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W

FOCUS AUTO PTE LTD

NO. 1 KAKI BUKIT AVENUE 6 #02-48/50 AUTOBAY @ KAKI BUKIT SINGAPORE 417883
TEL: 6886 9097 FAX: 6886 9095 Email: focus.autopteltd@yahoo.com.sg
GST:201004495R RCB NO:201004495R

not Approved
14/8/19
20 Aug

M/S : INDIA INTERNATIONAL INSURANCE PTE LTD

64 CECIL STREET
#04-#05 IOB BUILDING
SINGAPORE 049711

TEL: 6347 6100 FAX: 6224 4174

ATTN: Motor Claim Department

Your Ref No: SJZ4505D

Claim Type: Third Party

Accident Date: 08/10/2019

TP Veh Reg No: pc90J

Estimate No: EST0000978

Date: 22 Aug 2019

Policy No: 5098714530-01

Veh Reg No: SJZ4505D

Make/Model: TOYOTA WISH 1.8 CVT

Chassis No: JTDGG20W905001385

Engine No: 2ZRA635621

Reg. Date: 26/11/2010

Estimate Repair Cost for Vehicle No :SJZ4505D

PAGE:1/4

Description	U/Price	Quantity	List Price S\$	Amount S\$
List Price				
1 Front Bonnet	See	865.00	1 PC	865.00 ✓
2 Front Bonnet Hinges	See	65.40	2 PCS	130.80 ✓
3 Front Bonnet Lock	See	76.30	1 PC	76.30 ✓
4 Front Bonnet Cable	See	76.20	1 PC	76.20 ✓
5 Front Bonnet Emblem	See	60.00	1 PC	60.00 ✓
6 Front Bonnet Insulator	See	208.90	1 PC	208.90 ✓
7 Front Bonnet Insulator Clip	See	5.50	6 PCS	33.00 ✓
8 Front Wiper Panel Garnish	See	226.20	1 PC	226.20 ✓
9 Front Wiper Panel Side Garnish	See	65.40	2 PCS	130.80 X
10 Front Wheel Housing	See	764.20	1 PC	764.20 X
11 Front Wheel Housing Side Panel	See	246.40	1 PC	246.40 X
12 Front Centre Brace	See	100.40	1 PC	100.40 ✓
13 Front Support Panel	788-10	See	1,289.00	1,289.00 ✓
14 Front Support Panel Top Garnish	See	298.40	1 PC	298.40 ✓
15 Front Support Panel Top Garnish Clipse	See	5.50	4 PCS	22.00 ✓
16 Front Fender	See	687.20	2 PCS	1,374.40 1 PC
17 Front Fender Dust Covers	See	189.60	2 PCS	379.20 1 PC
18 Front Fender Dust Cover Clips	See	5.50	16 PCS	88.00 X
19 Front Grille	See	286.20	1 PC	286.20 ✓
20 Front Grille Clip	See	8.50	4 PCs	34.00 X
21 Front Head Lamp	See	950.00	2 PCS	1,900.00 ✓
22 Front Horn	See	80.20	1 PC	80.20 X
23 Front Bumper	See	810.00	1 PC	810.00 ✓
24 Front Bumper Side Retainer	See	68.20	2 PCS	136.40 ✓
25 Front Bumper Inner Sponge	See	128.40	1 PC	128.40 ✓

