

NATIONAL Assessment Centre Services. [ver 1 Jan'03] MNA 119108142

Date In: 1918/19 10:12	Job description	Date & Time Completed	Done by
Ref No: NA/ AIG 19014360 /h4	SAS e-filing		
Veh No: SLP 8043Y	E-mail (within 2hrs, AIG 2hrs)		
ICOA 1618/19 16:00	I-Motor Claim Form		
(D) <input checked="" type="radio"/> Reporting Only	I-Motor W/O (within: OD 2hrs, TP 4hrs)		
TP Insurer:	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksn		

Preferred Wksp / INC Assign Wksp / QW: ()	Tel: ()	Fax: ()
TP Particulars:	Veh No: SLM 736A	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% P: 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 19014360 /h4)

1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: ()

Date/Time	Action

MNA 1906085		RAH (3) Ind Bill	
Comments Particulars:	1) AR: Accident Reporting (\$30)	30-00	
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$40)		
Contact No:	3) TP: Towing Fee \$40/\$45		
Damaged Portion:	4) PT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) PT: Follow-Through Survey (Resurvey) \$30		
Auditors Comments:	For claiming against INC Only (ver 10 Jan 2003)		
Ref: 1	6) TR: Re-inspection \$75		
Ref: 2	7) NI: Idao DA + SMRT Survey \$160		
Ref: 3	8) NTUC Additional Services:-		
	ON:		
	*NS: Courtesy Car / Tpl Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (Nil): TP (Non INC) against INC \$20		
	9) N12: Idao Mobile \$0		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

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	19/08/2019 10:12
Date Of Accident	16/08/2019 16:00
Exact Location Of Accident	ALONG AYE TWDS CITY
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLP8043Y
Insured/Policyholder	
Name Of Registered Owner	NG CHEE LEONG (HUANG ZHILIANG)
NRIC No	S7522527Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97420867
Alternative Phone No	OFFICE-97420867
Vehicle Particulars	
Manufacturer	NISSAN
Model	QASHQAI
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1700018443-02
Cover Note Number	-
Driver	
Name of Driver	NG CHEE LEONG (HUANG ZHILIANG)
NRIC No	S7522527Z
Date Of Birth	22/07/1975
Occupation	INDOOR
Date Of Driving Pass	21/11/1996
Driving Experience	22 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97420867
Fax Number	
Contact Number	OFFICE-97420867
Email Address	NOEMAIL

Address	BLK 838 JURONG WEST ST 81 #12-157
Postcode	640838
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	CHAIN COLLISION
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	4
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?	YES
If Yes, Please state which Police Station	
Police Station Name	NANYANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 2 JURONG WEST AVENUE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7929999 - FAX NO: 67912972
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT T/20190817/2035

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	SLM736A
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 OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKK2104H
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 OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SKL5096Y
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 NG CHEE LEONG (HUANG ZHILIANG)
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SLP8043Y
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

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:

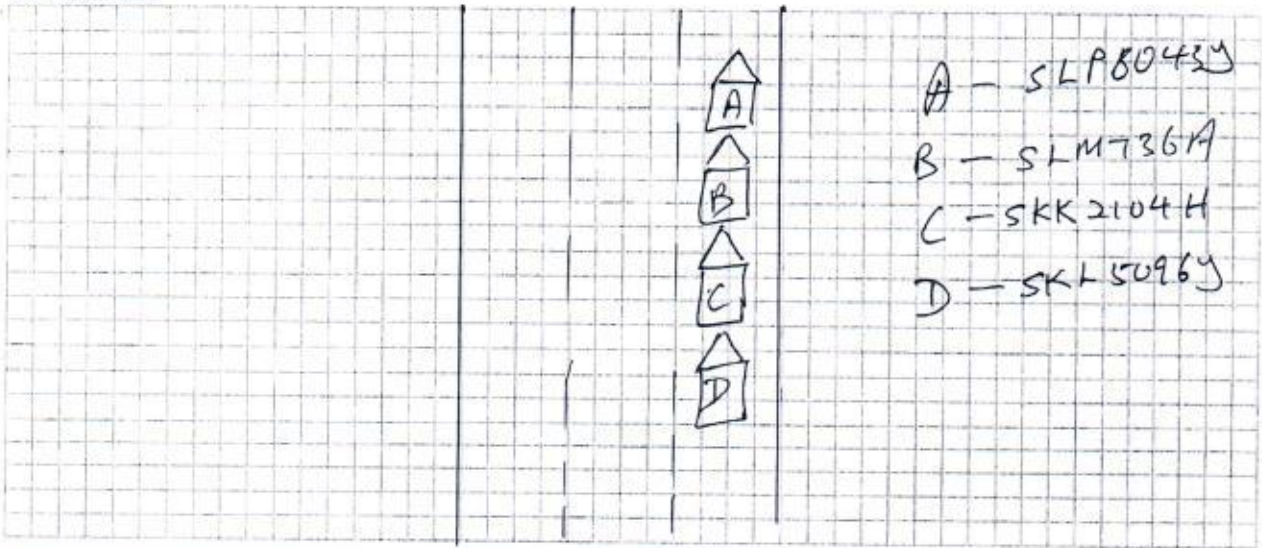


Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on the stated time and time, I was driving my car A along AYE towards MCP. In front of the vehicle slow down. I fellow suit. suddenly I felt an impact from behind. When I realized that vehicle B hit on my rear portion. There were 4 cars involved in an accident.

DECLARATION

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

[Signature]

Policyholder's Signature
Date & Time:

[Signature]

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

[Signature]

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

Date of Accident : 16/8/19 Accident Time: 4pm (24-HR-Format)
Accident Place : along AYE towards MCP
Vehicle No. (Car Plate No.) : SLP 8043Y Make/Model: Nissan Qashqai
Insurance Company : AI Policy No: 1700018443-02
Owner or Company Name /IC No. : Ng chee Leong / 57522527Z
Owner or Company Contact No. : _____ Owner's Hp 97420867 Company Tel _____
DRIVER'S Name / IC No. : as above
DRIVER'S Date Of Birth : 22/7/1975 DRIVER'S License Pass Date 21/11/1996
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: owner
DRIVER'S Address : Blk 838 Jurong West St 81 #12-157
DRIVER'S Contact No. / Alt No. : (1) _____ 2) 5640838
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address : _____
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including Driver): NO
Was there any video Captured by car camera: YES NO
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
Any Injury (If YES, Pls state): yes

Other Party Driver's Particular (if any)

Vehicle No: SLM 736A
Vehicle Make/Model: _____
Name Driver: _____
IC No. Driver/Contact: _____

Vehicle No: SKK2104H
Vehicle Make/Model: _____
Name Driver: _____
IC No. Driver/Contact: _____
vehicle NO: SKL 5096Y

* NEW - Passenger's name & gender:



Police Station Of Origin
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

1 of 4

Report No: T/20190817/2035

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/08/2019 11:25		Vide Report No.:		Station Diary No.: 83
Informant's Particulars				
Name of Informant: NG CHEE LEONG		Address: APT BLK 838 JURONG WEST STREET 81 #12-157 SINGAPORE 640838		
ID Type / ID No. NRIC NO / S7522527Z		Contact No.: Home/Office: Mobile: 97420867		
Nationality SINGAPORE CITIZEN		Email:		
Sex Male	Age 44	Date of Birth: 22/07/1975	Type of Informant: Driver	
Race Chinese		Language:	Institution / School Name:	
Occupation Mechanical engineer (general)		Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 16/08/2019 16:30	Type of Location: Straight Road
Location: Along Road 1 AYER RAJAH EXPRESSWAY				
Near to NUS, heading towards City				
Weather Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
SKK2104H	Car				Slightly Damaged	1
SKL5096Y	Car				Slightly Damaged	1
SLM736A	Car				Seriously Damaged	1
SLP8043Y	Car	NISSAN	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR	Blue	Slightly Damaged	1



Police Station Of Origin
Nanyang N.P.C.
2 Jooong West Avenue 5 SINGAPORE
649462
Tel No: 1800-7929899

Report No: 1021908100318

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date
SLP8043Y	AIG ASIA PACIFIC INSURANCE PTE LTD	1700018443-02	19/09/2019	19/09/2020

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

Driver			
Name	Chua Suet Ling	ID No	S8227212G
Related Vehicle	SKK2104H (Car)	Contact No	NIL
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	Chan Tai Lee Terry	ID No	S2718798F
Related Vehicle	SKL5095Y (Car)	Contact No	NIL
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	Fuan Pei Pei	ID No	S7175487A
Related Vehicle	SLM736A (Car)	Contact No	98516391
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



**SINGAPORE
POLICE FORCE**



T/20190817/2035

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Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

Report No: T/20190817/2035

CONTINUATION OF REPORT

Driver			
Name	NG CHEE LEONG	ID No.	S7522527Z
Related Vehicle	SLP8043Y (Car)	Contact No.	97420867
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	17/08/2019	Date Discharge	17/08/2019
No. of Days granted Medical Leave	05	Degree of Injury	NIL

Brief Details.

