

NATIONAL Assessment Centre Services.

(with 1 Jan 2008)

5408218A0005

Date In: 10/08/2021 16:50
Ref No: NA2103549
Veh No: SMP 9806D
D.O.A: 08/08/2021 12:00

Job description: SAS e-illing
E-mail (By date time, A/C time)
I-Motor Claim Form
I-Motor W/O (Within: 00 hrs, TP 1hrs)
I-Photo Uploaded
Assessment/Survey Report
Ass't Report by Fax / Hand to Owner/VISOR

Date & Time Completed

Done by

(1) TP / Reporting Only

TP Insurer:

Preferred Wkup / INC Ass'n Wkup / QW:

TP Brand/Type: Vch No: SSE 8740X

INC () / Non-INC ()

Owner / Driver:

Policy No:

Period:

Cover Type:

Confirmed by:

Date:

Time:

Insured/Driver Liability:

(%) [Note: Est. Status (WO): N: 0-20%; P: 21-79%; F: 80-100%]

Year of Registration:

Warranty: YES () / NO ()

Brocess (\$)

Loading: \$1,000 () / \$2,000 ()

() Walk-In Customer: Customer's Information strictly Confidential & Strictly NO Refor of reputation.
() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In () : Invoice: YES () / NO () : Towing Co: ()

1) Apply for Transport Allowance () / Courtesy Car ()

2) QO Check / Post Repair Inspection

3) Upload Resurvey Photo [Repair Cost > \$3,000]

Injury:

NA2103549

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

1) All Accident Reporting (50)	INC (10)
2) PAI Survey Assessment (\$100)	\$100.00
3) PAI Towing Fee	\$120
4) PAI Follow-through Survey	\$20
5) PAI Follow-through Survey (Resurvey)	\$20
6) PAI Follow-through Survey (Resurvey) (over 10 in 700)	\$75
7) PAI Follow-through Survey (Resurvey) (over 10 in 700)	\$160
8) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
9) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
10) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
11) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
12) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
13) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
14) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
15) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
16) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
17) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
18) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
19) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
20) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
21) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
22) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
23) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
24) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
25) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
26) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
27) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
28) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
29) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
30) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
31) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
32) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
33) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
34) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
35) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
36) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
37) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
38) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
39) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
40) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
41) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
42) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
43) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
44) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
45) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
46) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
47) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
48) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
49) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
50) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
51) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
52) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
53) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
54) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
55) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
56) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
57) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
58) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
59) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
60) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
61) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
62) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
63) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
64) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
65) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
66) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
67) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
68) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
69) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
70) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
71) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
72) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
73) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
74) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
75) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
76) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
77) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
78) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
79) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
80) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
81) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
82) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
83) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
84) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
85) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
86) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
87) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
88) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
89) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
90) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
91) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
92) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
93) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
94) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
95) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
96) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
97) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
98) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
99) PAI Follow-through Survey (Resurvey) (over 10 in 700)	
100) PAI Follow-through Survey (Resurvey) (over 10 in 700)	

Fee Charged
Fee Charged

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 Submission	10/08/2021 16:50 (SGT)
Date of Accident	08/08/2021 12:00 (SGT)
Exact Location of Accident	Stadium Cres, Singapore
Additional Location Information	STADIUM WALK T-JUNCTION
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP9846D
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN CHOON KAIW (CHEN CHUNJIAO)
NRIC No	SXXXX466Z
Email Address	nylsaj@yahoo.com
Mobile Phone No	(Phone) +65-90494489
Alternative Phone No	+65-90494489

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	Gla180
Variant	-
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 - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1595

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00127382100
Cover Note Number	-

DRIVER

Name of Driver	TAN CHOON KAIW (CHEN CHUNJIAO)
NRIC No	SXXXX466Z

Date Of Birth	25/01/1979
Occupation	Indoor
Date Of Driving Pass	11/10/2004
Driving experience	16 YEARS AND 10 MONTHS
Gender	Female
Mobile Number	(Phone) +65-90494489
Alt. Phone Number	+65-90494489
Email Address	nylsaj@yahoo.com
Address	BLK 559 PASIR RIS STREET 51 #04-219
Address complement	-
Postcode	510559
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	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	SIM CHEOW TEE
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PEALEASE REFER TO POLICE REPORT G/20210808/7044

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH OWNER
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SBS8740X
-----------------------------	----------

Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	TAN CHOON KIAW
Gender	Male
Phone No	(Phone) +65-90494489
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SMP9846D
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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 willful 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.

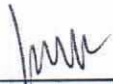
8. Consent under the Personal Data Protection Act (PDPA)

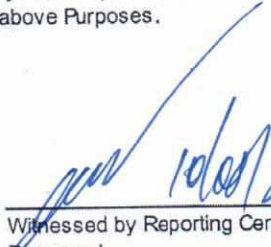
I understand, acknowledge, agree and consent that:

(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' 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.
- (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.

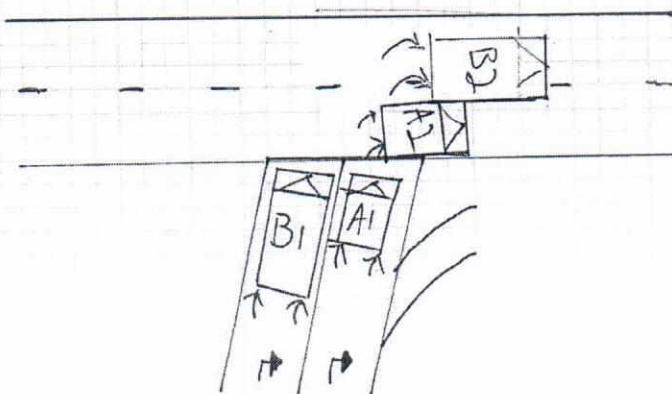

Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre Personnel

Sketch Plan

T-Junc of Stadium Crescent & Stadium Walk



Vehicle A : SMP9846D

Vehicle B : SBS8740X

Refer to police report No. G1 20210808/2044

We declare the foregoing particulars are true in every respect.

