

Address	BLK 2D UPPER BOON KENG ROAD #19-662
Postcode	384002
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	COLLISION - U-TURN
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ANG MO KIO NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 51 ANG MO KIO AVE 9 , POSTCODE: 569784 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4849999 - FAX NO: 62181399
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE SEE ATTACH POLICE REPORT : T/20190604/2088

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	FN3939C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	SEBASTIAN LI JUN NAN
NRIC/Passport Number	S8946498F
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1	
Name	SEBASTIAN LI JUN NAN
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	FN3939C
Were seat belts worn?	NO
Was this injured conveyed to hospital by ambulance?	YES
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)**

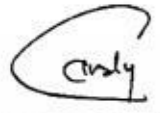
I understand, acknowledge, agree and consent that:

- (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:

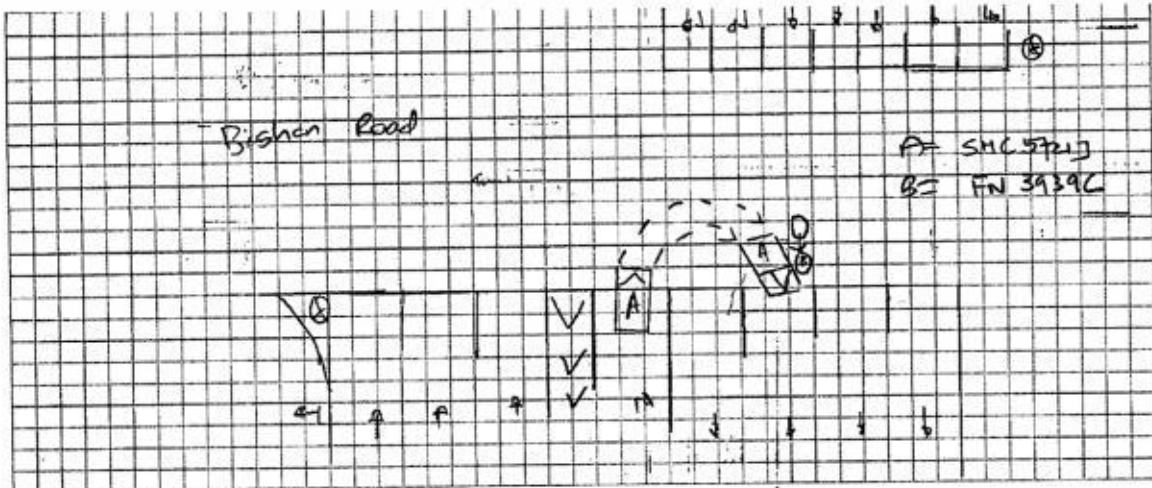


Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

Sketch Plan #2 Pg. 1



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

pls see attach police Report

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.:



**SINGAPORE
POLICE FORCE**



T/20190604/2088

1 of 3

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

Report No. T/20190604/2088

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/06/2019 12:40	Vide Report No.: E/20190604/0037	Station Diary No.: 39
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Informant's Particulars

Name of Informant: LIM KUAN CHONG			Address: APT BLK 2D UPPER BOON KENG ROAD #19-662 SINGAPORE 384002		
ID Type / ID No.: NRIC NO / S01569921			Contact No.: Home/Office: Mobile: 97594452		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 69	Date of Birth: 25/06/1949	Type of Informant: Driver		
Race: Chinese			Language: Chinese		Institution / School Name:
Occupation: TAXI DRIVER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 04/06/2019 07:05	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 BISHAN ROAD BISHAN STREET 14 X-JUNCTION BETWEEN BISHAN RD AND BISHAN ST 14				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: No Traffic
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
FN3939C	Motorcycle				Slightly Damaged	0
SHC5721J	Car				Slightly Damaged	0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20190604/2088

