

Ram

ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estimated Cost: \_\_\_\_\_

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: \_\_\_\_\_

at Workshop no/s: \_\_\_\_\_

of: \_\_\_\_\_

Insured: **FBH 3621C**

Policy No: **5113387040 (15/10/2019-14/10/2020)**

Claims No: **MT/1075237-002**

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Veh: \_\_\_\_\_

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S
X	

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Rpt: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: \_\_\_\_\_ days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Vehicle: IN / OUT

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Veh No: **SHD 4463E** Regn **25/10/2019**

Type: M.Car / M.Cycle / Bus / Van / Lorry **(Taxi)** Prime Mover /

Truck / Trailer or

Make: **Hyundai ioniq (G3)** cc **1580**

Colour: **Blue** A/C: Insured / Std / NI / NA

Sp. Reading: **23352** T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: **KMHCSICVLV187369**

Gen. Cond: **Good** / Fair / Poor / Burnt

Steering: **Inorder** / Jammed / Leaked / Burnt or

Brake: **Inorder** / Jammed / Leaked / Burnt or

Modi: Nil / S/Rim / **STD A/Rim** or

Tyre Size: F: **195 65 R15**

R: \_\_\_\_\_

BS / DUN / EXNOVA / GY / FS / LIZA / **MIC** / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

Rear

R/Bal. **8** mm R/Bal. **8** mm

L/Bal. **8** mm L/Bal. **8** mm

D.O.A. **10/12/19** D.O.I. **11/12/19**

Survey held at **comfortdelgro (coyang)**

Des. of Damages: Frt / Rear / O/S / **(N/S)** / U/C / Rooftop or

**N/S rear**

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time Action / Instruction

**FBH 3621C: X**

**SHD 4463E: NPA/INC19000067/Y DCP: 09/12/2018**

**P/P: \$702.00/- with 2 repair days  
confirm on 14/1/2020 with 2 repair days  
( \$ 130.00 Red - 16% )**

**RECEIVED 15 JAN 2020**

**14/1/2020**

Date/Time, File Pass to?

**15/1/20**

1)

**Typist**



: Prel. Report



: Final Report

Date/Time, File Return to?

3

Report English

**\$ 702.00 /-**

Days Of Repair: **2**

Resurvey No. of Trip: **1**

Add Fee:



: Site Insp. \$



: Interview \$



: Tech. Insp. \$



: Photo \$

Survey Fee:

Transportation:

S + FS \$

Phone

Other

Total

Grand Total

**160**

**160**

eBaoTech

General Claim

Hello, NAC\_PAYA\_UBI\_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

## Policy Query

Policy No.  Date of Accident   
Vehicle No.(For Motor)  Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5113387040		LUTFI BIN SAHIB	S9018424E	GMC	Third Party	FBH3671C	FBH3671C	15/10/2019	14/10/2020

Date/Time: 10.12.2019 18:00

Page : 1

Team: ARC Repair TP(CLSO)1

**JOB CARD**

Sales Order:

JC NO.: 305366134

OMER

S COMFORT TRANSPORTATION PTE LTD

OMER NO. 7010045

ESS 383 SIN MING DRIVE

Singapore SINGAPORE 575717

(R) 65508755

(O)

(P)

JUNT CARD NO.

REGN NO.:

SHD4463E

MILEAGE

MAKE:

HYUNDAI

FUEL

E.....1/2.....F

MODEL

IONIQ(G3)

DATE/TIME IN

10.12.2019 14:55

YR OF MANU.

25.10.2019

TARGET DATE

CHASSIS CODE

KMHC851CVLU187369

COMPLETION DATE/TIME:

JOB DESCRIPTION

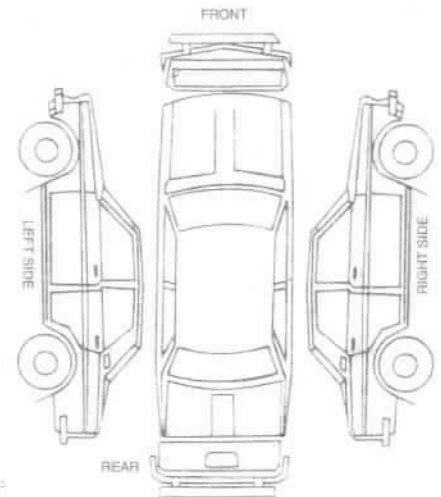
Accident Date: 10.12.2019

NATURE: 3P 10.12.2019

S/NO

LABOR CODE

DESCRIPTION



KED & PASSED OUT BY:

