

ASS. REC. BY:

REF:

CS/CTI 20007194/Gvf3 Special Instructions

Surveyor:

GA

ASSIGNMENT (Office)

From (Person):

Irene Tay

of

CTI

Date/Time:

07/21/2004 8:22

Estimated Cost:

Bill to:

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

To Inspect Vehicle No:

STS 9229E

Insured:

PC 3354D

at Workshop m/s

Premier

Tel:

of

Ubi

Policy No:

Claim No:

SNM 200200676

Sum Insured:

Excess:

Make of Veh:

D.O.A.

06/21/20

(Client's Record)

CA / REV / REP. / REV 24 HRS

owner waiting
10/21/20 @ 3pm

H.O.D. Endorsement:

Date/Time:

Person Contacted:

Vehicle IN/OUT

Date/Time	Action/Instruction	Checked
	STS 9229E - X	✓
	PC 3354D - X	

Summer Lee (LKK Auto)

From: Irene Tay <irene.tay@sg.cntaiping.com>
Sent: Friday, 7 February, 2020 4:51 PM
To: Claims Dept
Cc: assignments; Admin A
Subject: RE: OUR REF: SNM20D200676/PC3354D/IRENE - ACCIDENT BETWEEN SJS 9229 E AND YOUR INSURED PC 3354 D ON 6/2/2020

Dear Sir (LKK),

We refer to the above matter.

Please get your surveyor to liaise with PREMIUM AUTO to conduct survey.

Regards,

Irene Tay

Executive

Claims Department (Motor Division)

China Taiping Insurance (Singapore) Pte. Ltd.

3 Anson Road #15-00 Springleaf Tower Singapore 079909

DID: (65) 63896192 | F:(65) 62247478/62247175

W: www.sg.cntaiping.com | **FB:** www.facebook.com/chinataipingsg/ | **WeChat:** 太平獅城 Taiping SG

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From: Claims Dept [mailto:claims@premiumauto.com.sg]
Sent: Friday, February 7, 2020 3:35 PM
To: 'Claims' <claims@premiumauto.com.sg>; Claims Dept of CTI <claimsdept@sg.cntaiping.com>; Irene Tay <irene.tay@sg.cntaiping.com>
Subject: RE: OUR REF: SNM20D200676/PC3354D/IRENE - ACCIDENT BETWEEN SJS 9229 E AND YOUR INSURED PC 3354 D ON 6/2/2020

Dear Irene,

Could you let us know who can we arrange survey on next Monday?

Kindly update us by today.

Our client may engage lawyer for injury claim.

Thank you.

Best Regards,
Tony Foong
Claims Advisor

Premium Automobiles Pte Ltd (Reg No 199902271W)

55 Ubi Road 1 Singapore 408699

p. +65 6366 2323, d. +65 67689911

e.mailto:claims@premiumauto.com.sg w. www.audi.com.sg

Audi Showroom, Audi Centre 281 Alexandra Road Singapore 159938 p. +65 6836 2223



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From: Claims [mailto:claims@premiumauto.com.sg]

Sent: Friday, 7 February 2020 3:18 PM

To: 'Claims Dept'; 'Claims Dept of CTI'; 'Irene Tay'

Cc: 'Claims'

Subject: RE: OUR REF: SNM20D200676/PC3354D/IRENE - ACCIDENT BETWEEN SJS 9229 E AND YOUR INSURED PC 3354 D ON 6/2/2020

Dear all,

Attached is the estimate for your reference.

Best Regards,

Syafiq

Claims Admin Assistant

Premium Automobiles Pte Ltd (Reg No 199902271W)

55 Ubi Road 1 Road Singapore 408699

p. +65 6388 2323 d. +65 6768 9828 f. +65 6841 1183

e. claims@premiumauto.com.sg w. www.audi.com.sg

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From: Claims Dept [<mailto:claims@premiumauto.com.sg>]

Sent: Friday, 7 February 2020 12:00 PM

To: 'Claims Dept of CTI'; 'Irene Tay'

Cc: 'Claims Dept'

Subject: RE: OUR REF: SNM20D200676/PC3354D/IRENE - ACCIDENT BETWEEN SJS 9229 E AND YOUR INSURED PC 3354 D ON 6/2/2020

Dear Irene,

Kindly let us know who should we arrange survey with?