2 of 3

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

Report No. T/20190604/2088

CONTINUATION OF REPORT

Rider			
Name	SEBASTIAN LI JUN NAN		ID No. S8946498F
Related Vehicle	FN3939C (Motorcycle)		Contact No. NIL
Hospital/Clinic	TAN TOCK SENG HOSPITAL		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	LIM KUAN CHONG		ID No. S0156992I
Related Vehicle	SHC5721J (Car)		Contact No. 97594452
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 04/06/2019 at about 0705hrs, I was driving Transcab taxi SHC5721J along Bishan Rd towards Ang Mo Kio on the first lane from the right. The traffic light was red at that point of time and I stopped behind a van. When the traffic light turned green in my favour, the van moved off and made an U-turn. I saw that there was no oncoming vehicles from the opposite side of the road so I also made a U-turn and when I completed the U-turn, my taxi was hit on the front left side of the bumper by a motorcycle.

The motorcycle then fell down and I shifted the taxi to the front of the motorcycle and stopped there. Subsequently I came out of the taxi and saw that the rider walked to the side of the road and I approached the rider and spoke to him. The rider told me that he is injured and felt pain on his body. I saw that there are injuries on the rider's body and called for ambulance. I told the rider to claim through insurance and he acknowledged.

Ambulance and Traffic Police came shortly and the rider was sent to Tan Tock Seng Hospital. The Traffic Police officer advised to me to lodge a report regarding this incident. I wish to state that there is no in-car camera installed my taxi.

I am lodging this report to assist in investigations.



**SINGAPORE
POLICE FORCE**



T/20190604/2088

3 of 3

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

Report No. T/20190604/2088

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:

F /

Sr Staff Sgt NEO ZE HWEE, EDMUND

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sgt 3 MOHAMED RIZWAN BIN IBRAHIM

Contact No.: 93265045

Signature Of Informant:

Date/Time:

04/06/2019 12:40

Classification Of Case:

Authentication Stamp

NP168

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



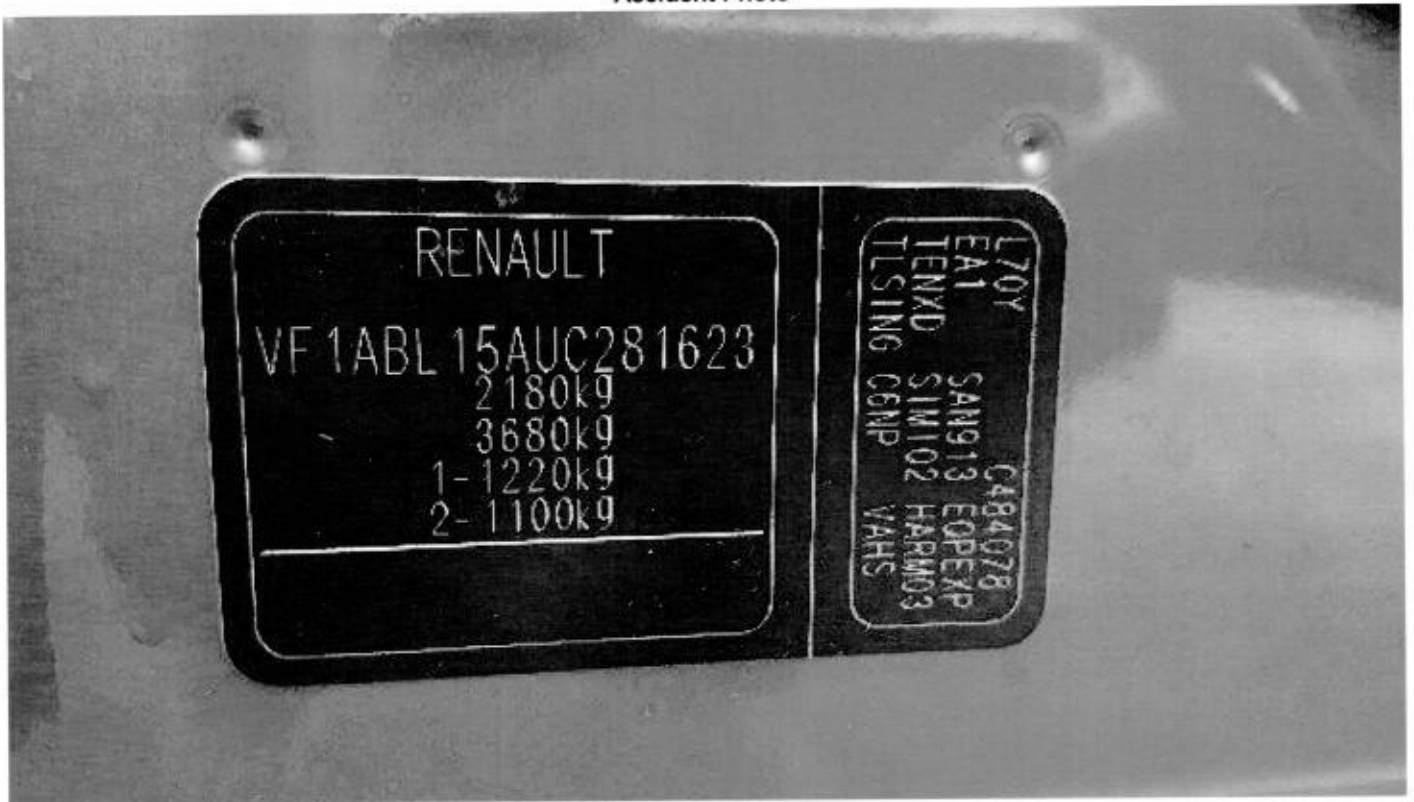
Accident Photo



Accident Photo



Accident Photo





Blk 1008 Bukit Merah Lane 3 #01-26
Singapore 159722
Tel: 6273 2203 / 6746 2203
Fax: 6273 0130
Email: info@racewerks.com.sg
Reg. No. 53025902L

INVOICE

NO : 10301

SOLD TO
MESSRS: Sebastian Li Jun Nan

DATE: 1.10.2019

VEHICLE NO: JN 3939C MAKE & MODEL: Honda NSR 250 RZR MILEAGE: _____

ITEM	QTY	DESCRIPTION	UNIT PRICE	\$	cts
1	1	Part by Part - Repair As Per Surveying Report		4382	50
2	1	Survey Fee		1055	00
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17				15437	50
18			Gst 7%	1006	78
TOTAL				16444	28

GOODS SOLD CANNOT BE RETURNED OR EXCHANGED

Issued by



Issued by

Received

Received in good condition



ABSOLUTE APPRAISAL SERVICES PTE LTD
LOSS ADJUSTERS & MOTOR APPRAISERS
160 Sin Ming Drive #05-16 Sin Ming AutoCity (S) 575722
Mobile: 9688-0413 Fax: 6266-7396
Email: absolute.app.svcs@gmail.com

Invoice

Customer: Sebastian Li Jun Nan
C/o: 419 Ang Mo Kio Avenue 10 #09-1077
Singapore 560419

Date: 12.09.2019

Invoice No: NS-2019-324

Description		Amount
Vehicle No:	FN3939C	
Make & Model:	Honda NSR250R2R (Motorcycle)	
Our reference:	AAS/2019/324	
Services rendered for appraiser / inspection report		
Survey Fee		
Photographs		
Transport Fees		
Re-inspection Fees		
SGD Dollar : One thousand fifty five dollar only	Total:	SGD \$ 1,055.00

Notes:

All cheques payment should be crossed and made payment to "Absolute Appraisal Services Pte Ltd"

Please indicate our "Invoice No." on the reverse side of the cheque.

Please do not hesitate to contact us should you have any enquires.



