	tre Services.	wel & Jan'08] .	SMOJ20406			
Date In: 2/ 12/2020 1710	Jeb desemption	100	Date &Timo Compl	cted .	Done by	У
REFNO: NASTAICONIVEYSTY	SAS c-filling	· · · · ·				
Veh No 42 That C	E-malf(kjala s	tur. AIC tlus)	 	2.	1	, -
001 912 2020 pd: SE	I-Motor Claim		MT1114502-0	OII :	מוצ	20%
1111/20 00.35	I-Motor W/O		TP (hrr)		17.5	2.
OD : TP ! Reporting Only	•					
	I-Photo Uplos		-	_	٠	-
TP Insurer:	Assessment/Su		<u></u>	_ -		
THE AMERICAN THE PROPERTY OF T	Ass't Report by	Pax/Handle	Owner/Wksn	Faxt		
Proformed Witten / INC Assign Witten / QW: (10 2000-10	nia/)/Non-INC(7		-
TP Undiculars Veh Nor	11 1100 D	, INC(Tel:	,)	
Owner / Driver: (- Policy No: ()	Period: (· · · · ·	Cover Type: (-).	
Policy No: () !	remon (Dates,	Tlmer)	
The second secon	[Note-Est. Status (W		0%; P: 21-79%. P	: 80-100%	J	
Year of Registration: ()	Warranty: YES ()/NO()			
Bacess: (S) Londing: \$1			TRY LINCOLD LIVE DATE TO A COLOR OF THE COLO			energia e
TO A STATE OF THE	PUT DISABITION FOR SELECTION		建物的数据	25000	\$	
() Walk-In Curtomar : Customer's Ir	formation strictly Cor	Montial & St	ictly NO refer of rep	alior.		
() Total Loss Case : to e-unil Yasa	orer URGENTLY.		,			
	ice: YES()/N	T()0T	owing Co: (· ·	,	,)
STATE OF THE PROPERTY OF THE PARTY OF THE PA	KONTANTANTANTANTANTANTANTANTANTANTANTANTAN				Mine Way	ÿ · .
TRANSPORTER CONTRACTOR OF THE STATE OF THE S	TATALES AL EL MATERIAL MATERIAL DE LA CONTRACTION DEL CONTRACTION DE LA CONTRACTION	1/47/mm///www.m.m.m.	The state of the s			
1) Amaly for Theory and Allegamons	/ Courtesy Car)				
	/ Courtesy Car ()	· · · ·			
2) QC Check / Post Reputr Inspection	(•))	,			
	(•)) ;;	, , ,			
2) QC Check / Post Reputr Inspection	(•))				· ·
2) QC Check/Post Repuir Inspection 3) Upload Resurvey Photo [Repuir Cost> Injury:	(•)) : :			epan.	· e
2) QC Check/Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost> Injury:	(•)				epin.	·
2) QC Check/Post Repuir Inspection 3) Upload Resurvey Photo [Repuir Cost> Injury:	(•)				epin.	*(*DA)*S:
2) QC Check/Post Repuir Inspection 3) Upload Resurvey Photo [Repuir Cost> Injury:	(•)				i i	******
2) QC Check/Post Repuir Inspection 3) Upload Resurvey Photo [Repuir Cost> Injury:	(•)				reachaneth	
2) QC Check / Post Reprir Inspection 3) Upload Resurvey Photo [Repair Cost> Injury:	(•)				reachaneth	
2) QC Check / Post Repuir Inspection 3) Upload Resurvey Photo [Repuir Cost> Injury:	(•)		Languing (S20)	NG (tro)	reachaneth	
2) QC Check / Post Reprir Inspection 3) Upload Resurvey Photo [Repair Cost> Injury: MA215016	(•)	i) Alt i Analden 3) DAI Damage	luporung (\$30); Assessment (\$100);	ING CHO S 40743	reachaneth	
2) QC Check / Post Reprir Inspection 3) Upload Resurvey Photo [Repair Cost> Injury: MA215016	(•)	DAIL Anades DAIL Anades DAIL Towny OPT Follow-	Illuporting (\$30); Areassment (\$100); Incarch durvey	1110 (110) 2 40743 1110 3 1110	reachaneth	