We have arrange survey on next Monday

Thank you.

Best Regards,

Tony Foong

Claims Advisor

Premium Automobiles Pte Ltd (Reg No 199902271W)

55 Ubi Road 1 Singapore 408699

p. +65 6366 2323, d. +65 67689911

e.<mailto:claims@premiumauto.com.sg> w. www.audi.com.sg

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From: Claims Dept of CTI [<mailto:claimsdept@sg.cntaiping.com>]

Sent: Friday, 7 February 2020 11:28 AM

To: claims@premiumauto.com.sg; Irene Tay

Cc: Claims Dept of CTI

Subject: OUR REF: SNM20D200676/PC3354D/IRENE - ACCIDENT BETWEEN SJS 9229 E AND YOUR INSURED PC 3354 D ON 6/2/2020

Dear Irene,

Please conduct PRS for SJS9229E.

Note : officer in charge – Irene 63896192.

Claims Department

China Taiping Insurance (Singapore) Pte. Ltd.
3 Anson Road #15-00 Springleaf Tower Singapore 079909
DID: (65) 63896116 | F: (65) 6222 1033

W: www.sg.cntaiping.com | FB: www.facebook.com/chinataipingsg/ | WeChat: 太平獅城 Taiping SG

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From: Claims <claims@premiumauto.com.sg>
Sent: Friday, February 7, 2020 9:34 AM
To: Claims Dept of CTI <claimsdept@sg.cntaiping.com>
Cc: 'Claims' <claims@premiumauto.com.sg>
Subject: ACCIDENT BETWEEN SJS 9229 E AND YOUR INSURED PC 3354 D ON 6/2/2020

Dear all,

Kindly assist in the liability clearance for above mentioned case. We propose for a 100% direct settlement in our client's favour

Please advise who is the officer in-charge we shall liaise with. To avoid dispute during finalisation, we propose for LOU/R at \$60/100 per day.

Attached is the GIA report for your reference and we will send you the estimate once it is ready.

Kindly arrange survey on 10/02/2020, 3PM. Owner waiting.

Best Regards,
Syafiq
Claims Admin Assistant

Premium Automobiles Pte Ltd (Reg No 199901770K)
55 Ubi Road 1 Road Singapore 408699
p. +65 6388 2323 d. +65 6768 9828 f. +65 6841 1183
e. claims@premiumauto.com.sg w. www.audi.com.sg
Audi Showroom, Audi Centre 281 Alexandra Road Singapore 159938 p. +65 6836 2223



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> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC
Owner ID:	051J
Vehicle No.:	SJS9229E
Vehicle to be Exported:	No
Intended Deregistration Date:	10 Feb 2020
Vehicle Make:	AUDI
Vehicle Model:	A4 1.4 TFSI S TRONIC
Primary Colour:	White
Manufacturing Year:	2017
Engine No.:	CVN041505
Chassis No.:	WAUZZZF43HA182419
Maximum Power Output:	110.0 kW (147 bhp)
Open Market Value:	\$32,096.00
Original Registration Date:	22 Sep 2017
First Registration Date:	22 Sep 2017
Transfer Count:	0
Actual ARF Paid:	\$26,935.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	21 Sep 2027
PARF Rebate Amount:	\$20,201.00
COE Expiry Date:	21 Sep 2027
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$49,000.00
COE Rebate Amount:	\$37,308.00
Total Rebate Amount:	\$57,509.00

The information contained herein is correct as at 10 Feb 2020

OK

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	06/02/2020 18:02
Date Of Accident	06/02/2020 11:40
Exact Location Of Accident	SLIP ROAD TO BISHAN ST 21
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJS9229E
Insured/Policyholder	
Name Of Registered Owner	AU -YONG KOK KEONG KENNETH
NRIC No	SXXXX051J
Email Address	AUYONGKENNETH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96734654
Alternative Phone No	OFFICE-63249193

Vehicle Particulars

Manufacturer	AUDI
Model	A4 SEDAN 1.4 TFSI S
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	1700053943-02
Cover Note Number	

