

ASS. REC. BY:

Steve

CS/A1621008697/ETC

ASSIGNMENT

From:

Date:

Estimated Cost:

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

To inspect Vehicle No:

at Workshop m/s

at

Insured:

Policy No. 2070103559

Claims No. 0208457248SG

Sum Insured:

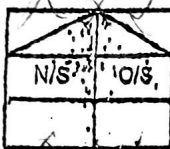
Excess: 0

(Client's Record)

Make of Veh:

(Policy Condition)

Remark: The veh had commenced its
repair at the time of inspection.



Ret. or Market Value:

IDAC Accident Report: Consistent? : Yes or No

GIA / PR Seen: Consistent? : Yes or No

Est. Repair: days Res.: Yes or No

Cum Sum: % 3 Val.: Yes or No

QA / REV / REP. / 24 HRS

Date: Person Contacted:

Vehicle: IN / OUT

Veh No:

SMT 64632

Yr Regn:

9/7/99

Type: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make:

Mitsubishi Outlander

C.C.

1998

Colour:

Blue

A/O: Insured / Std / NI / N

Sp. Reading

7329

T/Radio: Insured / Std / NI / N

Eng/No:

C/No:

GFW0710365

Gen. Cond: Good / Fair / Poor / Burnt

Steering: Inorder / Jammed / Leaked / Burnt or

Brake: Inorder / Jammed / Leaked / Burnt or

Modl: Nil / S/Rim / STD A/Rim or

Tyre Size:

F:

225/55R18

R:

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Toyo

Front

Rear

R/Bal.

4

mm

R/Bal.

4

mm

L/Bal.

4

mm

L/Bal.

4

mm

D.O.A.

14/8/21

O.O.I.

17/8/21

Survey held at

Cycle & Garage

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

The U/C / chassis frame / Body Structure affected due to collision

Date / Time Action / Instruction

NAK-1008

Confirm \$9539.63 before excess \$0 and gst

red: 10379.89;52%

Time/Time, File, Poss id?



Prell. Report

Days Of Repair:

15

Resurvey No. of Trip:

Survey Fee:

Time/Time, File Return id?



Final Report

Transportation:

Add Fee:



Site Insp (\$



Interview (\$



Tech. Inve (\$



Veh and (\$

Photos

Others

TOTAL

Approved: Owner:

App. Sum / U.C. /



CYCLE & CARRIAGE

CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED

PANDAN GARDENS CUSTOMER SERVICE CENTRE

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056



Co Reg No : 197701469G

ESTIMATE

GST Reg No : MR-8500111-X

Invoice Name & Address	Owner Name & Vehicle Info
AIG Asia Pacific Insurance Pte. Ltd. MOTOR CLAIM DEPT 78 SHENTON WAY #09-16 AIG BUILDING SINGAPORE 079120 Contact No 6419 1892	Cust No/Name KCV15662/FAHEEM AHMED KHAN Reg No/Reg Date SMT6463Z / 09/07/202 Date In/Mileage / 0 Chassis No GF7W0700365 Engine No 4J11CC5721 Make/Model MIT/20MY OUTLANDER 2.0 CVT MODERN (Colour/Trim D01 COSMIC BLUE MET/ BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No		
KAX00008	Credit	16/08/2021/ 17:43	BLE	261 / Edwin Caina	14219		
Description of Goods / Services				Qty	Unit Price	Disc%	Amount
E PNT88000							1350.00
RENEW (Fr Portion) FR BUMPER		450 X 1					450
REPAIR LHF FENDER							
E PNT88000							3150.00
RENEW (Rr Portion) RR BUMPER , RR END PNL & RR FLR PNL		6 X 450					2700
REPAIR TAILGATE , LHR FENDER , RHR FENDER & RR CHASSIS							
E PNT98000							3150.00
RESPRAY RR BUMPER , RR END PNL , TAILGATE , RR FLR PNL , LHR FENDER ,		5 X 350					1750
RHR FENDER , RR CHASSIS , FR BUMPER & LHF FENDER							
E PNT88000							120.00
REMOVE & REFIT RR FLR BOARD , TRIM , CARPET & SEAT		(photo)					
TO FACILITATE REPAIR							
A 54900099							30.00
CHECK WIRING ELECTRICAL SYSTEM							
A 10028901							120.00
TO CARRY OUT DIAGNOSTIC CHECK ON ELECTRONIC CONTROL SYSTEM							
E PNT88000							1000.00
CONDUCT CHASSIS ALIGNMENT-CELETTE BENCH							
B WHEELALIGNMENT							120.00
To Conduct Computerize Full Wheel Alignment							
M SUNDRY							50.00
SUPPLY FR NUMBER PLATE WITH CASING							
M SUNDRY							50.00
SUPPLY RR NUMBER PLATE WITH CASING							
E PNT88000							60.00
REMOVE & REFIT REVERSE SENSOR							
M SUNDRY							220.00
SUPPLY REVERSE SENSOR		(up)					
M SUNDRY							780.00
SUPPLY FR CAMERA (Fr Grille)							
M SUNDRY							40.00
APPLY ANTI CORROSION ON AFFECTED AREAS							
M SUNDRY							60.00