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

edgement Slip

Exit Pass

lo.: SHD4463E

LKE

RAM

Vehicle No.:

SHD4463E

Service Advisor

Signature/Date

Name of Service Advisor

Date

urned to Service Reception upon collection

To be kept by Security Guard

## Shirley Hiew (LKK Auto)

---

**From:** MTCL@income.com.sg  
**Sent:** Wednesday, 15 January 2020 2:30 pm  
**To:** Shirley Hiew (LKK Auto)  
**Subject:** FW: REQUEST CLAIMS NUMBER  
**Attachments:** Claims Form (NTUC) - i-motor.xls

Dear Sir/Mdm,

We have registered the claim.

Our reference number: MT/1075237-002

Best regards

**Diana Tay**  
Senior Admin Assistant  
[www.income.com.sg](http://www.income.com.sg)



At Income, we are 'In with You' on Performance, Growth, Innovation and Impact. These attributes reflect what we promise as an employer and what we want our people to exemplify.  
Find out more at [Income.com.sg/careers](http://Income.com.sg/careers)

in with you

---

**From:** Shirley Hiew (LKK Auto) [mailto:ShirleyHiew@lkkauto.com]  
**Sent:** Wednesday, 15 January 2020 9:02 AM  
**To:** MTCL@income.com.sg; 'mtreg' <mtreg@income.com.sg>  
**Subject:** REQUEST CLAIMS NUMBER

Dear Sir/Madam,

Please provide us the claim number.

*"Wishing you a Happy and Prosperous Lunar New Year"*



## 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	10/12/2019 16:01
Date Of Accident	10/12/2019 14:15
Exact Location Of Accident	OUTSIDE BLK 771 PASIR RIS ST 71
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD4463E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	IONIQ
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	TAXI

### Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	

### Driver

Name of Driver	MAH KOK TONG
NRIC No	S1722043H
Date Of Birth	26/10/1965
Occupation	OUTDOOR
Date Of Driving Pass	28/03/1985
Driving Experience	34 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93831489
Fax Number	
Contact Number	
EMail Address	JENSENMAH69@YAHOO.COM.SG

Address	BLK 425 PASIR RIS DRIVE 6 #10-89
Postcode	510425
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
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	RAINING
Road Surface	WET

#### 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

PLS REFER TO ATTACHED

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBH3671C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	LUTFI BIN SAHIB
NRIC/Passport Number	
Contact Number	81397926
Address	
Postcode	
Insurance Company Name	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Nature Of Damage	NOT SURE
No. Of Passenger (Including Driver)	

#### DETAILS OF INJURED PERSON 1

Name	LUTFI BIN SAHIB
Approximate Age	
Injuries Sustain	ON LEFT LEG
Injured person in which vehicle?	FBH3671C
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

**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.

COMFORT TRANSPORTATION PTE LTD  
CO. REG. NO. 199303821R

Policyholder's Signature  
Date & Time:

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

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

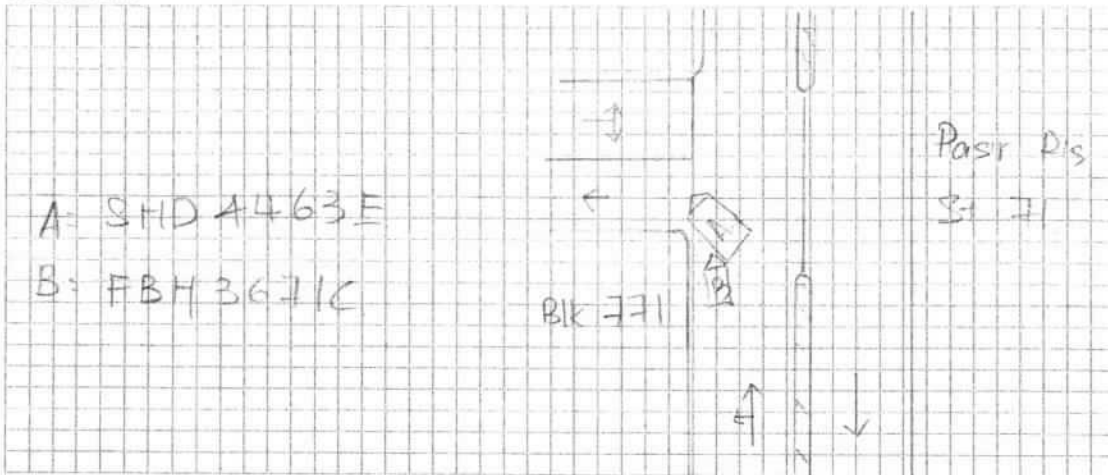
GIA/MAC Sketch Plan Form V3





## Sketch Plan Pg. 2

### SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Travelling along Passir E's St 71 (on case) to block 769, about to turn into the car park of block 766 - 771, the motorbike