On the 16/08/19 at around 1630hrs, I was driving my vehicle SLP8043Y along AYE towards City. I just passed exit 9 but I was driving on the first lane. There was vehicle in front of me that suddenly jammed braked. I managed to stop in time but as I was moving off, a car bearing registration SLM736A collided with my vehicle. I felt my car bumper was hit multiple times. I came down and check and realized that a chain collision happened.

my car, SLP8043Y was the first car, SLM736A was the second car, SKK2104H was the 3rd car and SKL5096Y was the 4th car.

My car sustain damage sustained damage to the rear bumper, SLM736A sustained damaged to the front and back bumper. SKK2104H sustained damages to the front and back bumper while SKL5096Y sustained damages to the front bumper. No one was injured and TP and ambulance did not attend to the incident.

No government property or vehicle was involved. I wish to state that I have an in vehicle camera but the car is currently at the workshop and did not recall the vehicle who jammed braked in front of me.

I went for medical attention at Mount Alvernia Hospital on 17/08/19 for pain at the neck area and right arm as the pain became worse overnight.

I was given 5 days of MC from 17/08/19 to 21/08/19.

I'm lodging this report for insurance claim purpose.



SINGAPORE
POLICE FORCE

T/20190817/2035

T/20190817/2035

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Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

Report No: T/20190817/2035

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/
SHAO QIANKANG

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
SI MOHAMAD ZULFAZDLI BIN ABDULLAH
Contact No: 65476204



Investigation Stamp

SN 127

Signature:

Singapore Police Force

Signature Of Informant:

Date/Time:
17/08/2019 11:25

Classification Of Case:

PUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number S7522527Z

NG CHEE LEONG
(HUANG ZHILIANG)

Birth Date 22 Jul 1975

Issue Date 07 Dec 2006



For LKK/NAC Use Only

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7522527Z



NG CHEE LEONG
(HUANG ZHILIANG)

黄 郑 量

Race

CHINESE

Date of birth

22-07-1975

Country of birth

SINGAPORE

Sex

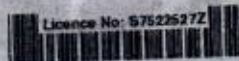
M

S7522527Z

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

PASS DATE

Class 3 Motor cars <= 47 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 21 Nov 1996



Licence No: S7522527Z

NP 428A

/NAC



4845304



NRIC No: S7522527Z

Date of issue

29-03-2012

APT BLK 838 JURONG WEST STREET #12-157
SINGAPORE 640838

NRIC No: S7522527Z

Date: 01/04/2019



CERTIFICATE OF INSURANCE

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Ng Chee Leong (Huang Zhiliang)
Period of Insurance : 19 Jun 2019 To 18 Jun 2020
Engine No. : HRA2417296A
Chassis No. : SJNFEAJ11U1940366

Vehicle No. : SLP8043Y
Policy No. : 1700018443-02
Endorsement No. : 00000000280028
Issued Date : 23 May 2019

ABOUT THE COVER

Make/Model : NISSAN Qashqai 1.2 DIG-Turbo
Engine Capacity/Tonnage : 1,197.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2017
Insuring with COE/PARF : Yes

Person 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.
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 40 years old and above

Limitation as to use* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc

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

EXCESS

Section 1

Fire - \$0 Own Damage - \$500 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Ng Chee Leong (Huang Zhiliang) - \$500 (Own Damage)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. TC AutoClinic Add: No.1, Sixth Lok Yang Road Singapore 626099 62622212
2. Autotution Industrial Add: 19 Ubi Road 4 Singapore 408623 64909666
3. TC AutoClinic Add: 25 Leng Kee Road Singapore 159097 67038511 67038513
4. Tan Chong Motor Sales Add: 913 Bukit Timah Road Singapore 589623 64894091 64894092 64894093
5. Tan Chong Motor Sales Add: 17 Lorong 8 Toa Payoh Singapore 319254 63570753 63570754

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6336 6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Standard Chartered Bank (Singapore) Limited

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1958 (Malaysia).

0500610561

TAN CHONG CREDIT PTE LTD-FBC
911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE
SINGAPORE 589622

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

M. J. J. J.

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

SSCHMD