Driver

Name of Driver	AU -YONG KOK KEONG KENNETH
NRIC No	SXXXX051J
Date Of Birth	22/09/1960
Occupation	INDOOR
Date Of Driving Pass	16/05/1978
Driving Experience	41 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96734654
Fax Number	
Contact Number	OFFICE-63249193
Email Address	AUYONGKENNETH@GMAIL.COM

Address	370B ALEXANDRA ROAD #03-04
Postcode	159955
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)	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

I WAS DRIVING ALONG BISHAN ROAD HEADING TOWARD UPPER THOMSON ROAD. I TOOK SLIP ROAD TO ENTER BISHAN ST 21. STOPPED TO LET TRAFFIC ON BISHAN ST 21 PASS. AS I MOVED OFF, I WAS HIT DIRECTLY FROM THE REAR BY A GREY TOYOTA VAN, PC 3354 D, DRIVEN BY ONE JOOHARI BIN MOHD (NRIC NO. S1541802 A) WITH SAME FORCE I WAS THROWN FORWARD AND MY GLASSES FLEW OFF. I ALSO HIT MY CHEST ON STEERING WHEEL UPON IMPACT. MR JOOHARI CAME OUT OF HIS VEHICLE AND APOLOGISED FOR HIS MISTAKE. HE ALSO ASKED WHETHER I WAS OK. I SAID THAT I WAS FEELING A BIT GIDDY AND THAT THERE WAS SOME PAIN AROUND MY NECK, SHOULDERS AND BACK. HE SAID THAT HE WOULD MAKE A INSURANCE REPORT WITH HIS COMPANY

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	PC3354D
Vehicle Make/Model/Colour	TOYOTA/VAN/GREY
Details Of Properties	
Vehicle Category	GOODS VEHICLE
Name of Driver	JOOHARI BIN MOHD
NRIC/Passport Number	SXXXX862A
Contact Number	97110056
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

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: 01/12/2019
5 PM

Driver's Signature

(If driver is not the policyholder)
Date & Time:

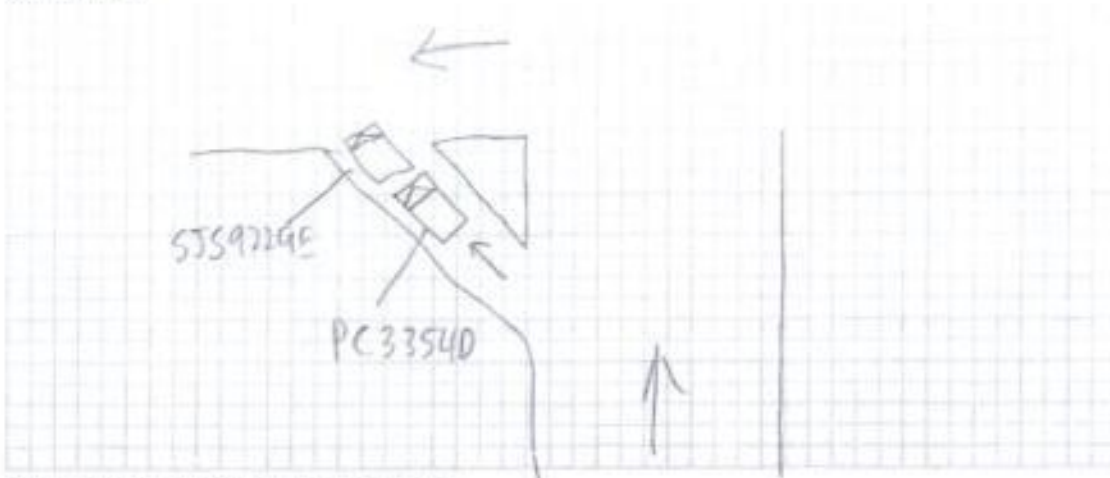
Reporting Centre Personnel's Signature

Name: Tony Pong
NRIC/FIN No.: 67204001A



Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Bristol Road heading towards Upper Thomson road. I took a left turn to enter Bristol St. 21. Stopped to let traffic on Bristol St. 21 ^{pass} proceed. As I moved off, I was hit directly from the rear by a grey Toyota van, PC 33540 driven by one Jeckari Bin Mohd (NAME NO. S (541824) with some force. I was thrown forward in my green ^{flow} shirt. I also hit my chest on stopping wheel upon the impact.