2) QC Check / Post Reprir Inspection 3) Upload Resurvey Photo [Repair Cost> Injury: Data Topic A Cost	(•)	DAR Anaiden DAR Darwey Tri Follow-I Per Ballow-I ATH Ballow-I ATH Ballow-I	Importing (330); Assessment (3100); Irong to Burvey (Hearvey) Irong to Burvey (Hearvey) Intil INC Only (wall income)	100 (110) \$40743 110 110 110 110 110 110 110 110 110	reachaneth	
2) QC Check / Post Reprir Inspection 3) Upload Resurvey Photo [Repair Cost> Injury: Daily 1001 G Liver/Owner: Ontact No:	(•)	DARTANAIDEN DARTANAIDEN DARTANAIDEN DYTTFOMOS OPTIFOMOS OTRINAIDEN OTRINAIDEN CONTRIBUTE OTRINAIDEN OTRIN	Itaporting (\$30); Assessment (\$100); Assessment (\$1	1110 (110) 2 40743 1110 3 1110	reachaneth	
2) QC Check / Post Reprir Inspection 3) Upload Resurvey Photo [Repair Cost> Injury: Data 1001 G Reprint Superior Cost Cost	(•)	DARI Analden DARI Darwey DYTT Follow-1 PT I Follow-1 OTRI Ra-lanu T) NI I Iday DA I) NTUC Additi	Itupording (\$30); Assessment (\$100); Assessment (\$100); Arough Burvey (Resurvey); alout ING Only (\$2510); aloun EMRT Survey anal Sorvious:	ING (110) \$407633 \$110 \$407637 \$730	reachaneth	
2) QC Check / Post Reprir Inspection 3) Upload Resurvey Photo [Repair Cost> Injury: Data 100 [G] river/Owner: ontact No: armäged Portion:	(•)	DAIL Anaiden DAIL Anaiden DAI Daway PT Follow-1 DY I Follow-1 OTR Re-langu T) NI I Idas DA I) NTUC Additi ON! ON! ON!	Importing (\$30); Assessment (\$100); Imagh Survey (Reservey) Estinating Only (Wafin eston + SMRT Survey anal Servicus; (Cef / Tpl Allowenus	100 (110) \$40743 1130 1330 1330 1330 1330 1330 1330 13	reachaneth	
2) QC Check / Post Reprir Inspection 3) Upload Resurvey Photo [Repair Cost> Injury: Distributed Cost C	(•)	DAT Analden DAT Analden DAT Fowley OTT Follow-1 Perulainding OTT Follow-1 Perulainding OTT Ra-lama OTT Ra-lama	Integrating (\$30); Assessment (\$100); Incompt Survey (Reservey); Intellige Only (westing); Intel	100 (110) \$40743 1110	reachaneth	
2) QC Check / Post Repuir Inspection 3) Upload Resurvey Photo [Repuir Cost> Injury:	(•)	DATE Anadem 3) DATE Forming 4) PT Follow-1 5) PT Follow-1 For shalmhirs 6) TR Ra-lang 7) NI Idae DA 1) NTUC Additi ON! NS: Caurbe	Itaporting (SDO); Areassmant (STOO); Areassmant (ST	INC (110) S 40743 1110 S 40743 1110 S 100		Sand)
2) QC Check / Post Reprir Inspection 3) Upload Resurvey Photo [Repair Cost> Injury: Data Priver/Owner: order No: arranged Portion:	(•)	DAL Analden 1) All I Analden 2) Tri Follow-1 2) Pri Follow-1 2) Pri Follow-1 7) Ni i Idas DA 1) Ni UC Addill OR! *N5; Caurley *N6; Uapair *N6; Uapair *N6; Uapair	Itupording (\$30); Answerment (\$100); Irong to Survey (Resurvey) Islant Ling Only (waff); eilon + EMRT Survey anal Sorvices; Cer / Tpl Allowender Desardination refr inspection Heal theoris Coordination P(Nam INC) epalmat belo	100 (110) \$40743 1110		Sanatio Sadifio