FBH 3671 C knock into the taxi on the left side of the passenger side

## DECLARATION

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

COMFORT TRANSPORTATION PTE LTD  
CC REC. NO. 199703821R

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.: \_\_\_\_\_ Loke Wei Yang

Sketch Plan Pg. 3

Lutfi Bin Sahib

S9018424E

FBH3671C

81397926

**TROPICAL INN**

a hotel division of  
HARN LEN CORPORATION BERHAD (502606-H)



15, Jalan Gereja, 80100 Johor Bahru, Johor, Malaysia.

Tel: 07-2247888 Fax: 07-2241544

Website: www.tropicalinn.com.my

I, Lutfi Bin Sahib  
agree not to call police/

ambulance. Get in

accident with taxi

SHP4463E <sup>posir pis</sup> st 71

10/12/19 14:25.

**TROPICAL INN**

a hotel division of  
HARN LEN CORPORATION BERHAD (502606-H)



15, Jalan Gereja, 80100 Johor Bahru, Johor, Malaysia.

Tel: 07-2247888 Fax: 07-2241544

Website: www.tropicalinn.com.my



## COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE\*

VEHICLE NO : SHD 4463E


DATE 10/12/2019 17:00

MAKE :

MODEL : HYUNDAI IONIQ

LKE

NTAC

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rocker Panel Outer Garnish (LH) cut			\$ 290.00
	<b>SUB TOTAL</b>			<b>\$ 290.00</b>
	<b>LESS 20%</b>			<b>\$ 58.00</b>
	<b>DISCOUNTED TOTAL</b>			<b>\$ 232.00</b>
	<b>Labour Charge</b>			
	Panel Beating		\$320	\$ 350.00
	Spray Painting Charge			\$ 250.00
	<b>TOTAL LABOUR</b>			<b>\$ 600.00</b>
	<b>ESTIMATE TOTAL</b>			<b>\$ 832.00</b>
<p>   Rain (LKK)  11/12/19 1400hrs  Parasuram@lkkauto.com  88622778 hp  2 repair days  Bel paint photo </p>				
<p> <b>LKK Auto Consultants</b> hence notify the Repairer of the following:  • To resurvey before/after spray painting  • To display damaged part(s) during resurvey  • Parts prices are subject to confirmation  • Third party survey is on a "Without Prejudice" basis  • No illegal modification(s) is allowed  • Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company    Acknowledged by Repairer  Signature:  Date: </p>				
This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.				

Our Job Ref No 305366134

Date : 13.01.20

ComfortDelGro Engineering Pte Ltd  
59 Loyang Drive Singapore 508969  
Fax: 6546 8156

## FINALIZATION FORM

To : LKK

Fax :

Attn : Mr RAM

Vehicle Reg No. SHD4463E CTPL

10.12.19

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: NTUC --- FBH3671C

2. The finalized amount shall be:

(a) Spare Parts after List discount \$232.00

(b) Labour Charges \$470.00

**Total for Part-By-Part Repair Cost \$702.00**(c) Lumpsum Repair (if applicable)  
Total for Lumpsum repair cost after Less: 20%  
**Final Lumpsum Repair cost**

3. Estimated normal period for repairs: 2 working days.

4. We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days

5. Thank you for your assistance.

We confirm the estimates and  
finalized amountSignature : 

Name : LIM KWOK ENG

Tel : 62148316

Fax : 65468156

Signature : 

Name : Ram

Date : 14/1/2020

## For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		NO		
3. Survey Fees				
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

## COMFORTDELGRO ENGINEERING PTE LTD

REPAIR ESTIMATE\*

VEHICLE NO : SHD 4463E

DATE 10/12/2019 17:00

MAKE :

