birth	19/04/1975
Occupation	OUTDOOR
Date Of Driving Pass	21/02/2008
Driving Experience	11 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91275552
Fax Number	
Contact Number	OFFICE-91275552
EEmail Address	NOEMAIL

Address	APT BLK 121 ANG MO KIO AVENUE 3 #10-1703 SINGAPORE
Postcode	560121
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	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)	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

REFER TO ATTACHED

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	SML8401G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	CHEONG HON FAI ROY (ZHANG HANHUI ROY)
------	---------------------------------------

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

NECK & BACK PAIN

SGS822L

NO

APT BLK 121 ANG MO KIO AVENUE 3
#10-1703 SINGAPORE

560121

SKETCH PLAN

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. 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:

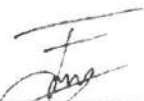
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.



Policyholder's Signature
Date & Time:

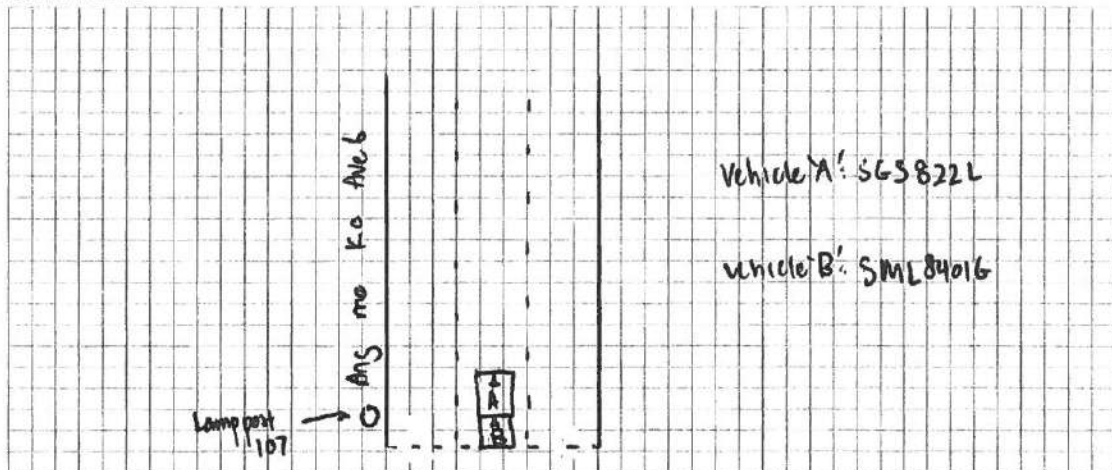


Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, I vehicle 'A' was travelling on my designated lane along Ang mo ko Ave. 6. The vehicle in front of me was stationary as such I followed suit. As I was being stationary for a while I suddenly felt a huge impact hitting me on the rear. I managed to hold my brake as such I did not hit the vehicle in front of me. I then got down to notice that vehicle 'B' has collided into me.

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.:

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: 5099259672-01

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SGS822L**
Chassis Number : **VF1LMDJ0E41893658**
2. Name of Policyholder : **CHEONG HON FAI ROY (ZHANG HANHUI ROY)**
3. Effective Date of Insurance : **26 May 2019**
4. Expiry Date of Insurance : **25 May 2020**
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.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

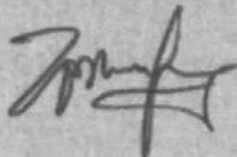
Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: CHEONG HON FAI ROY (ZHANG HANHUI ROY)
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: ACE FINANCIAL SERVICES PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

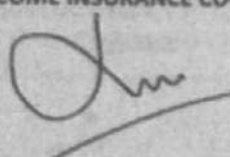
I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : **CHANG HOONG YIP DAVID (00000587827)**
Date of Issue : **14 May 2019 21:18 hrs**

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Authorised Officer



Chief Executive

Countersigned By:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7512255A



Name
CHEONG HON FAI ROY
(ZHANG HANHUI ROY)
张 汉 辉

Race
CHINESE

Date of birth
19-04-1975

Sex
M

Country of birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: S7512255A

Name
CHEONG HON FAI ROY
(ZHANG HANHUI ROY)

Birth Date: 19 Apr 1975

Issue Date: 21 Feb 2008



3732374



NRIC No. S7512255A



Date of issue
23-06-2005

APT BLK 121 ANG MO KIO AVENUE 3 #10-1703
SINGAPORE 560121

NRIC No: S7512255A Date: 04/07/2018

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

PASS DATE

Class 3 Motor Cars < 3000kg with < 7 passengers, exclusive of the driver, and other motor vehicles < 2500kg 21 Feb 2008

NP 428A

License No: S7512255A