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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 misr-presentation or witholding of material facts may allow insurance companies to repudiate

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.

Any faise reporting may be referred to the Police for investigation.

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 Submission

Date of Accident

Exact Location of Accident

Additional Location Information

Country/State of Loss

21/12/2020 17:45 (SGT)

19/12/2020 08:35 (SGT)

Duchess Rd, Singapore

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

FBR7651G

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

Email Address

Mobile Phone No.

Alternative Phone No

No

TAN RUIEN

SXXXX479C

tanruien95@gmail.com (Phone) +65-93283938

+65-93283938

VEHICLE PARTICULARS

Manufacturer

Model

Variant 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?

Vehicle Category

Honda

CBF190TR

Private use

No - Reporting only

Motorcycle

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number

Cover Note Number

NTUC

ThirdParty

5119427507

DRIVER

Name of Driver

NRIC No

TAN RUIEN SXXXX479C

Date Of Driving Pass 05/10/2020 Driving experience 2 MONTHS Gender Male Mobile Number (Phone) +65-93283938 Alt. Phone Number +65-93283938 Email Address tanruien95@gmail.com Address 26 BUKIT BATOK STREET 52 Address complement #15-05 Postcode 659247 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? No Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver 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 the accident?

No
Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged?

Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

soliciting/offering accident claims assistance?

No

DETAILS OF POLICE ACTION

Was the accident reported to the police?

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?

Was there any video captured by Car Camera?

Was there any audio recorded?

Yes

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHA7706B Vehicle Manufacturer Hyundai Vehicle Model Elantra Vehicle Variant Vehicle Colour Vehicle Category Taxi Name of Driver NOOR MOHAMMED BIN SHABBUR AHMED NRIC No SXXXX138J Contact Number (Phone) +65-94574187 Address Addrage complement

Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust 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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

l 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' law yers/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.

DUCHERS

(collectively the "Purposes")

- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

Mazda

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Invelling	on Duduss Rd at 60-70 kph, was behind taxi
SHATTO	
ane. SHA	
e-bralie	In Time cold let out a more
/ N	1 1 1 1 1
0	number plate & hunger, no damage to my relicle.

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

ACCIDENT'STATEMENT

ACC	IDENT DATE: 19	1.12/ 2020)	D /MM/YYYY), TI	ME: 08 . 3	5 инними
	ATION: Duch	ess Road	X.	17	
1	. DETAILS OF VE	HICLE	* *		
	GIVEHICLE NI	IMBER: FBR 76	516		11 12
		COMPANY: NTU			
		IBER: 51194275			
		COMPREHENSIVE		TINO DADO	eme exilect
				THIRD PARTY	rike & inerij
		DEL: CBF 190TR			e a Arman
	TITE:(SALOO	N / COUPE / MPV /	VAN/LORRY/	MOTORCYCLE	OTHERS)
₩:	GIVERICLE CA	TEGORY: (PRIVATE /	COMMERCIAL	MOTORCYCL	터 ·
	NIPURPOSE OF	USING AT ACCIDE	AL LIME: COMA	wite	
(4)	IJARE YOU CLA	IMING UNDER YOU	P OWN INSURAN	ICE [YES/NO]	2.4
>20		STATE (THIRD PART	Y CLAIM / REP.OF	KLING ONPA)	
2.,	INSURED / POLI			-	
	AJNAME: TP		170-	(MALE/	
		SSPORT: S9570		ONTACT: 93	
20 1929 02	c)ADDRESS:	to DT Bartols	St 52,#15	-05,5659	247
	+ 00 LTU III YO				
Mary 0 -	, - CONTINUE TO	3.d IF DRIVER ALSO	POLICY HOLDE	R	65
Ano of passanges	DRIVER	is above.		0000000	THE STATE
(Including driver)	GINAME:			(MALE /	FEMALE)
CIŽ	Olivici Chull Ve	SPORT:	c	ONTACT:	 -
-+2	c)ADDRESS:			·	
	*dinate of Rip	H: (08/08/1	195 MDD/MM	vvvvi .	
E		I: (MDOOB) OUTD	TO BE THE RESIDENCE OF THE PARTY OF THE PART		
	FIDATE OF DRIN		05/10/2020	22	
4	WAS DRIVER A	N EMPLOYEE OF	HE INSURED'S	COMPANY? C	VES / NO
1124.4.0	IF NO. RELATIO	DNSHIP OF THE D	RIVER WITH IN	SURED: OW	lev
5.	alWEATHER CO	NOTION: (CLEAR /	RAINING / OTHE	RS	
		CE: (DRY /(WET) / OT			1
6.		NJURED (YES / NO			
7.	a) REPORTED TO	POUCE (YES (NO)	t' .		F5 (#)
		STATE WHICH POLICE			
. 8.	THIRD PARTY VEH		7000		FLA
Ho of passenger	a) VEHICLE NU	MBER: SHA /	10PP WG	ODEL: Hyma	a classe
Including driver)	b) DRIVER'S NA		mmtd kin	SHabbely A	hmed
()	c) NRIC/FIN/PA	SSPORT: 5741	01383 C	ONTACT: 945	7 4187
9. 1	THIRD PARTY VEH	ICLE			8
the of passenger	d) VEHICLE NUI	MBER: .	мс	DDEL:	
	e) DRIVER'S NA	ME:			
Including driver)	f) NRIC/FIN/PA	SSPORT:	c	ONTACT:	
()	74.				335
!		1420	19	92 1	W1 (22)
	74 (0)				
	** (S				*
	** §	*1	vilen 95@	30	