Mr Jeckari came out of his vehicle & apologized for his mistake. He asked whether I was OK. I said that I was feeling a bit dizzy & that there was some pain around my neck, shoulders & back.

He said that he would make a insurance report for the company.

DECLARATION

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

Policyholder's Signature

Date & Time: 6/3/2020
5 pm

Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name: Tony Fong
NRIC/ID No: 62011017X

Accident Photo



Accident Photo



Accident Photo



Premium Automobiles

55 Ubi Road 1, Singapore 408699

Tel : 6366 2323 Fax : 6841 1183

Email: Nora.khai@premiumauto.com.sg / claims@premiumauto.com.sg

WIP : 28712

Telefax

Estimate	:	Accident Repairs
Workshop	:	Ubi Road 1
Contact No	:	6366 2323
Fax No	:	6841 1183
Reference	:	PA/TP/0146/2020/NS
Date	:	7-Feb-20

Vehicle NOT IN workshop. Kindly arrange for survey.

Your Insured Veh No : PC 3354 D

China Taiping Insurance (SG) Pte Ltd

105 Cecil Street

#19-00 The Octagon

Singapore 069534

Attn: Ms Angie - Motor Claims Dept/Windscreen

Tel: 6389 6541 - Fax: 6224 7175

Owner's Name	:	Mr Au-Yong Kok Keong Kenneth
Address	:	370B Alexandra Road #03-04 Singapore 159955
Telephone	:	HP +65 96736454
Type of Claim	:	Third Party Claim
Policy No.	:	1700053943-02
Vehicle No	:	SJS 9229 E
Model Code	:	A4 1.4 TFSI S
Model / Year	:	Sep-17
Engine No	:	CVN 041505
Chassis No	:	WAUZZZF43HA182419
Mileage	:	-
Date In	:	-
Estimated By	:	Johnny Boo / Allan Wu
Accident Date	:	6-Feb-20
Place of Accident	:	Slip Road To Bishan St 21

Premium Automobiles

55 Ubi Road 1, Singapore 408699
Tel : 6366 2323 Fax : 6841 1183

Telefax

Estimated Labour Charges for Accident Vehicle SJS 9229 E

S/n	Nature of Jobs	Estimated Charges	Surveyor's Recommendations
1	To remove and transfer rear parking aid and rear lid kick sensor. Check function and renew according to damage.	S/N \$ 360.00	✓
2	To remove and transfer rear lid's convenience lock system and wire harness and tail lights.	S/N \$ 280.00	✓
3	To dislodge and reinstall rear wire harness for tail lights, battery manager, fuse and relay trays, electrical and audio components.	S/N \$ 480.00	?
4	To dismantle and renew rear bumper and rear lid. Cut out and reweld rear end panelling inner and outer. To repair spare wheel housing. Re-organise rear crash management components. Reinstall all parts removed.	700 \$ 4,550.00	1400
5	To respray rear bumper, rear lid, hinges, spare wheel housing and end panelling. To carry out joint sealer works and stone chip treatment	100 800 \$ 4,000.00	1500
6	To carry out diagnostic check.	S/N \$ 192.00	✓
TOTAL LABOUR CHARGES		: \$ 9,862.00	