MODEL : HYUNDAI IONIQ

LKE

NTA

Qty	Parts Description/ Labour	Type	Unit Price	Amount
	Rocker Panel Outer Garnish (LH) CUT			\$ 290.00
	SUB TOTAL			\$ 290.00
	LESS 20%			\$ 58.00
	DISCOUNTED TOTAL			\$ 232.00
	Labour Charge			
	Panel Beating		\$320	\$ 350.00
	Spray Painting Charge		\$150	\$ 250.00
	TOTAL LABOUR			\$ 600.00
	ESTIMATE TOTAL			\$ 832.00

Rain (LKE)  
 11/12/19 1400hrs  
 Parasuram@LKEout.com  
 88622778 hp  
 2 repair days  
 Ref paint photo

This is an initial estimate based on a visual inspection of the above vehicle. The final repair quantum will be prepared after the vehicle is surveyed by a motor Surveyor appointed by the insurance company.

COMPANY : THIRD PARTY'S CLAIMS (CAS)  
CUSTOMER: 7010045  
ADDRESS : COMFORT TRANSPORTATION PTE LTD  
383 SIN MING DRIVE  
SINGAPORE SINGAPORE 575717  
65508755

JOB NO : 305366134  
REGN NO : SHD4463E  
MILEAGE : 0000000000  
MAKE : HYUNDAI  
MODEL : IONIQ(G3)  
DATE OF REGN : 25.10.2019  
DATE/TIME IN : 10.12.2019 14:55  
ACCIDENT DATE : 10.12.2019

## JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

## PART REQUISITION

0001 04-01-0104-0920-G IONIQ MOULDING ASSY-SIDE 1 L 290.00 20.00 232.00 ✓  
SUB-TOTAL : 232.00

## JOB NATURE

0000 L PANEL BEATING 320.00 ✓  
0001 23-502 SPRAYPAINT ON AFFECTED AREA 150.00 ✓  
SUB-TOTAL : 470.00

TOTAL : 702.00

MVA NAME & SIGNATURE  
DATE :

AUTHORISED : YES / NO  
SURVEYOR NAME & SIGNATURE  
DATE :



# National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



NTUC INCOME INSURANCE CO-OPERATIVE LTD Ref: NS/INC19021877/Fsf3e2

73 BRAS BASAH ROAD

#05-01 NTUC TRADE UNION HOUSESINGAPORE Date: 23-01-2020

189556



Code: INC4

## 1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	FBH 3671C	Veh. Inspected	SHD 4463E
Policy No.	5113387040	Coverage (\$)	0.00
Claim No.	MT/1075237-002	Excess (\$)	0.00
Assign From		Assign Date	11/12/2019

## 2. Vehicle Particulars & Condition

Make & Model	HYUNDAI IONIQ	c.c	1580
Engine No.	HIDDEN	Year of Reg.	2019
Chassis No.	KMHC851CVLU187369	Colour	BLUE
Odometer	23352	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	GOOD		

## 3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	195/65 R15	MICHELIN	8 mm
L/H Front Tyre	195/65 R15	MICHELIN	8 mm
R/H Rear Tyre	195/65 R15	MICHELIN	8 mm
L/H Rear Tyre	195/65 R15	MICHELIN	8 mm

## 4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S REAR PORTION. DAMAGES SEE DETAILS.
--

## 5. General Information

Accident Date	10/12/2019	Inspection Date	11/12/2019
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

## 5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
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## 5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR:	2 Working Days
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# National Assessment Centre Services

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6841 0055 FAX: 6841 6315

Reg. No: 52983356E GST Reg. No. 20-0405911-H



Page No.:1 of 1

## ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SHD 4463E

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
1	<b>REPLACEMENT OF PARTS</b>	CUT		
	ROCKER PANEL OUTER GARNISH (LH)		290.00	290.00
	LESS 20% DISCOUNT		-58.00	-58.00
			232.00	232.00
	<b>LABOUR</b>			
	PANEL BEATING.		350.00	320.00
	SPRAY PAINTING CHARGE.		250.00	150.00
			600.00	470.00
GRAND TOTAL			832.00	702.00
RECOMMENDED COST OF REPAIRS (CONFIRMED)				702.00

Report Ref No. NS/INC19021877/Fsf3e2

PARASURAM S/O SHANMUGAM

Asst. Automotive Assessor

K.K.LAU CPT(RET)

BEng(Hons),B.Bus,MBA,PEng,PE,  
MInstAEA,MASME,MIRTE

REGD Auto Consultant-SAE, Licensed Appraiser

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