



WITHOUT PREJUDICE

Our Ref: SMF 539C

Your Ref: SGH 8080R

21st September 2020

ATTN: LKK Auto Consultants Pte Ltd
INSURER: AIG Asia Pacific Insurance Pte Ltd

Dear Asher,

Accident Involving: SMF 539C and SGH 8080R

Date of Accident: 3 March 2020

Location of Accident: Newton Circus Roundabout towards Keng Lee Road

We refer to the aforementioned accident and hereby submit our claim as below:

Cost of Repair as agreed	\$	3,850.00	
TOTAL LOR/U DAYS	10 DAYS		2 Days PRS + 4 Repair Days Agreed + 1 Sunday
Add Loss of Rental	\$	360.00	2 Days - Inv#TAP539C-257/0824
Add Loss of Use	\$	600.00	5 Days
Total	\$	4,810.00	
Add 3rd Party Report Fee	\$	15.00	
Add LTA Search Fee	\$	7.45	
GRAND TOTAL	\$	4,832.45	

Kindly pay the Grand Total Amount of **\$4,832.45** to:

Team AutoPro Pte Ltd
160 Sin Ming Drive #02-12
Sin Ming AutoCity
Singapore 575722

For further query, please feel free to contact us at 6258 1955 or email: teamautoffice@gmail.com

Thank you.



Regards,
Adel (Ms)

Team AutoPro Pte Ltd Co Reg No: 201811621K

160 Sin Ming Drive #02-12 Sin Ming AutoCity Singapore 575722

Tel: 6258-1955 Fax: 6258-1956 Email: teamautoffice@gmail.com / teamautopl@gmail.com

PROFORMA INVOICE

**ATTENTION:**

Margaret Lee Chee Yee

PI Number	P2009-1072
PI Date	21-Sep-2020
Vehicle No.	SMF 539C
Accident Date	3-Mar-2020

S/No	Description	Unit Price	Quantity	Amount
1	Spare Parts and Labour for Accident Repair of Vehicle Nos. SMF 539C	COR Lump Sum		\$ 3,850.00

Notes:

1) All payments must be made only in the form of cash or crossed cheque payable to "Team AutoPro Pte Ltd".

Total Amount	\$ 3,850.00
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Authorized Signature





160 Sin Ming Drive #02-12
Sin Ming AutoCity
Singapore 575722

Tel: 6258 1955 Fax: 6 258 1956
teamautoffice@gmail.com / teamautoprl@gmail.com

THIS IS YOUR INVOICE

Kindly remit payment to our office address stated. If you have any query pertaining to this invoice, please feel free to contact us.

INVOICE DATE: 25-Mar-20

INVOICE NOS: TAP539C-257/0824

Your Reference: SMF 539C

Our Reference: SLZ 2517J

Billed To: Margaret Lee Chee Yee

Address: 138A Lorong 1A Toa Payoh #27-10 S'311138

Invoice Type: Rental

INVOICE TOTAL IN SGD

\$ 360.00

DESCRIPTION		AMOUNT (\$S)
Leasing of Vehicle Number:	SLZ 2517J	\$ 360.00
Rental Rate Per Day:	\$180.00	
Rental Duration:	2	
Commencement Date:	23/3/2020	
Ceasement Date:	25/3/2020	
Discount		\$ -
Amount Due		\$ 360.00

COMMENTS

1. Total payment due in 30 days.
2. All Cheques must be made payable to **TEAM AUTOPRO PTE LTD.**
3. Please include our invoice number at the back of your cheque.

For Team AutoPro Pte Ltd



PAYMENT DETAILS

THANK YOU FOR YOUR PROMPT PAYMENT.

Prepared by Adel Lim (Ms)
Page 1 of 1



RENTAL AGREEMENT

RA/2020 03/257

HIRER'S PARTICULAR		Vehicle No / Model	Rental Vehicle No / Model
Name:	Margaret Lee Chee Yee	SMF539C Lexus	SL22517J Audi A4
NRIC/Passport No:	S8211228F	Date / Time Out:	Date / Time In:
Driving Licence No:	Exp:	23/03/2020 10:15am	25/3/2020 1-06pm
Address: 138A Lorong 1A TOA PAYOH #27-10 S311138		Fuel Tank Level	
Tel:			
ADDITIONAL DRIVER'S PARTICULAR (AUTHORIZED DRIVER)		RENTAL CHARGES	
Name:		TOTAL \$	
NRIC/Passport No:		Hour @	per hour
Driving Licence No:	Exp:	2 Days @ \$180	per days \$360
Address:		Weeks @	per week
Tel:		Months @	per month
(A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES		Additional Payable:	
		SUBTOTAL Payable: 360	
		DEPOSIT AMOUNT PAID	DEPOSIT AMOUNT REFUNDED / Date
		Mode of Payment	
		ADDITIONAL REMARKS	
Physical Damage Excess		Acknowledgement	
Singapore - Own Damage	\$2,000		
Singapore - 3rd Party Damage	\$2,000		
Malaysia (If applicable)	\$8,000		
For Driver aged < 23 or above 65 or less than 2 years driving experience regardless of age	\$3,000 (Additional)		
IMPORTANT NOTE :		HIRER'S DECLARATION: I/WE agree to the terms and conditions above and as set overleaf and declare that all information given on this form are true and accurate. My/Our driving licence(s) is/are current and not disqualified from driving. You may charge all amounts due on the rental to my/our account.	
1. The person(s) signing this rental Agreement assumes full personal responsibility, jointly and severally with the firm, person or organization, the driver or all authorized driver in whose name he/they might sign.		 22/03/20 HIRER Signature / Date TEAM AUTO PRO PTE LTD Reg no: 2018116214	
2. Only persons above 23 years of age with more than 2 years driving experience, authorised, licensed and signing this agreement may drive the vehicle.			
3. Vehicle is strictly for use in Singapore only and may not be driven or taken out of Singapore without the prior written consent of TeamAutoPro Pte Ltd.			
4. Use of vehicle for illegal purposes (e.g. in connection with theft, drug peddling or trafficking, smuggling), commercial purposes (e.g. taxi, uber, grab car / car pool usage) is strictly prohibited.			
5. In case of accident, the hirer shall report to TeamAutoPro Pte Ltd immediately. If there are bodily injuries, a police report must be made within 24 hours		Authorized Signatory On Behalf of TeamAutoPro Pte Ltd	



RECORDS MANAGEMENT CENTRE

**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-20-039250

Date of Request: 06/03/2020

Your Ref No: WALK IN TAN CW

TEAM AUTOPRO PTE LTD (SIN MING)
160 SIN MING DRIVE, #01-14 SIN MING AUTOCITY
SINGAPORE 575722

Dear Sir/Madam,

Your Vehicle No: SMF539C

Date of Accident: 03/03/2020

Place of Accident: NEWTON CIRCUS ROUND ABOUT

Involving Vehicle No: SGH8080R (NO REPORT) VALID TILL 9-17/3

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

> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 09 Mar 2020 / 15:46:02

Receipt Date/Time : 09 Mar 2020 / 15:46:02

Tax Invoice/Receipt

Receipt No. : ITNET-00000-200309-002600

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SGH8080R				
As at 03 Mar 2020/18:15:00				
Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.				
1	Insurance Enquiry - SGH8080R			
	Enquiry Fee	7.00	0.49	7.49
	20200309154530179028			
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
Paid By				
	xxxxxxxxxxxx8855	Credit Card:		7.45
		Visa/MasterCard		
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.

To : **Team AutoPro Pte Ltd**
CRN : **201811621K**
located at : **160 Sin Ming Drive, #02-12, Sin Ming AutoCity, Singapore 575722**

Letter of Authorization & Undertaking

In Respect of Accident Involving my/our Vehicle No.: SMF 539 C
and SGH 8080 R and
and and
@ NEWTON CIRCUS ROUND ABOUT TWDS KENG LEE ROAD
dated 03/03/2020.

1. I/We hereby irrevocably authorize you to demand claim- settle/receive whatever amount settled/payable by the third party and/or its insurer in my/our name, for the costs of repair, loss of use/rental and all other necessary costs related to my/our vehicle that was damaged pursuant to the aforesaid accident.
2. I/We acknowledge that any settlement you may reach on my/our behalf is on a "Without Prejudice" and "Without Admission Of Liability" basis.
3. I/We agree to assign the whole proceeds of my/our third party claim to you. The third party and /or its insurer shall accept this letter as my irrevocable authorization to pay the compensated amount directly to you – in the form of payment cheque made in favor to **Team AutoPro Pte Ltd.**

In the event that the payment cheque is being made in my/our favor, I/we hereby undertake to return the full amount to you, within 7 days from receiving and clearance of the said payment cheque. Failing which, you will have the legal rights to take legal proceedings against me/us to recover the said sum, with further costs and disbursements to be incurred by me/us.

4. I/We further authorize you to settle the aforesaid claim in a manner that you deem fit and to utilize the monies to pay your charges without further reference to me/us. The payment to you shall amount to a good discharge of your obligation to me/us in respect of the settlement monies.
5. Should the third party claim be unsuccessful due to untruthful statements from me/us, I/we undertake to pay for all your expenses, costs and fees incurred, immediately upon your demand.
6. This authorisation shall remain in force until revoked by me/us in writing to you, subject to terms and conditions being agreed by both parties. I/We further understand that revocation is not allowed once your workshop has commenced on the repair of my/our vehicle.