Premium Automobiles

55 Ubi Road 1, Singapore 408699
Tel : 6366 2323 Fax : 6841 1183

Telefax

Material List for Accident Vehicle Regn No. SJS 9229 E

S/N	Parts Description	Damaged Parts & Prices	
		S/Nett	Remarks
1	REAR BUMPER / <i>Re</i>	\$	2,079.00
2	REAR BUMPER FIXING PARTS ?	\$	69.00
3	REAR BUMPER SECURING STRIP / <i>Re</i>	\$	210.00
4	REAR BUMPER SPOILER TH / <i>Wt.</i>	\$	234.00
5	REAR LIGHT REFLECTOR - LH / RH X <i>NN</i>	2 \$	78.00
6	REAR BUMPER CARRIER ?	\$	845.00
7	REAR BUMPER SEAL ?	2 \$	26.00
8	REAR BUMPER GUIDE SECTION - LH ?	\$	41.00
9	REAR BUMPER GUIDE SECTION - RH ?	\$	43.00
10	REAR BUMPER GUIDE SECTION - LH / RH ?	2 \$	42.00
11	REAR PARKING AID SENSOR - <u>INNER</u> / OUTER <i>IPC</i> / 2 <i>DM</i>	2 \$	TBC
12	REAR PARKING AID SEAL RING / <i>AC</i>	4 \$	14.00
13	REAR BUMPER WIRING SET ?	\$	633.00
14	BOOT LID CONTROL UNIT ?	\$	392.00
15	REAR LID / <i>BT</i>	\$	2,496.00
16	REAR LID HINGE - LH / RH ?	2 \$	432.00
17	REAR LID LOCK ?	\$	217.00
18	LID LOCK PUSH BUTTON X <i>NN</i>	\$	510.00
19	REAR LID LOCK STRIKER X <i>NN</i>	\$	31.00
20	REAR LID FLAP GASKET / <i>AC</i>	\$	193.00
SUB TOTAL SPARE PARTS CHARGES		: \$ 8,585.00	

Premium Automobiles

55 Ubi Road 1, Singapore 408699
Tel : 6366 2323 Fax : 6841 1183

Telefax

Material List for Accident Vehicle Regn No. SJS 9229 E

S/N	Parts Description	Damaged Parts & Prices	
		S/Nett	Remarks
21	PACKING ADHESIVE ?	\$	18.00
22	AUDI EMBLEM	\$	117.00
23	A4 INSCRIPTION	\$	90.00
24	TF5I INSCRIPTION	\$	90.00
25	REAR CROSS PANEL ?	\$	245.00
26	CROSS PANEL REINFORCEMENT ?	\$	475.00
27	LED TAIL LIGHT - LH INNER ?	\$	959.00
28	TAIL LIGHT TRIM - LH INNER ?	\$	28.00
29	LED TAIL LIGHT - RH INNER ?	\$	959.00
30	TAIL LIGHT TRIM - RH INNER ?	\$	28.00
31	LED TAIL LIGHT - RH OUTER ?	\$	959.00
32	TAIL LIGHT TRIM - RH OUTER ?	\$	28.00
33	REAR CROSS PANEL TRIM ?	\$	156.00
34	LUGGAGE COMPARTMENT FLOOR ?	\$	669.00
35	REAR LID TRIM PANEL ?	\$	310.00
36	LED LICENSE PLATE LIGHT ?	2 \$	195.00
37	REAR NO PLATE / BT ?	S/N \$	40.00
38	ACRYLIC SEALANT ?	S/N \$	180.00
39	CAVITY WAX ?	S/N \$	140.00
40	STONE CHIP ?	S/N \$	180.00
41	SUNDRIES ?	\$	500.00

TOTAL SPARE PARTS CHARGES

: \$ 14,951.00

TOTAL LABOUR CHARGES

: \$ 9,862.00

GRAND TOTAL

: \$ 24,813.00

All charges are not inclusive of GST.

Legend : Remarks (OK) = Approved, Remarks (X) = Not approved

Spare parts are Special Nett.

Premium Automobiles

55 Ubi Road 1, Singapore 408699
Tel : 6366 2323 Fax : 6841 1183

Telefax

Name :
Surveyed Date :
Authorised Date :
Excess Cost :
Liability :
Remarks :

5 Days.

Guo Qiang - 82880282

10/2/2020

before paint photos.

Please Note

- : This estimate is based on visual inspection of the affected vehicle.
Should we require further labour charges and spare parts in the progress of repair, we shall inform you accordingly.
For inspection of vehicle, please refer to Ms Norah Khai at
Tel:6768 9828 for appointment.

Yours faithfully,
Premium Automobiles Pte Ltd

LKK Auto Consultants 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:

Johnny Boo
Body Repair Manager

Allan Wu
Claims Consultant