

FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay
Singapore 417883

Tel No: 67465405 / 67465376 Fax No: 67458520

Tax Reg No: 200006262D

Date : 08.02.2022

China Taiping Insurance Singapore Pte Ltd
3 Anson Road
#16-00 Springleaf Tower
Singapore 079909

Attn: Motor Claim Department

Dear Sir/Madam,

ACCIDENT INVOLVING VEHICLES : SLC 6845G / SLJ 595E ON 18.11.2021

We are the authorized repair workshop for the owner of motor vehicle no: **SLC 6845G** , which was involved in the captioned accident with your insured vehicle no: **SLJ 595E** . The vehicle owner has requested and authorized us to assist him in presenting his/her claim against the party responsible for the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving, we are submitting these claims for your consideration on behalf of the owner/claimant.

1) Cost of Repair (inclusive of GST)	\$	6,206.00
2) Loss of Use (6 days + 1 Sun X S\$60)	\$	420.00
3) GIA Search Fee	\$	2.00
	\$	<u>6,628.00</u>

We enclosed herewith the following documents to support the claims:

- | | |
|------------------------------------|----------------------------------|
| a) Final Repair Invoice | b) GIA Search Result |
| c) Letter of Authorisation, etc... | d) GIA Report |
| e) Police Report | f) I/C & Driving Licence |
| g) Insurance Certificate | h) Vehicle Registration Log Card |

Kindly look into the matter and let us hear from you on the settlement of our customer's claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the owner/claimant.

Thank you.
Yours faithfully,



Jason Tang (jason@fastechauto.com.sg)
For Fastech Auto Pte Ltd

TAX INVOICE

FASTECH AUTO PTE LTD

1 Kaki Bukit Ave 6 #01-48 Autobay

Singapore 417883

Tel No: 67452063 / 67467158 Fax No: 67458520

Tax Reg No: 200006262D

China Taiping Insurance Singapore Pte Ltd
3 Anson Road
#16-00 Springleaf Tower
Singapore 079909

Attn : Motor Claim Department

Tax Invoice : 22686

Date : 08.02.2022
Vehicle No : SLC 6845G
Make/Model : HONDA VEZEL
Chassis/Eng# :
Accident Date : 18.11.2021
Claim No :
Reference : 1121 -22686
Policy No :

	Amount
To proceed on lump sum repair	S\$ 5800.00

E. & O. E.

Total : S\$	5800.00
GST @ 7% : S\$	406.00
Amount Due : S\$	6206.00



for FASTECH AUTO PTE LTD

All Invoices are subjected to GST

INSURER ENQUIRY

Find insurer

Vehicle reg. no.

SLJ595E

Date of Accident

18/11/2021 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance **China Taiping Insurance (Sing...**

Period of Insurance **05/10/2021 - 04/10/2022**

Requested By **ALLAN TANG (KIM CHWEE AUT...**

Requested Date **19/11/2021 17:40**

Payment details

Request Amount: **S\$1.87**

GST Amount: **S\$0.13**

Total Amount Due (GST Inclusive): **S\$2**

General Insurance Association

Records Management Centre

GST Registration No: **M400017735**

DATE : 19/11/2021

TO : China Taiping Insurance Singapore Pte Ltd

RE : ACCIDENT INVOLVING VEHICLE NO. SLC 6845G/SLJ 595E

ALONG Kramat Road towards CTE

ON 18/11/2021

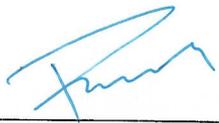
I/We, Goh Sock Pei, Pearl (Wu ShuPei)

of (NRIC No./ROC No.) S8704955H

of BIK 168C Simei Lane #06-56 S(523168)

owner of vehicle no. SLC 6845G in consideration of M/s FASTECH AUTO PTE LTD repairing my/our vehicle SLC 6845G at my/our instruction and hereby authorise M/s FASTECH AUTO PTE LTD to demand claim settlement whatever amount settled/payable by the Insurance Company and/or third party or to commence legal proceedings, if necessary, under my name, for the cost of repairs, car rental and/or loss of use, etc. and to their appointing solicitor to act for me/us in respect of the said accident/claim and all claimed and/or settled shall belong to them absolutely.

I/We further agree and undertake to indemnify them against the above-mentioned claim cost which may arisen therewith.

