





## 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	22/07/2019 17:21
Date Of Accident	20/07/2019 11:45
Exact Location Of Accident	ALONG LORONG 37 GEYLANG
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMJ9162A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MOHAMED NOOR RAFILI BIN MOHAMED RAMLI
NRIC No	S8035425H
Email Address	LAPITULKOKAM@YAHOO.CO.UK
Mobile Phone No	(LOCAL) +65-94511457
Alternative Phone No	OTHERS-94511457

### Vehicle Particulars

Manufacturer	TOYOTA
Model	ESTIMA-2.4 AERAS (A)
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	5108855424
Cover Note Number	

### Driver

Name of Driver	MOHAMED NOOR RAFILI BIN MOHAMED RAMLI
NRIC No	S8035425H
Date Of Birth	07/11/1980
Occupation	INDOOR
Date Of Driving Pass	09/04/2001
Driving Experience	18 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94511457
Fax Number	
Contact Number	OTHERS-94511457
Email Address	LAPITULKOKAM@YAHOO.CO.UK

Address	BLK 550A SEGAR ROAD #14-614
Postcode	671550
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?	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)	5
Passenger 1	NAME: : SITI SABARIAH BTE ABD RASHID GENDER: : FEMALE
Passenger 2	NAME: : SARAH RANIA BTE MD NOOR RAFILI GENDER: : FEMALE
Passenger 3	NAME: : SHARLEEZ ROSE BTE MD NOOR RAFILI GENDER: : FEMALE
Passenger 4	NAME: : SHARIQ REZZA BIN MD NOOR RAFILI GENDER: : MALE

#### 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?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJN4322C
Vehicle Make/Model/Colour	HONDA CIVIC
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)	



## SKETCH PLAN

Veh A: SMJ 9162 A  
Veh B: SJN 4322 C

### IMPORTANT NOTICE

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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.

\*\* I AM AWARE THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

Policyholder's Signature

Date & Time: 22.07.19  
1515 hrs

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

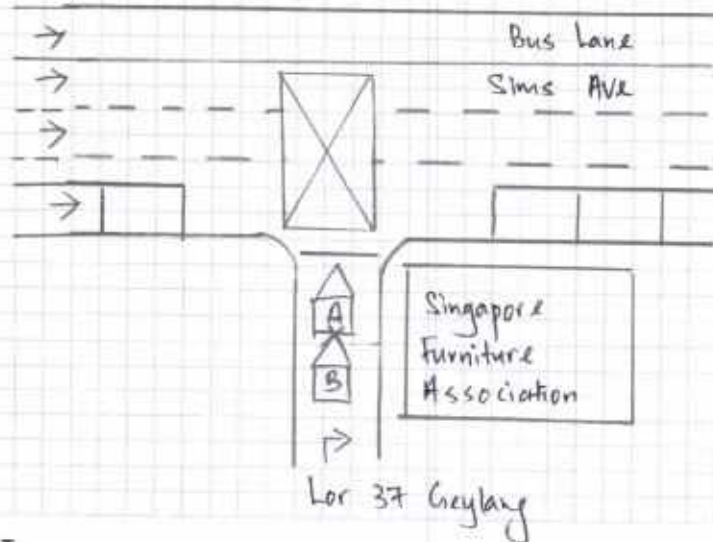
Name:

NRIC/FIN No.:

**SKETCH PLAN**

Veh A: SWJ 9162 A

Veh B: SJN 4322 C



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

While i was stationary at the junction Lor 37 Geylang waiting for the traffic clear before make my turn to Sims Ave. However Vehicle B behind me collided onto rear of my vehicle.

**DECLARATION**

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

*Prof.*

Policyholder's Signature

Date & Time: 22.07.19  
1515 hrs

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

*22/07/2019*  
*Rishi*

## Claim Handling

Accident HT/1054545

Policy No.	510855424	Vehicle No.	SH9162A	GST Registration No.	
Certificate No.					
Policyholder Name	MUHAMMAD NOOR RAFFI BIN MUHAMMAD RAMLI			Policyholder NRIC	80035425H
Product Code	PRIVATE CAR INSURANCE	Cover Type	Third CLASSIC	Loading	0
Contact No.(Mobile)	94511457	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remarks		eCode	No *
KFK	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	TCA	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	eCode Reason	
NCD Protection	No	NCD Endowment(%)	10	Private Hire	No

## Accident Details

Report Date	23/07/2019 10:19	Accident Report within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	20/07/2019	Time of Accident hh:mm	11:45	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG LORONG 37 GEYLANG				

## Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	500.00	TP Standard Excess	5.00	Driver is Covered?	Covered
VED OD Excess	0.00	VED TP Excess	0.00		
Additional Excess	0	Total TP Excess Applicable	0.00		
Total OD Excess Applicable	500.00				

## 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 550A #14-614	Address 2	SEGAR ROAD	Address 3	SEGAR PALMVIEW
Address 4	SINGAPORE 671550	Address Type	Singapore address	Post Code	671550
Unit No.		Related Policy Number	510855404		

## OI Driver Info

Driver Name	MUHAMMAD NOOR RAFFI BIN MUHAMMAD RAMLI	Driver Type	Main Driver	Driver DOB	07/11/1980
Unnamed Driver Name		Driver NRIC	80035425H	Driving Experience	18
Register Date of Driver License	05/04/2001	Driver Age	38	Contact No.(Home)	
Contact No.(Mobile)	94511457	Contact No.(Office)		Address 1	SEGAR PALMVIEW
Address 1	BLK 550A #14-614	Address 2	SEGAR ROAD	Post Code	671550
Address 4	SINGAPORE 671550	Address Type	Singapore address		
Unit No.				Driver Insurer Company	NTUC
Does he own a Singapore Registered car?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Driver Vehicle No.	SH9162A		

Declaration:					
Breathalyzer or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

## Modification History

Claim 001 New

Claim Type *	CO-MV	Insured Name	MUHAMMAD NOOR RAFFI BIN MUHAMMAD RAMLI	Insured NRIC	80035425H
Contact No.(Mobile)	94511457	Contact No.(Home)	NIL	Contact No.(Office)	
Email Address	apptulokam@yahoo.co.uk	OT Vehicle Number	SH9162A	Vehicle Number	SH9162A
Claim Description	SH9162A / SH9162C ON 20 Jul 2019				Name of Preferred Workshop
Preferred Workshop		Insured Liability	Not at Fault	GIA report	Received
Report No.	Yes	Repaired	Repaired	Preferred Workshop, Name unknown	
Date Registered		Repair Option			
Report Taken By	BOSLI WAHAB				
Print AK letter					

Save Submit

## Attachment

Accident No.	HT/1054545	Claim No.	001	Upload Date	23/07/2019 10:26
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No				
Path *					
Choose File	No file chosen	Clear	Please Select	Category *	Confidential
Choose File	No file chosen	Clear	Please Select	Urgency *	Description *
Choose File	No file chosen	Clear	Please Select	Normal	
Choose File	No file chosen	Clear	Please Select	Normal	
Choose File	No file chosen	Clear	Please Select	Normal	
Choose File	No file chosen	Clear	Please Select	Normal	
Choose File	No file chosen	Clear	Please Select	Normal	
Choose File	No file chosen	Clear	Please Select	Normal	
Message Read					
Attachment List					
Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 23 Jul 2019 10:26	Photos	Normal	Photos 2019-7-23	
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 23 Jul 2019 10:26	Photos	Normal	Photos 2019-7-23	

	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:29	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:28	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:26	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:26	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:26	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:23	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:23	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:23	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:23	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:23	Photos	Normal	Photos 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:23	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-7-23
	NAC_BUKIT_MERAH_800676( NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 23 Jul 2019 10:23	SAS	Normal	SAS 2019-7-23

Video List

Uploaded By/Date	Folder Data	File Name	Source	Action
		<a href="#">Display in New Window</a> <a href="#">Scan and uploading</a>		



# Accord Auto Services Pte Ltd

Tel: 6271 7433 / 9274 0999 Fax: 6274 5715 Email: [avclaims@mycarworkshop.com](mailto:avclaims@mycarworkshop.com)

## Particular Of Insured/Driver & Details Of The Accident Motor Accident Report

\*Date of Accident: 20.07.19 \*Time of Accident: 1145 hrs  
\*Accident Location: Lor 37 Aeyang

### Vehicle Details

\*Vehicle Number: SMJ 9162 A \*Make & Model: Toyota Estima Aeras 2.4A

### Insured / Policyholder

\*Owner Name: Muhammed Noor Rafili & Mohamed Ramli \*NRIC: S8035425H  
\*Address: BLK 59DA Segor Rd #14-614 671550  
\*Email: lapitulkokam@yahoo.co.uk \*HP: 9451 1457  
\*Occupation: Civil Servant (Indoor / Outdoor) \*Tel / H / Other: \_\_\_\_\_