Absolute Appraisal Services Pte Ltd



Our file reference: SSP/7781LJN-001

Your file reference: Please Advise

Date: 25 November 2019

COMPANY REGISTRATION NO. 200510283W

DIRECTORS

CHAN YEE MIN • TAN JING POI • SEAN SAY

CONSULTANTS

BENJAMIN YEO • TAN GEOK SER • HELEN CHIA-THOMAS

ASSOCIATES

AMELIA AW • ANDY LEOW

SENDER'S DETAILS

Sean Say

DID: (65) 6226 1433 • seansay@keystonelawcorp.com

Amelia Aw

DID: (65) 6226 3597 • ameliaaw@keystonelawcorp.com

Secretary: Rasyiqah: 6226 2539 (Ext 112)

Email: rasyiqah@keystonelawcorp.com

MR LIM KUAN CHONG

Blk 2D Upper Boon Keng Road

#19-662

Singapore 384002

By Certificate of Posting & AR Registered

TRANS-CAB SERVICES PTE LTD

2 Ang Mo Kio Street 63

Singapore 569111

By Certificate of Posting & AR Registered

AXA INSURANCE PTE LTD

8 Shenton Way

#24-01 AXA Tower

Singapore 068811

By Fax (6880 5501) & AR Registered

Dear Sirs,

CLAIMANT: SEBASTIAN LI JUN NAN

ACCIDENT INVOLING FN3939C AND SHC5721J ON 4th JUNE 2019 AT ABOUT 7.00AM AT BISHAN STREET 22

1. We act for Mr Sebastian Li Jun Nan, the rider and owner of the motor vehicle FN3939C.
2. We are instructed to claim damages against you in connection with a road traffic accident on 4th June 2019 at about 7am at Bishan Street 22 involving our client's vehicle and vehicle registration number SHC5721J driven by you at the material time. Our client was travelling straight along Bishan Road towards Lornie Road on lane 1 wherein your vehicle was in lane 1 of the opposite side of traffic. Our client had the right of way and he proceeded straight towards Lornie Road. However, when you were reaching the turning pocket, you sped up to attempt a u-turn, without checking to see if the traffic is clear and favourable for you to make the u-turn. In an attempt to avoid a collision with your vehicle, our client swerved his motor vehicle to the left. However, despite his best efforts, your motor vehicle collided into his. Our client, together with his motor vehicle, fell and skidded to the curb on the left of the road. He then lost consciousness.

KEYSTONE LAW CORPORATION

One Finlayson Green #11-01, Singapore 049246

Tel: +65-6226 2539 Fax: +65-6220 6539 www.keystonelawcorp.com

We do not accept service of court documents by fax.

3. We are instructed that the accident was caused by your negligent driving and/or management of your vehicle. As a result of the accident, our client has suffered personal injuries and his vehicle was damaged.
4. We are instructed by our client to claim damages against you in connection with the above motor accident, particulars of which are as follows:-

General Damages:

- | | | |
|----|---|------------|
| a. | Pain and suffering | \$6,000.00 |
| | 1. Midline cervical spine and muscle tenderness. | |
| | 2. Tenderness on right shoulder, right elbow, both wrists and right toe. | |
| | 3. Abrasions on right wrist, right fingers, both knees and right chest walls. | |
| | 4. Right knee pain. | |
| | 5. Bruises/swelling/tenderness of right medial ankle, calf and knee over. | |
| b. | Future medical expenses | \$100 |

Special Damages:

- | | | |
|----|--|--------------|
| a. | Repair costs to the Motor Vehicle | \$15,389.28 |
| b. | Replacement of helmet | \$272.51 |
| c. | Loss of use (04/06/2019 – [01/10/2019]: 119 days x \$50) | \$5,950.00 |
| d. | Surveyor report | \$1,055.00 |
| e. | Ordinary Medical report | \$90.00 |
| f. | Medical expenses | \$2,164.26 |
| g. | Transport expenses | \$150.00 |
| h. | Legal costs and disbursements | to be agreed |
5. On 24th June 2019, we notified AXA Insurance Pte Ltd of the accident. As we have not heard from you regarding the pre-repair survey, our client proceeded with the pre-repair survey on his own vehicle and this was carried out on 2nd July 2019.
 6. We enclose herewith copies of the following supporting documents for your attention:-
 - a. Medical report from Tan Tock Seng Hospital Pte Ltd ("TTSH") dated 5th September 2019;
 - b. 4 MRI reports from TTSH dated 5th August 2019 and 7th August 2019;
 - c. Our client's accident statement dated 8th June 2019;
 - d. Our client's police report dated 4th June 2019;
 - e. Photos taken by our client in relation to the accident;
 - f. Photos of helmet;
 - g. Survey Report;
 - h. Referral letters from TTSH dated 4th June 2019 and 11th June 2019;
 - i. 3 medical certificates from TTSH;
 - j. 8 tax invoices from TTSH;
 - k. Receipt from Chang AN Chinese medical treatment dated 16th June 2019; and



Our file reference: SSP/7781LJN-001

Your file reference: -

Date: 25 November 2019

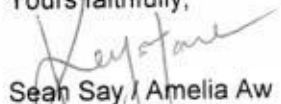
To: Mr Lim Kuan Chong, Trans-Cab Services Pte Ltd
and AXA Insurance Pte Ltd

Page 3 of 3

I. Taxi fare receipt.

7. Please note that if you are insured and you wish to claim under your insurance policy, you should immediately pass this letter and all the enclosed documents to your insurer.
8. Please note that your insurer should send to us an acknowledgment of receipt within 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer.
9. Please also note that if you have a counterclaim against our client arising out of the accident, you are also required to send to us a letter giving full particulars of the counterclaim together with all relevant supporting documents within 8 weeks of your receipt of this letter.

Yours faithfully,


Sean Say / Amelia Aw
Keystone Law Corporation
encs
cc client



Tan Tock Seng
HOSPITAL

National Healthcare Group

Our Ref: 2019-14482-0
Yr. Ref: SSP/7781LJN-001/ras
- 5 SEP 2019

KEYSTONE LAW CORPORATION
ONE FINLAYSON GREEN #11-01
SINGAPORE 049246

Dear Sir/Madam,

MEDICAL REPORT ON SEBASTIAN LI JUN NAN

NRIC NO: S8946498F

DATE/TIME SEEN: 04/06/2019 AT 08:36 HRS BY MUHAMMAD NURSUHAIRI (DR)

11/06/2019 AT 11:22 HRS BY CHARMAIN MANAUIS (DR)

Diagnosis: Contusions of the neck, right shoulder, right elbow, right knee, right foot, right great toe and bilateral wrists.

Mr. Sebastian Li Jun Nan attended the Emergency Department of Tan Tock Seng Hospital on 04/06/2019 and was attended to by myself at 08:36 hours. He was conveyed by the Singapore Civil Defence Force (SCDF) paramedics after a road traffic accident.

According to the patient and the SCDF paramedics, the patient was riding a motorbike travelling at approximately 50km/hr. when a taxi attempted to make a U-turn in front of him. He could not avoid hitting the taxi and subsequently skidded from the first to the third lane of the road. Due to the speed of the accident, the patient could not remember the exact mechanism of how he fell. After the accident, the patient was able to ambulate and removed his helmet independently.

Upon arrival to the Emergency Department, his main complaints were that of pain affecting the neck, right shoulder, right elbow, right wrist, right knee, right foot, right great toe and left wrist.

On examination, the patient had normal vital signs. He had midline cervical spine and left sided paravertebral muscle tenderness without any step deformity. He also had tenderness around the greater tuberosity of the right shoulder without any limitation of movement. He also had mild tenderness of the right elbow, right wrist and left wrist without any bony tenderness. There was also tenderness affecting the dorsum of the right foot and right great toe. There were also multiple abrasions affecting the right wrist, right little finger, right ring finger, right knee, right chest walls and left knee as well.

A cervical collar was applied and intramuscular anti-tetanus toxoid was administered to the patient. Intravenous analgesia was also given to ease the patient's pain. Tulle gras dressing were applied to his wounds.