Yours faithfully,


Claimant Signature & Co's Stamp (if applicable)

Date:

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	04/03/2020 16:17
Date Of Accident	03/03/2020 18:15
Exact Location Of Accident	NEWTON CIRCUS ROUNDABOUT TOWARDS KENG LEE ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMF539C
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Insured/Policyholder

Name Of Registered Owner	MARGARET LEE CHEE YEE
NRIC No	SXXXX228F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98784333
Alternative Phone No	OTHERS-98784333

Vehicle Particulars

Manufacturer	LEXUS
Model	ES250
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	1900158962
Cover Note Number	

Driver

Name of Driver	SEOW KWONG TING, STANWIN (XIAO GUANGTING)
NRIC No	SXXXX722B
Date Of Birth	27/10/1987
Occupation	INDOOR
Date Of Driving Pass	07/03/2008
Driving Experience	11 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98784333
Fax Number	
Contact Number	OTHERS-98784333
EMail Address	NOEMAIL

Address	BLK 138A LORONG 1A TOA PAYOH #27-10
Postcode	311138
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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)	2
Passenger 1	NAME: : MARGARET LEE CHEE YEE GENDER: : FEMALE

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

PLEASE REFER TO SKETCH PLAN

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	SGH8080R
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)

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:

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

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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, I vehicle 'A' SMP539C was travelling on the
 stated lane I was travelling along the 3rd lane, which it's a turn left and
 go straight lane, while travelling, a red vehicle on the first lane made an
 abrupt lane change as such I immediately applied my brakes and came to a
 stop to avoid a collision. The next moment vehicle 'B' SGH8080R on my right cut
 into my lane and grazed against my stationary vehicle right portion. I wish to
 state that the lane that vehicle 'B' was travelling on is only for going straight.
 vehicle 'B' should not turn left. This accident could be avoided if vehicle 'B' did
 not make an abrupt lane change.

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 Signature
 Name:
 NRIC/FIN No.:



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : MARGARET LEE CHEE YEE
Period of Insurance : 26 Oct 2019 To 25 Oct 2020
Engine No. : A25A0215126
Chassis No. : JTHB11B1302001325

Vehicle No. : SMF539C
Policy No. : 1900158962
Endorsement No. :
Issued Date : 09 Sep 2019

ABOUT THE COVER

Make/Model : LEXUS ES250 2.5
Engine Capacity/Tonnage : 2,487.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2018
Insuring with COE/PAF : 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 : 30 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 Optional

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$0

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

MARGARET LEE CHEE YEE

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 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: DBS BANK LTD

I/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), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504650000

ALL INS AGENCY PTE LTD
22 SIN MING LANE #05-78 MIDVIEW CITY
SINGAPORE 573969

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

AUTHORISED REPRESENTATIVE

All Ins Agency Pte Ltd

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8211228F

Name: MARGARET LEE CHEE YEE

Birth Date: 20 Apr 1982

Issue Date: 26 Dec 2017

002757373A



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8211228F

Name: MARGARET LEE CHEE YEE

李 賜 義

Race: CHINESE

Date of birth: 20-04-1982

Country/Place of birth: SINGAPORE

Sex: F

S8211228F



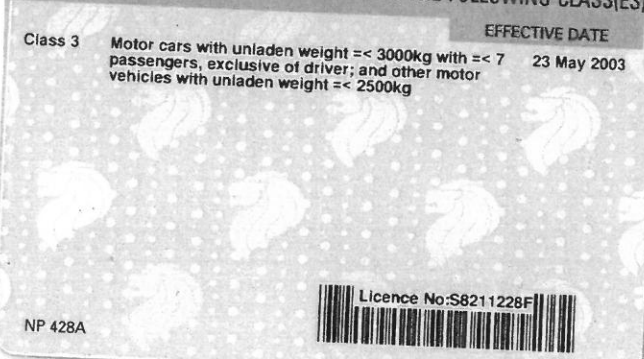
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq 2500\text{kg}$

EFFECTIVE DATE: 23 May 2003

NP 428A

Licence No: S8211228F



540365

NRIC No. S8211228F

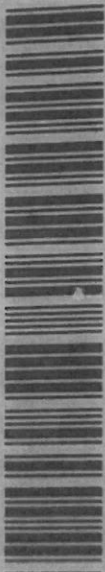
Date of issue: 26-12-2014

APT BLK 138A LORONG 1A TOA PAYOH #27-10 SINGAPORE 311138

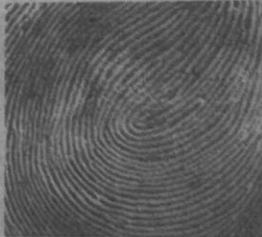
NRIC No: S8211228F Date: 21/09/2018



4625517



NRIC No. S8734722B



Date of issue
19-08-2010

APT BLK 138A LORONG 1A TOA PAYOH #27-10
SINGAPORE 311138


NRIC No: S8734722B Date: 22/07/2018

CLASS 3 ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg



Licence No: S8734722B



NP 423A

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8734722B



Name
SIEW KWONG TING, STANWIN
(XIAO GUANGTING)


蕭光廷

Race
CHINESE

Sex
M

Date of birth
27-10-1987

Country of birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8734722B

Name
SIEW KWONG TING, STANWIN
(XIAO GUANGTING)



Birth Date: 27 Oct 1987

Issue Date: 17 May 2010



001857318G