### Driver ☒ same as above

\*Driver Name: \_\_\_\_\_ \*NRIC: \_\_\_\_\_  
\*Address: \_\_\_\_\_  
\*Date of Birth: \_\_\_\_\_ \*Driving Pass Date: 9 Apr 2001 \*HP: \_\_\_\_\_  
\*Email: \_\_\_\_\_ \*Gender: Male / Female  
\*Occupation: \_\_\_\_\_ (Indoor / Outdoor) \*Tel / H / Other: \_\_\_\_\_  
\*Driver an employee: Yes / No (\*If no, what is relationship with the policyholder: \_\_\_\_\_)

### Passengers Details

\*P/Name: Siti Sahariah bte Abd Rashid (Male/Female) \*P/Name: Sarah Rania bte Md Noor Rafili (Male/Female)  
\*P/Name: Shahin Peera bin Md Noor Rafili (Male/Female) \*P/Name: Shahleez Rose bte Md Noor Rafili (Male/Female)

### Insurance Company

\*Insurer: NTUC Income \*Coverage: C / TPFT / TPO \*Policy No: \_\_\_\_\_

### Detail of other vehicle / Property 1

Vehicle No.: SJN 4322C  
Make & Model: Honda Civic  
Vehicle Category: \_\_\_\_\_  
Name of Driver: \_\_\_\_\_  
NRIC : \_\_\_\_\_  
HP : \_\_\_\_\_  
No. of Passengers (Including Driver): \_\_\_\_\_

### Detail of other vehicle / Property 2

Vehicle No.: \_\_\_\_\_  
Make & Model: \_\_\_\_\_  
Vehicle Category: \_\_\_\_\_  
Name of Driver: \_\_\_\_\_  
NRIC : \_\_\_\_\_  
HP : \_\_\_\_\_  
No. of Passengers (Including Driver): \_\_\_\_\_

### For Official Use Only

\*Claiming against Own Ins.: Yes / No (If No, Reporting Only / TP Claims)

### General Information of the accident

\*Type of accident: Head-Rear / Side swipe / others: \_\_\_\_\_  
\*Weather conditions: Clear / Raining / others: \_\_\_\_\_ \*Any video cam: Yes / No  
\*Road Surface: Dry / Wet / others: \_\_\_\_\_  
\*Witness: Yes / No (Name: \_\_\_\_\_ NRIC: \_\_\_\_\_ HP: \_\_\_\_\_)  
\*Accident reported to police: Yes / No \*Summon against whom: \_\_\_\_\_  
\*Injured party: Yes / No \*No. of passengers (include driver): \_\_\_\_\_  
-I/Name: \_\_\_\_\_ \*Fasten seat belt: Yes / No \*Conveyed by Ambulance: Yes / No  
-I/Name: \_\_\_\_\_ \*Fasten seat belt: Yes / No \*Conveyed by Ambulance: Yes / No

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: S8035425H

MOHAMED NOOR RAFILI BIN  
MOHAMED RAMLI

**For LKK/NAC Use Only**

Birth Date: 07 Nov 1980  
Issue Date: 08 Apr 2003

000362263A

REPUBLIC OF SINGAPORE

IDENTITY CARD NO: S8035425H

**For LKK/NAC Use Only**

MOHAMED NOOR RAFILI BIN  
MOHAMED RAMLI

Race: BOYANESE  
Date of birth: 07-11-1980  
Country of birth: SINGAPORE

Sex: M

LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class	Description	Valid Until
Class 2B	MOTORCYCLES NOT EXCEEDING 200 CC	22 Jul 2010
Class 2	MOTOR CARS AND MOTOR TRACTORS THE WEIGHT OF WHICH DOES NOT EXCEED 2500 KILOGRAMS	07 Apr 2003
Class 4	HEAVY MOTOR CARS AND MOTOR TRACTORS THE WEIGHT OF WHICH EXCEEDS 2500 KILOGRAMS	28 Jan 2006

**For LKK/NAC Use Only**

S / No. 9000249008

NP 428A

License No: S8035425H

4553639

8035425H

**For LKK/NAC Use Only**

Date of issue: 26-11-2010

APT BLK 550A SEGAR ROAD #14-814  
SINGAPORE 671550

NRIC No: S8035425H Date: 06/03/2015



## 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: 5108855424

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SMJ9162A**  
Chassis Number : ACR500166971
2. Name of Policyholder : MOHAMED NOOR RAFILI BIN MOHAMED RAMLI
3. Effective Date of Insurance : 17 Apr 2019
4. Expiry Date of Insurance : 16 Apr 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	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: MOHAMED NOOR RAFILI BIN MOHAMED RAMLI
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: MAYBANK SINGAPORE LIMITED
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 : IMOTOR INSURE (00000573595)

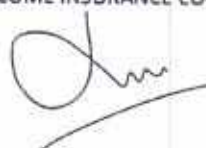
Date of Issue : 16 Apr 2019 15:31 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive