



**GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE**
6 Raffles Quay #18-00, Singapore 048580
Phone: +65 6224 0010 Fax: +65 6224 0030
Operating Hours: Monday to Friday 9am to 5pm
GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-19-194552
Date of Request: 26/11/2019
Your Ref No: RSS/1910-7504(AASG)(PD)

R.S. SOLOMON LLC
300 Beach Road
#12-03/04 The Concourse
Singapore 199555

Dear Sir/Madam,

Date of Accident: 26/01/2019
Vehicle No: SFH9090S
Place of Accident: ALONG CTE TOWARDS SLE
Involving Vehicle No: SLM4539B

With reference to your application for the accident report, we have attached the following accident reports as requested:

| DOCUMENTS | ACCIDENT LOCATION | PER DOC (S\$) | QTY | AMOUNT (S\$) |
|----------------------------------|-----------------------|---------------|-----|--------------|
| SLM4539B | ALONG CTE TOWARDS SLE | 14.00 | 1 | 13.08 |
| GST Amount | | | | 0.92 |
| Total Amount Due (GST Inclusive) | | | | 14.00 |

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:
☒ GIRO ☐ Cash ☐ Cheque



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GST Registration No: M400017735

TAX INVOICE

Our Ref No: GR-19-194541
Date of Request: 26/11/2019
Your Ref No: RSS/1910-7504(AASG)(PD)

R.S. SOLOMON LLC
300 Beach Road
#12-03/04 The Concourse
Singapore 199555

Dear Sir/Madam,

Your Search Criteria:
Date of Accident: 26/01/2019
Place of Accident: ALONG CTE TOWARDS SLE
Client Vehicle No: SFH9090S

| DESCRIPTION | AMOUNT (S\$) |
|----------------------------------|--------------|
| E-File Search Fee (Public) | 14.02 |
| GST Amount | 0.98 |
| Total Amount Due (GST Inclusive) | 15.00 |

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:
Date:
☒ GIRO ☐ Cash ☐ Cheque



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SEARCH RESULTS

Our Ref No: GR-19-194541
Date of Request: 26/11/2019
Your Ref No: RSS/1910-7504(AASG)(PD)

R.S. SOLOMON LLC
300 Beach Road
#12-03/04 The Concourse
Singapore 199555

Dear Sir/Madam,

Your Search Criteria:

Date of Accident: 26/01/2019
Place of Accident: ALONG CTE TOWARDS SLE
Client Vehicle No: SFH9090S

With reference to your search criteria for the accident report, the following documents were found to closely match your search criteria:

| REQ. VEHICLE | ACCIDENT LOCATION | ACCIDENT DATE |
|--------------|---------------------------------|------------------|
| SLM4539B | CENTRAL EXPRESSWAY & ANG MO KIO | 26/01/2019 15:30 |

Thank You.

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Enquire Vehicle & Owner Information (Vehicle No. SLM4539B As At 26 Jan 2019 / 15:45:00)

Law Firm Search Details

Search Reason: Insurance claim in relation to traffic accident
Law Firm Case No.: RSS1910-7504-AASG-PD

Current Owner Details

Owner ID Type: Company
Owner ID: 201624597K
Owner Name: LCRF PTE. LTD.
Registered Address Type: Private Residential (non-Condo Apt / non-House)
Registered Block/House No.: 1090
Registered Street Name: LOWER DELTA ROAD
Registered Unit No.: # 05 - 12
Registered Building Name: -
Registered Postal Code: 169201

Current Vehicle Details








Vehicle No.: SLM4539B
Make Description/Model: TOYOTA / PRIUS HYBRID 1.8 CVT
Insurance Company Name: AIG ASIA PACIFIC INSURANCE PTE. LTD.



Thank you

Siaw Kin Yeow has successfully logged out.
Your last login date and time was 11 Dec 2019, 17:50:27.
To return to ONE.MOTORING, please [click here](#)
For security reasons, please **CLEAR YOUR CACHE** after each session.

Session Transaction History

| S/No.  | Asset Type  | Asset ID  | Asset Owner ID  | Transaction Type  | Transaction Amount(S\$)  | Log Date/Time  |
|---|--|--|--|--|---|---|
| 1 | Vehicle | SLM4539B | | 18.19 Enquire Veh Owner Info (Others) by Law Firm | 7.49 | 11 Dec 2019 / 17:51:40 |

Please do not use your browser's Back or Forward buttons as this may result in information loss

REPUBLIC OF SINGAPORE CERTIFICATE OF REGISTRATION OF DEATH

IN THE DEPARTMENT OF HEALTH

271845F

| | | | | |
|--|---|--|--|----------------------------------|
| DECEASED | Death registered at THOMSON NEIGHBOURHOOD CENTRE, SINGAPORE | | | |
| | Full name of deceased HO WAN SING | | | |
| | NRIC Identification Document No. S130115011 | | Sex MALE | Date of birth 14/12/1958 |
| | Race/Ethnic Group CHINESE (HAINANES) | | Nationality SINGAPORE CITIZEN | Country/Place of birth SINGAPORE |
| | Home Address 9 PRIMA ROAD SINGAPORE 129117 | | Time and hour of death 20/03/2018 14:01 | |
| CAUSE OF DEATH BY PHYSICIAN | Place of Address where death occurred AMOUNT ELIZABETH NOVENA HOSPITAL | | Approximate interval between onset and death | |
| | | | Years | Months |
| | I (a) METASTATIC ADRENOCORTICAL CANCER | | | 6 |
| | (b) | | | |
| | (c) | | | |
| II Other Significant conditions | | | | |
| Name and official status of person certifying cause of death DR DONALD POON YEW HEE, MEDICAL PRACTITIONER | | | Certificate of Cause of Death Reference No. N372833 Date: 26/03/2018 | |
| INFORMANT | Name HO SHEN AN, CHRISTOPHER | | I certify that the above information given by me is correct. | |
| | Address 452 SIN MING AVENUE #01-341 | | Signature of Informant | |
| | NRIC Identification Document No. S9490463C | | Informant's Signature/Thumb impression | |
| | Relationship SON | | Date 26/03/18 | |
| OFFICIAL | Name of Registration Officer TAN CHIN SENG JASON | | THOMSON NEIGHBOURHOOD CENTRE, BLK 25 SIN MING AVENUE #01-80 SINGAPORE 570024 | |
| | Designation REGISTRATION OFFICER | | Date 26/03/2018 | |
| PERMIT TO BURY/CREMATE BODY [The Environment Public Health Act (Chapter 95)] | | | | |
| APPLICATION | Place of Burial | | Religious type ROMAN CATHOLIC | |
| | Place of Cremation MANDAL CREMATORIUM | | | |
| | Name of Informant HO SHEN AN, CHRISTOPHER | | | |
| | NRIC Identification Document No S9490463C apply for a permit to <input type="checkbox"/> bury <input checked="" type="checkbox"/> cremate | | Signature of Informant | |
| | the deceased referred to in the Death Certificate No 271845F | | Date 26/03/18 | |
| <input checked="" type="checkbox"/> I certify that to the best of my knowledge, the deceased has no written direction that he/she should not be cremated. | | Informant's Signature/Thumb impression | | |
| The Certificate of Cause of Death certified that there is <input checked="" type="checkbox"/> No evidence of pacemaker in the body of the deceased <input type="checkbox"/> Evidence of pacemaker device removed from the body of the deceased | | Signature of Registrar | | |
| Permit is approved. | | Date 26/3/2018 | | |
| | | for Commissioner of Public Health | | |

IN THE FAMILY JUSTICE COURTS OF THE REPUBLIC OF SINGAPORE

Case No: FC/P 4113/2018

Document No.: FC/PRG
1210/2019

In the Matter of Probate and Administration Act (Chapter 251)


And

In the Estate of Ho Wan Sing
(NRIC No. S1301150H), deceased.

GRANT OF LETTERS OF ADMINISTRATION

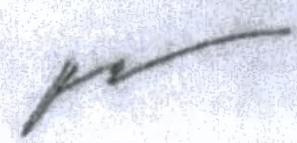
Letters of Administration of the estate and effects of Ho Wan Sing (NRIC No. S1301150H) late of 9, Pr Road, Singapore 328317, deceased who died on 26-March-2018 are granted to Soh Mui Ling Josephine (N No. S1469342D) as the lawful widow of the deceased.

Dated: 12-September-2018

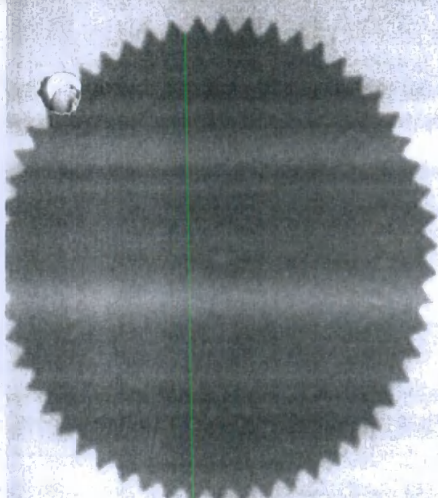


KENNETH YAP YEW CHOH
REGISTRAR
FAMILY JUSTICE COURTS
SINGAPORE

Date of Issue: 13-March-2019



KENNETH YAP YEW CHOH
REGISTRAR
FAMILY JUSTICE COURTS
SINGAPORE



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1469342D



Name



SOH MUI LING JOSEPHINE

Race

CHINESE

Date of Birth

04-05-1961

Sex

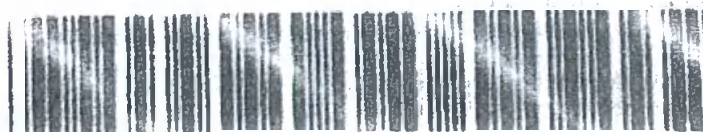
F

Country of Birth

SINGAPORE



3034586



NRIC No

S1469342D

Blood Group

O+

Date of issue

29-06-1998

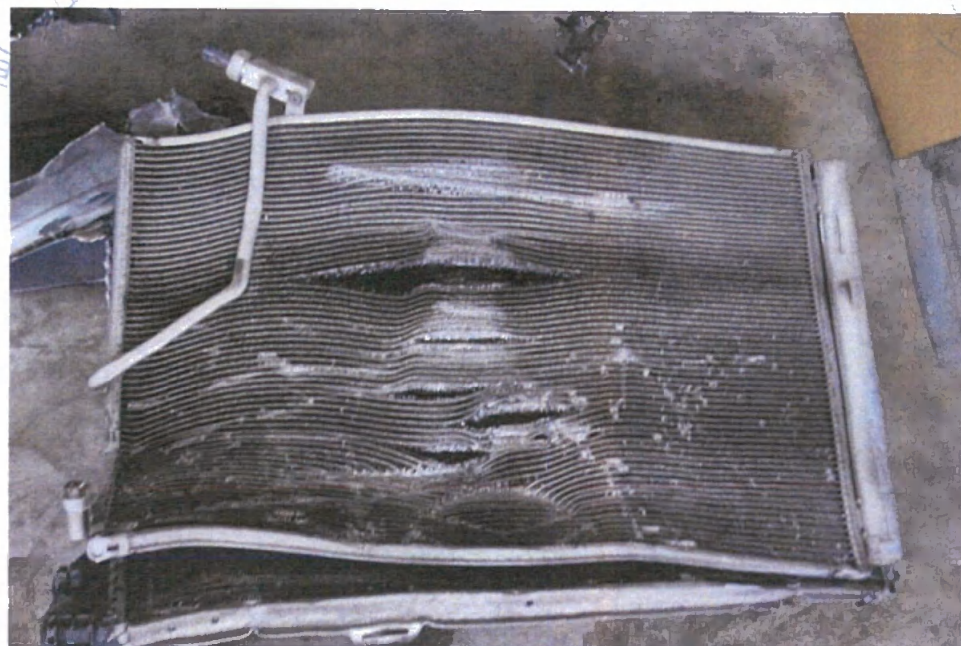
APT BLK 452 SIN MING AVENUE #01-541
SINGAPORE 570452

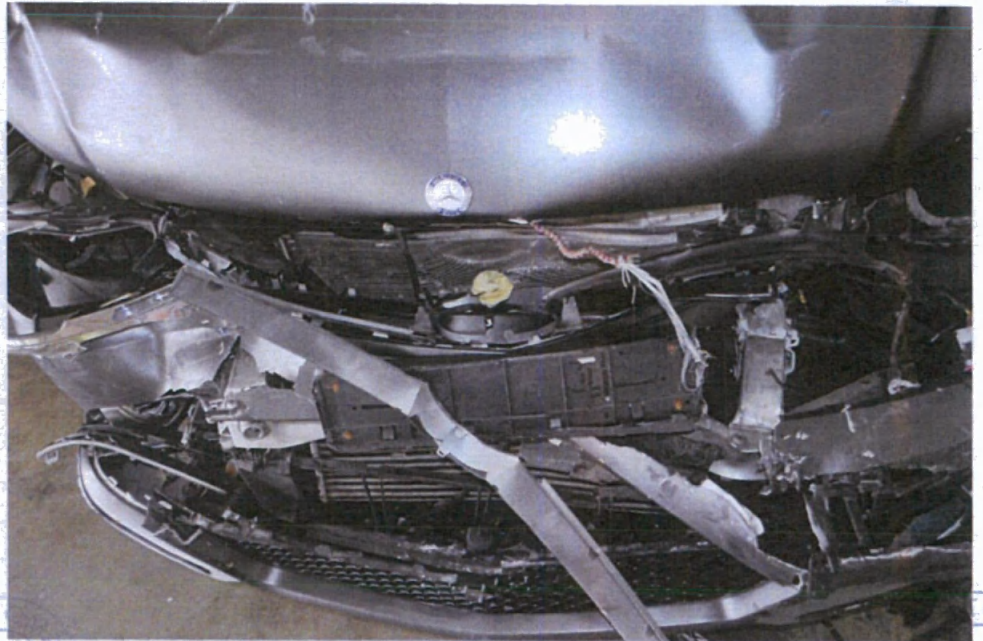
NRIC No: S1469342D

Date: 13/01/2009

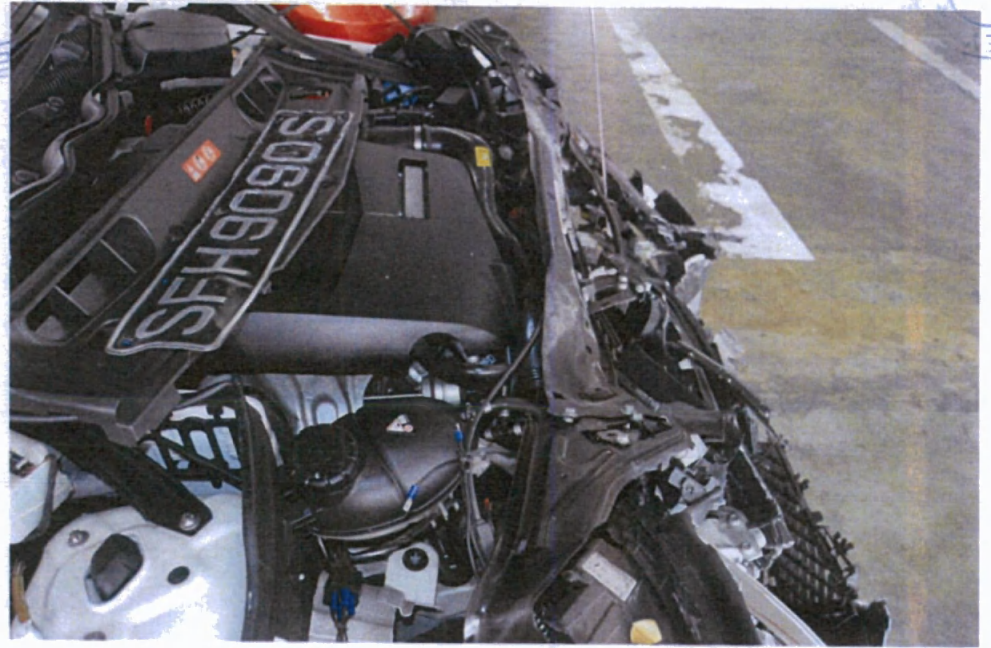
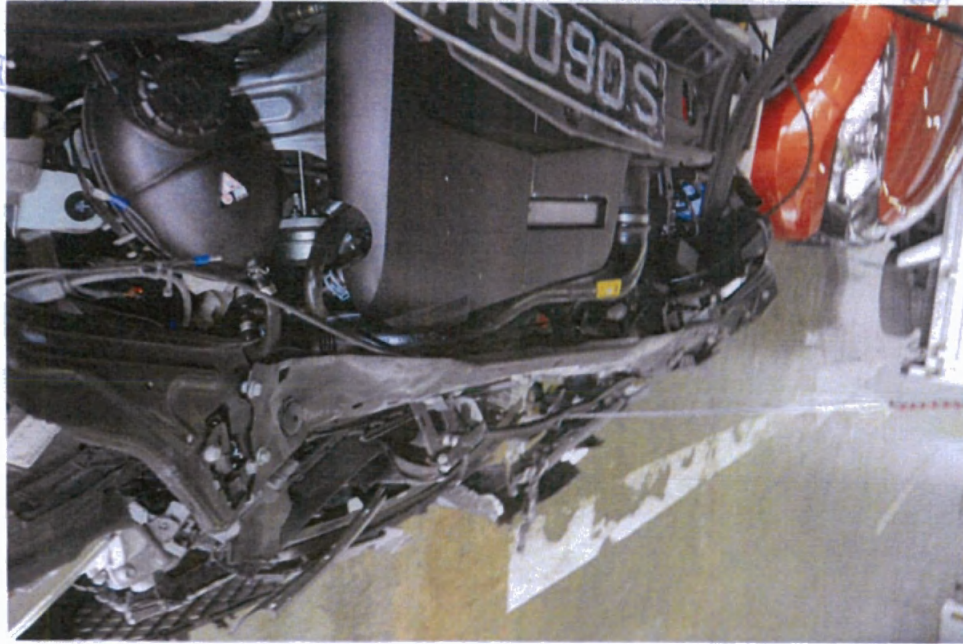
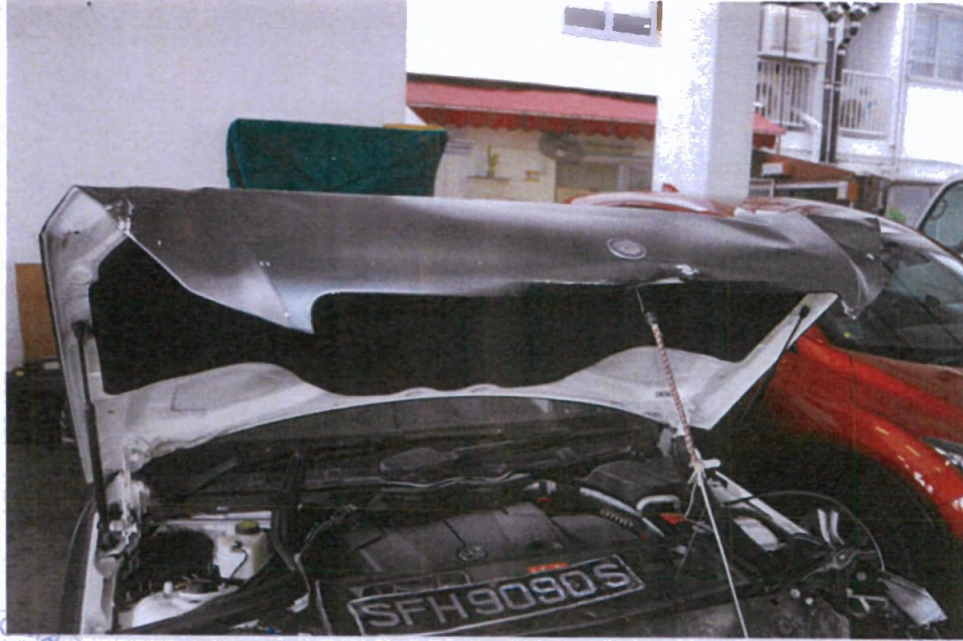
No: 6085548