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Policy No: 5098714530-01

Veh Reg No: **SJZ4505D**

Make/Model: TOYOTA WISH 1.8 CVT

Chassis No: JTDGG20W905001385

Engine No: 2ZRA635621

Reg. Date: 26/11/2010

Estimate Repair Cost for Vehicle No :SJZ4505D

PAGE:2/4

Description	U/Price	Quantity	List Price S\$	Amount S\$
26 Front Bumper Reinforcement	Dis 289.40	1 PC	289.40	✓
27 Front Bumper Reinforcement Bracket	Dis 80.20	2 PCS	160.40	1PC
28 Front Bumper Fog Lamp	Dis 368.50	2 PCS	737.00	1PC
29 Front Bumper Fog Lamp Cover	Dis 85.90	2 PCS	171.80	1PC
30 Front Bumper Fog Lamp Chrome Cover	Dis 50.20	2 PCS	100.40	1PC
31 Front Bumper Lower Side Grille	11 58.20	2 PCS	116.40	X
32 Front Bumper Lower Cover	Dis 326.40	2 PCS	652.80	1PC
33 Front Washer Tank	Dis 98.20	1 PC	98.20	✓
34 Front Washer Tank Motor	11 180.40	1 PC	180.40	X
35 Front Washer Tank Joint Tube	11 60.20	1 PC	60.20	X
36 Front Aircon Condenser	Dis 1,046.20	1 PC	1,046.20	✓
37 Front Aircon Condenser Side Garnish	Dis 80.40	2 PCS	160.80	1PC
38 Front Aircon Aluminium Pipe	11 210.40	1 PC	210.40	X
39 Front Aircon Discharge Hose	Ref 296.50	1 PC	296.50	✓
40 Front Aircon Suction Hose	Ref 294.60	1 PC	294.60	✓
41 Front Aircon Compressor	Dis 950.40	1 PC	950.40	✓
42 Front Aircon Fan Blade	Ref 90.40	1 PC	90.40	✓
43 Front Aircon Fan Motor	11 298.40	1 PC	298.40	X
44 Front Radiator	Dis 1,465.40	1 PC	1,465.40	✓
45 Front Radiator Top Bracket	11 126.20	1 PC	126.20	X
46 Front Radiator Fan Cowling	Ref 346.40	1 PC	346.40	✓
47 Front Radiator Fan Blade	11 92.20	1 PC	92.20	X
48 Front Radiator Fan Motor	11 298.40	1 PC	298.40	X
49 Front Radiator Spare Tank	Ref 102.20	1 PC	102.20	✓
50 Front Radiator Lower Hose	11 80.40	1 PC	80.40	X

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Accident Date: 08/10/2019

TP Veh Reg No: pc90J

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Veh Reg No: SJZ4505D

Make/Model: TOYOTA WISH 1.8 CVT

Chassis No: JTDGG20W905001385

Engine No: 2ZRA635621

Reg. Date: 26/11/2010

Estimate Repair Cost for Vehicle No :SJZ4505D

PAGE:3/4

Description	U/Price	Quantity	List Price S\$	Amount S\$
51 Front Radiator Lower Rubber	an 85.40	2 PCS	170.80	X
52 Front Dashboard	Tota 1,046.20	1 PC	1,046.20	✓
53 Front Steering Wheel AirBag	Ach 980.00	1 PC	980.00	✓
54 Front Side Air Bag - Left	Ach 1,246.20	1 PC	1,246.20	✓
55 Front Air Bag (Electric Control Unit)	Ach 850.40	1 PC	850.40	✓
56 Front Seat Belt	An 780.20	2 PCS	1,560.40	✓
57 Front Engine Side Cover	Reg 98.20	2 PCS	196.40	X
58 Front Centre Eng Front Mounting	Tota 216.20	1 PC	216.20	✓
59 Front ABS Pump	su 1,242.20	1 PC	1,242.20	X
60 Front Side Skirt - Right 650.10	Tota 980.20	1 PC	980.20	✓
61 Front Shock Absorber - Right	Sci 398.20	1 PC	398.20	X
62 Front Stabilizer Bar	11 294.20	1 PC	294.20	X
63 Front Rod Link - Right	Sci 80.40	1 PC	80.40	✓
64 Front Knuckle Arm - Right	Sci 376.20	1 PC	376.20	✓
65 Front Lower Arm - Right	Sci 367.40	1 PC	367.40	✓
66 Front Hub Bearing - Right	su 210.20	1 PC	210.20	✓
67 Front Engine Crossmember	su 850.20	1 PC	850.20	X
68 Front Centre Crossmember	su 396.20	1 PC	396.20	X
69 Front Engine Mounting - Right	Tota 380.40	1 PC	380.40	✓
70 Front Gearbox Mounting - Right	11 296.40	1 PC	296.40	X
71 Front Drive Shaft - Right	Sci 867.60	1 PC	867.60	✓
72 Front Fan Belt	an 90.40	1 PC	90.40	X
73 Front Engine Intake Manifold	su 760.40	1 PC	760.40	✓
74 Front Engine Top Cover	me 289.20	1 PC	289.20	✓
			32,956.70	
		Less 25%	8,239.18	24,717.54