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

Witnessed by Reporting Centre
Personnel

Date of Accident : 08/08/2021 Accident Time: 1200 (24-HR-FORMAT)
Accident Place : T-Junc of Stadium Crescent & Stadium Walk
Vehicle Reg. No (Car plate No.) : SMP9846D Vehicle Make/Model: m/b ELA180
Insurance Company : China Taiping Policy No. DMPCLSNW00127382100
Name of Registered Owner : Company / Individual TAN Choon Kaiw (CHUAN CHUN JIAO)
ID of Registered Owner : Co Reg No: - Owner's NRIC No: S7902466Z

DRIVER'S Name : Tan Choon Kaiw DRIVER'S NRIC No: S7902466Z

DRIVER'S Date of Birth : 25 Jan 1979 DRIVER'S License Pass Date 11 Oct 2004

Relationship bet. Owner & Driver : Spouse / Parents / Children / Sibling / Employee / Others: Owner

DRIVER'S Address : APT BIK 551 Pasir Ris Street 51 #04-219-S (510559)

DRIVER'S Contact No / Alt No : 1) 9049 4489 2) -

DRIVER'S Occupation : INDOOR / OUTDOOR (eg. working inside or outside of an office)

Email Address : nylsaj@yahoo.com

Weather & Road Surface : CLEAR & DRY / RAINING & WET / AFTER RAIN & WET

Reporting Type : Reporting Only / Claim Other Party / Claim Own Insurance

Number of Passengers (including Driver): 2 Passenger Name: Sim Cheow Tee Gender: M/F

Was the accident reported to the police? YES / NO Passenger Name: Gender: M/F

Was there any video captured by car camera? YES / NO Any Injuries: YES / NO Injured Name: TAN KOON KAIW

Exact purpose for which vehicle was being used at the time of accident: Private use / Work purpose

Other Party Driver's Particulars (if any)

Vehicle Reg No: SBS 8740X

Vehicle Reg No: _____

Vehicle Make/Model: _____

Vehicle Make/Model: _____

Name DRIVER: _____

Name DRIVER: _____

IC No. DRIVER: _____

IC No. DRIVER: _____

DRIVER'S Contact & add: _____

DRIVER'S Contact & add: _____

Other Party Driver's Particulars (if any)

Vehicle Reg No: _____

Vehicle Reg No: _____

Vehicle Make/Model: _____

Vehicle Make/Model: _____

Name DRIVER: _____

Name DRIVER: _____

IC No. DRIVER: _____

IC No. DRIVER: _____

DRIVER'S Contact & add: _____

DRIVER'S Contact & add: _____



**SINGAPORE
POLICE FORCE**



G/20210808/7044

1 of 2

POLICE REPORT (NP299)

Report No. G/20210808/7044

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

Date/Time Report Made 08/08/2021 21:03	Vide Report No.	Station Diary No.
Name Of Informant TAN CHOON KAIW	Address 559 PASIR RIS STREET 51 #04-219 SINGAPORE 510559	
ID Type / ID No. NRIC NO / S7902466Z	Contact No. Home/Office: Mobile: 90494489	
Nationality SINGAPORE CITIZEN	Email Address NYLSAJ@YAHOO.COM	
Occupation Information technology project manager	Sex Female	Age 42
Institution/School Name	Date of Birth 25/01/1979	Race Chinese
Date/Time Of Incident 08/08/2021 11:55	Location Of Incident STADIUM WALK	

Brief details.

On the stated date and time, I was driving my vehicle SMP9846D along stadium walk towards stadium crescent.

I was travelling straight along the right of 2 lanes.

At the junction of stadium walk and stadium crescent, I was making a right turn onto stadium crescent.

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Authentication Stamp

Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:

08/08/2021 21:03

Classification Of Case:



**SINGAPORE
POLICE FORCE**



G/20210808/7044

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20210808/7044

SBS8740X was also making a right turn at the same time along the lane to the left.

I had made sure to keep in lane whilst turning. Prior to completing my right turn, I realised that said bus was edging into my lane.

Hence, I came to a stop to give way to the bus. However, the bus did not stop or slow down and still crashed into the front left portion of my vehicle.

After the accident, I started experiencing headaches and pain in my chest. As such, I went to a clinic Our Family Physician and Surgery nearby my place for treatment.

I was given 3 days MC.

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Authentication Stamp

Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:

08/08/2021 21:03

Classification Of Case:



中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

MX1E

N SN

AN0679A

Cov. Type:C

CERTIFICATE No.

DMPCSNW00127382100

Engine No.: 27091031903602

Cha. No.: WDC 1569422J653654

1. Index Mark and Registration
Number of Vehicle

SMP9846D

AUTOSAFE

2. Name of Policy Holder

TAN CHOON KAW

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

23/06/2021
(00:00:00)

Named Drivers Ex Sect. I

S\$500.00

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25

S\$3,000.00

Ex Sect. I - Age >= 26

S\$500.00

4. Date of Expiry of Insurance

22/06/2022

* Age as at date of accident

EX ON WINDSCREEN

S\$100.00

5. Persons 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 permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to use**

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Then) will be doubled. One time Waiver of Excess for the first S\$1,000 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our

Authorised Workshops for each Policy Year.

HIRE PURCHASE CO.: GOLDBELL FINANCIAL SERVICES PTE. LTD.

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

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: ABWIN PTE LTD
Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)
3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033

www.sg.cntaiping.com