Confirm & accepted by

Authorized signatory and company stamp

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required. Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.



CYCLE & CARRIAGE

CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED
PANDAN GARDENS CUSTOMER SERVICE CENTRE

209 Pandan Gardens Singapore 609339 Tel: 65684555 Fax: 65691056



ESTIMATE

GST Reg No : MR-8500111-X

Co Reg No : 197701469G

Invoice Name & Address	Owner Name & Vehicle Info
AIG Asia Pacific Insurance Pte. Ltd. MOTOR CLAIM DEPT 78 SHENTON WAY #09-16 AIG BUILDING SINGAPORE 079120 Contact No 6419 1892	Cust No/Name KCV15662/FAHEEM AHMED KHAN Reg No/Reg Date SMT6463Z / 09/07/202 Date In/Mileage / 0 Chassis No GF7W0700365 Engine No 4J11CC5721 Make/Model MIT/2OMY OUTLANDER 2.0 CVT MODERN () Colour/Trim D01 COSMIC BLUE MET/ BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
KAX00008	Credit	16/08/2021/ 17:43	BLE	261 / Edwin Caina	14219			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
SUPPLY BODY PNL SEALANT								40.00
M SUNDRY								
SUPPLY C&C BADGE								20.00
M SUNDRY								
Sundries								
M	FACE,FR BUMPER	OR			1.00	1048.00	23.00	806.96
M	EXTENSION,FR BUMPER	CUT (Black)			1.00	517.00	23.00	398.09
M	COVER,FR BUMPER	CUT (Silver)			1.00	361.00	23.00	277.97
M	GARNISH,FR BUMPER SIDE	(RH) ?			1.00	48.00	23.00	36.96
M	GARNISH,FR BUMPER SIDE	(LH) - CRA (chrome)			1.00	48.00	23.00	36.96
M	GARNISH,FR BUMPER SIDE	(RH) - OR (chrome)			1.00	220.00	23.00	169.40
M	GARNISH,FR BUMPER SIDE	(LH) - OR (chrome)			1.00	220.00	23.00	169.40
M	GARNISH,FR BUMPER SIDE	(RH) - OR (chrome)			1.00	112.00	23.00	86.24
M	GARNISH,FR BUMPER SIDE	(LH) - OR (chrome)			1.00	112.00	23.00	86.24
M	REINFORCEMENT,FR BUMPER	?			1.00	510.00	23.00	392.70
M	REINFORCEMENT,FR BUMPER	?			1.00	135.00	23.00	103.95
M	GRILLE ASSY,RADIATOR	CUT ?			1.00	550.00	23.00	423.50
M	COVER,HEADLAMP SUPT PANEL				1.00	50.00	23.00	38.50
M	FACE,RR BUMPER	OR			1.00	811.00	23.00	624.47
M	BRKT,R/BMPR FACE SIDE,LH	?			1.00	12.00	23.00	9.24
M	BRKT,R/BMPR FACE SIDE,RH	?			1.00	12.00	23.00	9.24
M	REINFORCEMENT,RR BUMPER,LH	?			1.00	79.00	23.00	60.83
M	REINFORCEMENT,RR BUMPER,RH	?			1.00	79.00	23.00	60.83
M	CLIP,FR BUMPER	npc			10.00	4.00	23.00	30.80
M	EXTENSION,RR BUMPER	OR (Silver)			1.00	360.00	23.00	277.20
M	MOULDING,RR BUMPER,LH	npc			1.00	88.00	23.00	67.76
M	MOULDING,RR BUMPER,RH	npc			1.00	88.00	23.00	67.76
M	MOULDING,RR WHEEL ARCH,LH	?			1.00	168.00	23.00	129.36
M	MOULDING,RR WHEEL ARCH,RH	?			1.00	168.00	23.00	129.36
M	REFLECTOR,TAIL LAMP,LH	?			1.00	100.00	23.00	77.00
M	REFLECTOR,TAIL LAMP,RH	?			1.00	100.00	23.00	77.00
M	LAMP ASSY,COMB,RR LH	X			1.00	603.00	23.00	464.31
M	LAMP ASSY,COMB,RR RH	X			1.00	603.00	23.00	464.31