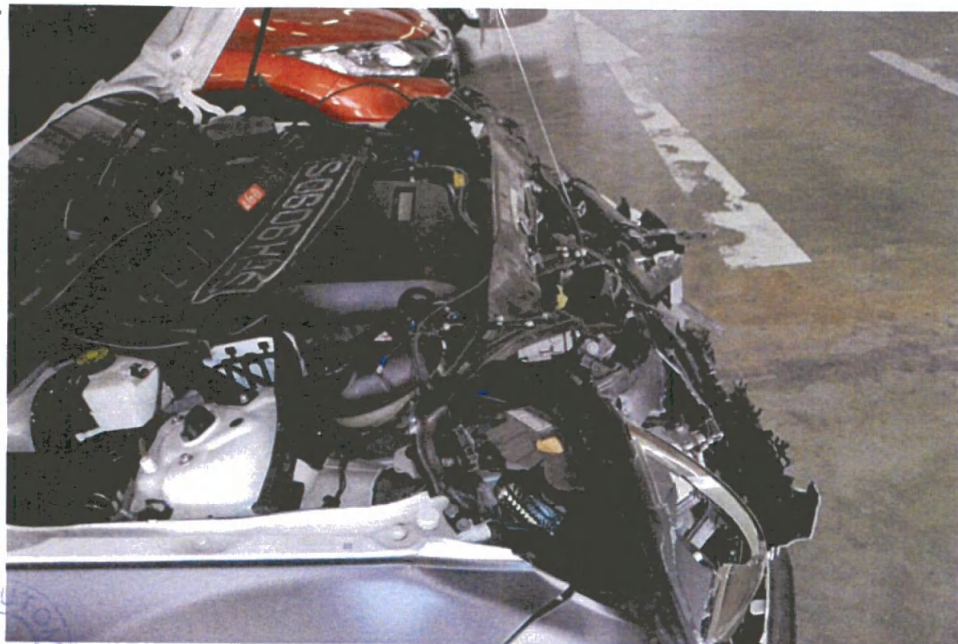














SURVEY

AUTOMATA