email = tanvuien 95@ gmail can

Claim Handling

Accident MT/1114502				
Policy No.	5119427507	Vehicle No.	FBR7651G	2012 WAS SECURE OF SAME
Certificate No.			The second second	GST Registration No
Policyholder Name	TAN RUIEN			201000000000000000
Product Code	MOTORCYCLE INSURANCE	Cover Type	Third Party	Policyholder NRIC
Contact No.(Mobile)	93283938	Contact No.(Office)	Third Party	Loading
Email Address		Special Remark		Contact No.(Home)
KFK	No Yes	TCA	TATAS SANSAN	eCode
NCD Protection	No		Mo Yes	eCode Reason
▼ Accident Details	2000	NCD Entitlement(%)	0	Private Hire
Report Date	21/12/2020 17:44	Section War at 1994 1 222		
Date of Acodent	19/12/2020	Accident Report Within 24 hrs	Yes	Accident Type
Reporting Centre		Time of Accident hhimm	08:35	Country of Accident
Accident Location	ALDNO DUCUESS ROLD	Orange Force		ICM No.
▼ Total Excess Applicable	ALONG DUCHESS ROAD			
Excess Type	Per Accident	444 PROCESSO 2009 E		
INEMERS PERSE	The statements	Windscreen Excess		
OD Standard Excess	0.00	TP Standard Excess	29250	
YIED OD Excess	0:00	YIED TP Excess	0.00	
Additional Excess	(3000000)	The second second	0.00	Driver is Covered?
Total OD Excess Applicable	0.00	Total TP Excess Applicable		
▽ Benefits	4000	Tacas TP Excess Applicable	0,00	
GST Registered Informa	ation			
GST Registered	No			
GST Registration No.	140		GST Registration Date	
Modification History			GST Status Verified	Yes
Policyholder Mailing Add	dress			
Address 1	26 BUICT BATOK STREET 52	Address 2	#15-05 GUILIN VIEW	14020004
Address 4		Adoress Type	Singapore address	Address 3
Unit No.	15-05	Related Policy Number	5119427507	Post Code
♥ OI Driver Info				
Driver Name	Tan Ruien	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	S9590479C	E2211 (1221)
Register Date of Driver License	01/02/2020	Driver Age	25	Driver DOB
Contact No.(Mobile)	93283938	Contact No.(Office)	955	Driving Experience
Address 1	26 BUKIT BATOK STREET 52	Address 2	445.05 - 0.00	Contact No.(Home)
Address 4		Address Type	#15-05 GUILIN VIEW	Address 3
Unit No.	15+05	Andreas 186c	Singapore address	Post Code
Does he own a Singapore	Yes No	2 50000000000000		
Registered car?		Driver Vehicle No.	FBR7651G	Oriver Insurer Comp.
Declaration				
Breathalyser or Blood Test	0 mg	author posterings	= 50% = 11.50	
Reading?	5 119	Any injury?	Yes No	
ZYADY TIE DO				
Modification History				
Claim 001 New				
- 17 at 1800				
Claim Type *			OD-MX	Insured TAN RUII
Contact No.(Mobile)				Contact
			93283938	No. (Home)
Email Address				01
			TANRUIEN95@GI	MAIL.COM Vehicle FER7651 Number
Claim Description			FRD76510 / FUA	20400.86.00
Benfare d	2016 - 2410 - 255 to 1 1 - 2		[EDR/B314 / SHA	7706B ON 19 Dec 2020
Preferred				
Workshop	Preferend Liability Fully at I		471	
	Preferend Repair Option Preferred Workshop,		~	Colm