Confirm & accepted by

Authorized signatory and company stamp

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required. Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.



CYCLE & CARRIAGE

CYCLE & CARRIAGE AUTOMOTIVE PTE LIMITED
PANDAN GARDENS CUSTOMER SERVICE CENTRE

209 Pandan Gardens Singapore 609339 Tel 65684555 Fax: 65691056



ESTIMATE

GST Reg No : MR-8500111-X

Co Reg No : 197701469G

Invoice Name & Address	Owner Name & Vehicle Info
AIG Asia Pacific Insurance Pte. Ltd. MOTOR CLAIM DEPT 78 SHENTON WAY #09-16 AIG BUILDING SINGAPORE 079120 Contact No 6419 1892	Cust No/Name KCV15662/FAHEEM AHMED KHAN Reg No/Reg Date SM16463Z / 09/07/202 Date In/Mileage / 0 Chassis No GF7W0700365 Engine No 4J11CC5721 Make/Model MIT/20MY OUTLANDER 2.0 CVT MODERN () Colour/Trim D01 COSMIC BLUE MET/ BK BLACK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No			
KAX00008	Credit	16/08/2021/ 17:43	BLE	261 / Edwin Caina	14219			
Description of Goods / Services					Qty	Unit Price	Disc%	Amount
M	LAMP ASSY, TAIL, LH	X			1.00	506.00	23.00	389.62
M	LAMP ASSY, TAIL, RH	X			1.00	506.00	23.00	389.62
M	MARK, OUTLANDER	X			1.00	95.00	23.00	73.15
M	PANEL, RR END	00 (photo)			1.00	326.00	23.00	251.02
M	PANEL, RR END, INR LH	00			1.00	0.00	23.00	
M	PANEL, RR END, INR RH	00			1.00	146.00	23.00	112.42
M	FLOOR, RR	00 (photo)			1.00	751.00	23.00	578.27
M	TRIM, RR END	CRU			1.00	113.00	23.00	87.01
M	BOX, CARGO FLOOR	BR			1.00	204.00	23.00	157.08
M	LID, CARGO FLOOR BOX	X			1.00	295.00	23.00	227.15
M	W/STRIP, TAILGATE OPENING	TAL			1.00	213.00	23.00	164.01
M	STRIKER, TAILGATE LATCH	X			1.00	20.00	23.00	15.40
M	LATCH, TAILGATE	X			1.00	385.00	23.00	296.45
M	MOULDING, FR BUMPER, LH	ACC			1.00	97.00	23.00	74.69
M	MOULDING, FR BUMPER, RH	ACC			1.00	97.00	23.00	74.69
M	MOULDING, FR WHEEL ARCH, LH	1			1.00	168.00	23.00	129.36
M	MOULDING, FR WHEEL ARCH, RH	1			1.00	168.00	23.00	129.36
M	TRIM, RR SHELF	X			1.00	672.00	23.00	517.44

SURVEYOR NAME: Steve (LKK) 17/8/21, 2.00pm

SURVEYOR SIGNATURE: 00- M AL

EXCISE - ?