Tan Tock Seng Hospital Pte Ltd
11 Jalan Tan Tock Seng
Singapore 308433
T + 65 6256 6011
F + 65 6252 7282

www.ttsh.com.sg
 [TTSH.fhadd.me](https://www.facebook.com/TTSH.fhadd.me)

RCB Registration No. 199003683 N

Affiliated Teaching Hospital
of NTU Lee Kong Chian
School of Medicine and
NUS Yong Loo Lin School
of Medicine

X-rays of the cervical spine, right shoulder, right elbow, right wrist, right knee and right foot were otherwise normal. The patient declined x-rays of his left wrist. After a period of observation, the patient's pain had improved and there was no longer any cervical spine tenderness with only mild bilateral paravertebral muscle pain. The patient could also ambulate independently. He was then discharged with oral analgesia and outpatient sick leave (MC No.: TTSH19128090) from 04/06/2019 till 06/06/2019 inclusive. He was also given a referral to the Polyclinic and Sports Medicine Clinic for review of his wounds and limb injuries.

The patient then re-attended the Emergency Department on 11/06/2019 and was attended to by Dr Charmaine Manauis at 11:22 hours. The patient complained of persistent right knee pain after the accident that was aggravated by standing and walking. There was otherwise no new trauma to the right knee since the accident. On examination, the patient had right medial knee swelling and tenderness with minor bruising affecting the right medial ankle, calf and knee. A Jones bandage was applied to the affected knee and the patient was subsequently taught to crutch walk. He was then discharged with analgesia and outpatient sick leave (MC No.: TTSH19133140) from 11/06/2019 till 20/06/2019 inclusive. As the patient had a pre-existing appointment with the Sports Medicine Clinic, a new referral for an earlier date was also arranged.

Thank you.

Yours faithfully,



MUHAMMAD NURSUHAIRI BIN SUMARNI (DR)
EMERGENCY DEPARTMENT
TAN TOCK SENG HOSPITAL

/rs

SEBASTIAN LI JUN NAN, Patient ID: S8946498F DOB: 11-Dec-1989 Date: 05-Aug-2019

Exam No : 10000313026

REPORT STATUS : APPROVED

MRI, Shoulder, Right of 05-AUG-2019:

Multiplanar multisequence MRI of the shoulder was performed using department protocol. The radiographic study dated 4 June 2019 was reviewed.

Findings:

There is no occult fracture or osteonecrosis. No discrete marrow lesion is detected. A subchondral cyst deep to the bicipital tendon groove is likely degenerative in nature. Mild enthesopathic changes are noted at the lesser tuberosity of the humerus.

The acromioclavicular joint shows mild synovial hypertrophy. No prominent osteophyte is demonstrated at the under-surface of the acromion.

Mildly altered signal of the articular-sided supraspinatus tendon could represent mild tendinopathy. The rest of the rotator cuff muscles and tendons are normal in position, width and signal characteristics. No rotator cuff tear is detected. There is no denervation effect, fatty infiltration or atrophy of the rotator cuff muscles.

No significant thickening or fluid distension of the subacromial-subdeltoid (SASD) bursa is noted.

The long head of the biceps tendon is maintained in anatomic location, with an intact biceps-labral complex.

No superior labral tear is detected. The glenoid labrum is intact.

There is no chondral defect detected over the glenoid fossa or humeral head. No joint synovitis is seen.

There is no abnormal signal or scarring in the rotator interval is seen.

COMMENT

- Mild supraspinatus tendinopathy.
- Synovial hypertrophy of the acromioclavicular joint.
- No other clinically significant finding is detected.

Report Entered By : Dr Liu Jingkai Joel on 05-AUG-2019 04:09 PM

Report Coread By : Dr Rupak Dutta on 05-AUG-2019 05:55 PM

Report Approved By : Dr Rupak Dutta on 05-AUG-2019 05:55 PM