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Reg. Date: 26/11/2010

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PAGE:4/4

Description	U/Price	Quantity	List Price S\$	Amount S\$
Special Net				
75 Front Number Plate	50.00	1 PC	50.00	40.50
76 Front Tyre - Right	280.00	1 PC	280.00	50.00
77 Front Sport Rim - Right	850.00	1 PC	850.00	350.00
			1,180.00	1,180.00
Labour				
78 Towing	50.00	1	50.00	✓
79 Panel Beating	2,400.00	1	2,400.00	1500
80 Check Wiring & Diagnose Test	280.00	1	280.00	50
81 Rust Proofing	100.00	1	100.00	✓
82 Remove & Refit Engine	520.00	1	520.00	300
83 Remove, Replace Front Under Carriage & ABS Pump	320.00	1	320.00	250
84 To Remove & Replace Dash Board	480.00	1	480.00	280
85 Remove & Replace Air Bag & Seat Belt	380.00	1	380.00	200
86 Remove & Replace Aircon Condensor & Charge Gas	160.00	1	160.00	100
87 Alignment Adjustment	50.00	1	50.00	✓
88 Spray Painting	1,600.00	1	1,600.00	1400
			6,340.00	6,340.00

Total S\$ 32,237.54

TOTAL: SINGAPORE DOLLAR THIRTY TWO THOUSAND TWO HUNDRED THIRTY SEVEN AND CENTS FIFTY FOUR ONLY

of the following:

1. ... spray painting

2. ... (s) during resurvey

3. ... to confirmation

4. ... on a "Without Prejudice" basis

5. ... is allowed

6. ... must be resurveyed and

7. ... approval from Insurance Company

8. ... By Registrar

For FOCUS AUTO PTE LTD

Focus Auto Pte Ltd

No. 1 Kaki Bukit Ave 6 Auto Bay

#02-50 Singapore 417883

Tel: 66349695

AUTHORISED SIGNATURE

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	13/08/2019 16:18
Date Of Accident	10/08/2019 08:20
Exact Location Of Accident	JALAN BUKIT MERAH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJZ4505D
Insured/Policyholder	
Name Of Registered Owner	TW PREMIUM AUTOMOBILE PTE LTD
Co Reg No	201320430G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-91119581

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH
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	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5098714530-01
Cover Note Number	

Driver

Name of Driver	GOPAL S/O KIRUBA GARANE
NRIC No	S7133988B
Date Of Birth	16/09/1971
Occupation	OUTDOOR
Date Of Driving Pass	16/10/1993
Driving Experience	25 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	+65-87994361
Fax Number	
Contact Number	
EMail Address	RENGAMMALGOPAL@YAHOO.COM

Address	BLK 239 BUKIT BATOK EAST AVE 5 #04-171
Postcode	650239
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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?	YES
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)	2
Passenger 1	NAME: : M RENGAMMAL D/O MUTHUSAMY GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE SEE POLICE REPORT.

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

Details of Witness 1

Name	UNKNOWN
Phone Number	96460614
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PC90J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NG ZHENGWEN
NRIC/Passport Number	S8509710E
Contact Number	91161985

Address	NA
	NA
Postcode	NA
Insurance Company Name	
Nature Of Damage	NA
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	GOPAL S/O KIRUBA GARANE
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SJZ4505D
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	BLK 239 BUKIT BATOK EAST AVE 5 #04-171
Postcode	

DETAILS OF INJURED PERSON 2

Name	•M RENGAMMAL D/O MUTHUSAMY
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SJZ4505D
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	BLK 239 BUKIT BATOK EAST AVE 5 #04-171
Postcode	

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE


1. Please report accurately the details of the accident as shown up through this process.
2. This form must be **completed by the Policyholder and/or the Authorized Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any willful misrepresentation will constitute an offence under the Insurance Act and may lead to repudiate policy liability.
4. The issue and receipt of this form by driver(s) does not constitute an admission of liability on the part of the insured party.
5. Any **false reporting** may be referred to the Police for investigation.
6. The report will be forwarded to the insurers if the GIA/Insurers/Ministry of Transport and Infrastructure (MOTI) require the information for the investigation of Singapore (SIAF) regulations and the collection of the information for a complete picture of the accident. Requested 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.

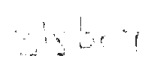
8. Consent under the Personal Data Protection Act (PDPA)

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 claim(s);
 - (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 claim(s) (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 Purpose(s) and:
 - (c) my Personal Information may/are collected by one of the Insurers and/or GIA to disseminate the personal service provided by Insurers and/or GIA to the Insurers' lawyers/law firms, who may be referred to the Insurers' lawyers/law firms for the purpose(s) of the above Purpose(s).
 - (d) my Personal Information may/are collected by the Insurers and/or GIA to disseminate the personal service provided by Insurers and/or GIA to the Insurers' lawyers/law firms, who may be referred to the Insurers' lawyers/law firms for the purpose(s) of the above Purpose(s).
- The Insurers and/or GIA do not intend to use my Personal Information for:
- (a) to be used for any other purpose than that stated above, except as may be required by law, or
 - (b) to be used for any other purpose than that stated above, except as may be required by law, or
 - (c) to be used for any other purpose than that stated above, except as may be required by law, or


Policyholder's Signature
Date & Time


Authorized Driver's Signature
If driver is not the policyholder, Date & Time


Authorized Driver's Signature
If driver is not the policyholder, Date & Time

Individual Statement

SKETCH PLAN

North
East
West
South

1. Date of accident: 1/27/2019

2. Time of accident: 10:00 AM

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report
Report No. 17-00195811

DECLARATION

I hereby declare that the information provided is true and correct.