DATE: PIP

REMARKS: My Bot sy
15 dgs

LKK Auto Consultants hence notify the Repairer of the following:

- 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

Confirm & accepted by

Authorized signatory and company stamp

7% GST on

Nett 19,603.08

19603.08 1372.22

Total Payable 20,975.30

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required. Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.



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 Authorized 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. 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 at request.

ACCIDENT STATEMENT

Date of Submission	16/08/2021 14:56 (SGT)
Date of Accident	14/08/2021 14:00 (SGT)
Exact Location of Accident	Dairy Farm Rd, Singapore
Additional Location Information	OPPOSITE DAIRY FARM ROAD RESIDENCE ON MAIN ROAD
Country/State of Loss	Singapore

VEHICLE INFORMATION

Vehicle Registration Number	SMT6463Z
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	FAHEEM AHMED KHAN
NRIC No	SXXXX372G
Email Address	Khanfaheem2005@gmail.com
Mobile Phone No	(Phone) +65-81958410
Alternative Phone No	+65-81958410

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Outlander
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1998

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2070103559
Cover Note Number	-

DRIVER

Name of Driver	FAHEEM AHMED KHAN
NRIC No	SXXXX372G



Date Of Birth	06/08/1976
Occupation	Indoor
Date Of Driving Pass	14/08/2014
Driving experience	7 YEARS
Gender	Male
Mobile Number	(Phone) +65 81958410
Alt. Phone Number	+65 81958410
Email Address	Khanfaheem2005@gmail.com
Address	BLK 345 UPPER BUKIT TIMAH ROAD
Address complement	#03-09 SINGAPORE
Postcode	588197
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	Yes

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHMENT

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

Vehicle Registration Number	SMS5313K
Vehicle Manufacturer	BMW
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	NG LI YAN
Contact Number	(Phone) +65-96861134
Address	-
Address complement	-

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

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SFK77A
Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category Private car
Name of Driver CLEO
Contact Number (Phone) +65-97912428
Address
Address complement
Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver) CAR 2

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number UNKNOWN
Vehicle Manufacturer
Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category Private car
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) CAR 1

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 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' 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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Speed bump
↑

Car 4 Car 3 Car 2 Car 1 Bus stop
[] [] [] [] [BUS]

My car

Car 4 → hit my car (3) from behind
My car was stationary → it caused my car to hit front car (2) which in turn hit car 1

Daeny formed residence

Describe Circumstances of the Accident

→ BMW car driver accepted her fault after
accident & promised to inform her
car insurance company.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date &
Time

Jul
1048 16/8/21

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

Witnessed by Reporting Centre
Personnel

Ed

10:24

all 4G

Done Policy_Schedule_for_Ne...



CYCLE R CARRIAGE AUTO PROTECTION

Name of Policyholder: **PRINCE ALBERT**
Period of Insurance: **01.01.2020 To 31.12.2020**
Engine No.: **101101111**
Chassis No.: **101101111**

Vehicle No.: **101101111**
Policy No.: **101101111**
Insured Date: **01.01.2020**

Vehicle Details

Engine Capacity/Type: **1.800 CC**
Drive: **FRONT**
Type of Car: **Car**
Year of Manufacture: **2019**
First Year of Registration: **2019**
Insured Value: **100,000**

Age Condition

Age Condition: **All Age Condition**
Uninsured Motorist: **Uninsured Motorist**

Insurance Details

Sum Insured: **100,000**
Excess: **500**
Type of Insurance: **Car**

Important Notes

1. This policy is subject to the terms and conditions of the policy.

Important Notes

2. This policy is subject to the terms and conditions of the policy.

24-HOUR AUG AUTO HOTLINE: +65 6338 6200

IMPORTANT: READ THIS DOCUMENT IN YOUR CAR AT ALL TIMES

What to do in the event of an accident?

- 1. Stop the car and move it to a safe place.
- 2. Call the police and the insurance company.
- 3. Report the accident to the police and the insurance company.
- 4. Do not talk to anyone else.
- 5. Do not sign any documents.
- 6. Do not admit fault.
- 7. Do not leave the scene.
- 8. Do not drink alcohol.
- 9. Do not use drugs.
- 10. Do not use mobile phone.