ROSLI WAHAE

001

Clear

Clear

Clear

Clear

Clear

Print AK letter

Last Doc. Received

Save Supmit Attachment Accident No. MT/1114502

Chaose File No file chosen

 Yes ○ No Upload Date 21/17/2020 17:52 Path * Category * Clear

Claim No.

Choose File No file chosen Choose File No file chosen

Confidential Please Select Y (NO Please Select × 40 Please Select Please Select Y NO Please Select Y NO Please Select v 10

Attachment	List					
Attachment	Uplcade	d By/Date	Category	9	Urgericy	Descr
	NAC_PAYA_UBI_800601(NATIONAL n 21 Dec :	ASSESSMENT CENTRE SERVICES) o 2020 17:52	Photos		Normal	Photos 20
1	NAC_PAYA_UBI_800601(NATIONAL n 21 Dec:	ASSESSMENT CENTRE SERVICES) o 2020 17:52	Photos		Normal	Photos 2t
1	NAC_PAYA_UB1_800601(NATIONAL n 21 Dec 2	ASSESSMENT CENTRE SERVICES) 0 020 17:52	Photos		Normal	Photos 20
	NAC_PAYA_UBI_800601(NATIONAL n 21 Dec 2	ASSESSMENT CENTRE SERVICES) o 2020 17:52	Photos		Normal	Photos 20
Sep.	NAC_PAYA_UB1_800601(NATIONAL n 21 Dec 2	ASSESSMENT CENTRE SERVICES) 6 020 17:52	Photos		Normal	Photos 20
1	NAC_PAYA_UBI_800601(NATIONAL n 21 Dec 2	ASSESSMENT CENTRE SERVICES) 0 020 17:51	Photos		Normal	Photos 21
\$	NAC_PAYA_UBI_800601(NATIONAL n 21 Dec 2	ASSESSMENT CENTRE SERVICES) 0 020 17:51	Photos		Normal	Photos 20
308	NAC_PAYA_UBI_600601(NATIONAL n 21 Dec 2	ASSESSMENT CENTRE SERVICES) 0 020 17:51	NRIC/ Driving License	¥	Normal	NRIC/ Driving Lic
10°	NAC_PAYA_UBI_B00601(NATIONAL n 21 Dec 2	ASSESSMENT CENTRE SERVICES) o 020 17:51	NRIC/ Driving License	2 X	Normat	NRIC/ Driving Lie
10.	NAC_PAYA_UBI_800601(NATIONAL n 21 Dec 2	ASSESSMENT CENTRE SERVICES) o 020 17:51	NRIC/ Driving License	¥	Normal	NRIC/ Driving Lie
13	NAC_PAYA_UBI_B00601(NATIONAL n 21 Dec 2	ASSESSMENT CENTRE SERVICES) o 020 17:51	SAS		Normal	SAS 201
Video List						
	Uploaded By/Date	Folder Date	ř	File Name		9

Display in New Window Scan and uploading

eBao Tech				Genera	alClaim
Hello, NAC_PAYA_UBI	_800601 Policy Query		+ Change Language	• Change Password	+ Log Ou
Notice of Loss	Policy No. Vehicle No.(Far Motor)	FBR7651G	Date of Accident Certificate Number	19/12/2020 16:13	
	Select Policy No.	Certificate Policyholder Policyhold Name NRIC TAN RUIEN S959047	fer product Cover Type Vehicle No.	Insured Commence Object Date FBR7651G 17/10/2020	Expiry Date 16/10/2021