Signature & Date

Signature & Date
Signature & Date

Signature & Date
Signature & Date

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20190811/2019

1 of 4

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

Report No. T/20190811/2019

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/08/2019 10:56	Vide Report No.: A/20190810/0052	Station Diary No.: 32
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Informant's Particulars

Name of Informant: GOPAL S/O KIRUBA GARANE			Address: APT BLK 239 BUKIT BATOK EAST AVENUE 5 #04-171 SINGAPORE 650239		
ID Type / ID No.: NRIC NO / S7133988B			Contact No.: Home/Office: Mobile: 87994361		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 47	Date of Birth: 16/09/1971	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3,4 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 10/08/2019 08:20	Type of Location: Junction to CTE from Straight Road
Location: Along Road 1 Traveling Toward Road 2 JALAN BUKIT MERAH CENTRAL EXPRESSWAY Junction of Jalan Bukit Merah and entrance to CTE near blk 131 Jalan Bukit Merah.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
PC90J	Van	TOYOTA			Slightly Damaged	1
SJZ4505D	Car	TOYOTA	wish	Silver	Seriously Damaged	1

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20190811/2019

2 of 4

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

Report No. T/20190811/2019

CONTINUATION OF REPORT

Driver			
Name	Ng Zhengwen	ID No.	S8509710E
Related Vehicle	PC90J (Van)	Contact No.	91161985
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	GOPAL S/O KIRUBA GARANE	ID No.	S7133988B
Related Vehicle	SJZ4505D (Car)	Contact No.	87994361
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	10/08/2019	Date Discharge	10/08/2019
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Passenger			
Name	M Rengammal D/O Muthusamy	ID No.	S7104339H
Related Vehicle	SJZ4505D (Car)	Contact No.	87995076
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	10/08/2019	Date Discharge	10/08/2019
No. of Days granted Medical Leave	06	Degree of Injury	Slight

Brief Details.

On 10/11/2019 at about 0822hrs, while I was driving my silver color Toyota wish car bearing registration: SJZ4505D along Jalan Bukit Merah, a white color Toyota Van bearing registration: PA90J, collided into my vehicle.

I was travelling straight towards the direction of SGH. The traffic light was green in my favor. The Van was coming from the direction of SGH and was turning right into CTE before it collided onto the side of the front bumper on the driver side of my vehicle, head on. Before the van made the turn, a car had made the turn safely.

Immediately after the accident, my wife, M Rengammal D/O Muthusamy and I stepped out of the vehicle for safety. The driver of the van, Ng Zhengwen, and his wife stepped out too. Both of us moved to the



**SINGAPORE
POLICE FORCE**



T/20190811/2019

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

3 of 4

Report No. T/20190811/2019

CONTINUATION OF REPORT

side of the road. Mr Ng apologized to me and we exchanged particulars. My wife was subsequently conveyed by ambulance to SGH after feeling intense pain from the face onwards to the stomach. I was sent by Mr Ng to hospital after I settled my car issues. I felt pain from the head to the hips area.

My vehicle sustained heavy damages on the front driver side of the vehicle. It was rendered unable to move on its own. The van sustained minor damages to the front of the vehicle but was still in working condition.

I was subsequently given 5 days of MC from 10 Aug 2019 to 14 Aug 2019. My wife was given 6 days of MC from 10 Aug 2019 to 15 Aug 2019.



**SINGAPORE
POLICE FORCE**



T/20190811/2019

4 of 4

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

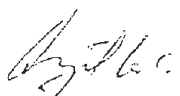
Report No. T/20190811/2019

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: J / Sgt 3 MUHAMMAD AMIRUL HASIF BIN MOHAMED YUNOS	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 11/08/2019 10:56
Officer In Charge Of Case: TP / GIT / Staff Sgt SUFIYAN BIN KHAIRI Contact No.: 65476390	Classification Of Case:
Authentication Stamp NP188 