Signature of Owner : 

Name of Owner : Goh Sock Pei, Pearl (Wu ShuPei)

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	20/11/2021 11:28 (SGT)
Date of Accident	18/11/2021 21:00 (SGT)
Exact Location of Accident	Kramat Rd, Singapore
Additional Location Information	KRAMAT ROAD TOWARDS CTE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC6845G
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	GOH SOCK PEI, PEARL (WU SHUPEI)
NRIC No	SXXXX955H
Email Address	TONGKKK43@HOTMAIL.COM
Mobile Phone No	(Phone) +65-92252087
Alternative Phone No	(Home) +65-92252087

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezei
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	0

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5123297553
Cover Note Number	-

DRIVER

Name of Driver	TONG WAI KEONG, NELSON
NRIC No	SXXXX767J

Date Of Birth	05/01/1988
Occupation	Indoor
Date Of Driving Pass	14/10/2008
Driving experience	13 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-92212126
Alt. Phone Number	-
Email Address	TONGKKK43@HOTMAIL.COM
Address	APT BLK 475 PASIR RIS DRIVE 6 #06-544
Address complement	-
Postcode	510475
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Friend
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	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)	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	PEARL
Gender	Female

PASSENGER 2

Name	ETHAN FU
Gender	Male

PASSENGER 3

Name	MEGAN FU
Gender	Female

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 ATTACHED

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 DRIVER
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLJ595E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	China Taiping Insurance (Singapore) Pte. Ltd.
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	TONG WAI KEONG, NELSON
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SLC6845G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	PEARL
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SLC6845G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 3

Name of injured person	ETHAN FU
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SLC6845G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 4

Name of injured person	MEGAN FU
Gender	-
Phone No	-

Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? SLC6845G
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' 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.

[Signature]

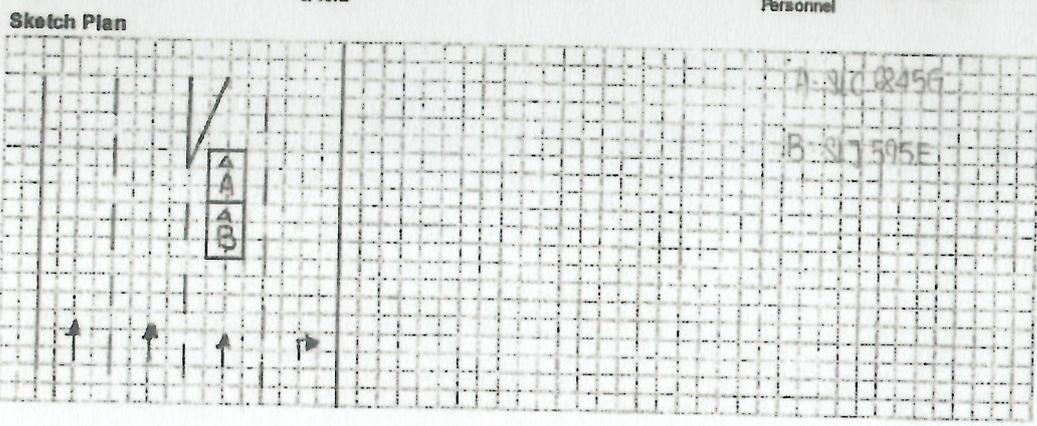
 Policyholder's Signature / Date & Time

[Signature]

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

[Signature]

 Witnessed by Reporting Centre Personnel



Describe Circumstances of the Accident

On 18/11/2021 at about 21:00PM. I was travelling along Kramat Rd towards CTE. The vehicle in front slowed down and stopped, I followed. Suddenly, vehicle B hit the rear portion of my vehicle.

Declaration

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


Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



T/20211124/7045

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 4

Report No. T/20211124/7045

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/11/2021 21:47		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: TONG WAI KEONG, NELSON			Address: 475 PASIR RIS DRIVE 6 #06-544 SINGAPORE 510475		
ID Type / ID No.: NRIC NO / S8800767J			Contact No.:		Mobile: 91118242
Nationality: SINGAPORE CITIZEN			Email: NELSON.TALENTS@GMAIL.COM		
Sex: Male	Age: 33	Date of Birth: 05/01/1988	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Sports coach			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/11/2021 21:00	Type of Location: Straight Road
Location: KRAMAT ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Moving Vehicle Against - Others				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SLC6845G	Car					0
SLJ595E	Car	MITSUBISHI	ATTRAGE	White		0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20211124/7045

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 4

Report No. T/20211124/7045

CONTINUATION OF REPORT

Driver			
Name	TONG WAI KEONG, NELSON		ID No. S8800767J
Related Vehicle	SLC6845G (Car)		Contact No. 91118242
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: 3 Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Passenger			
Name	ETHAN FU		ID No. T0913933D
Related Vehicle	SLC6845G (Car)		Contact No. 92252087
Hospital/Clinic	KK WOMEN'S AND CHILDREN'S HOSPITAL		Class of Driving Licence & Expiry Class: 3 Date of Expiry: NIL
Date	19/11/2021		Date 19/11/2021
No. of Days granted Medical Leave	03	Degree of	Slight
Passenger			
Name	MEGAN FU		ID No. T1119644B
Related Vehicle	SLC6845G (Car)		Contact No. 92252087
Hospital/Clinic	KK WOMEN'S AND CHILDREN'S HOSPITAL		Class of Driving Licence & Expiry Class: 3 Date of Expiry: NIL
Date	19/11/2021		Date 19/11/2021
No. of Days granted Medical Leave	03	Degree of	Slight
Passenger			
Name	PEARL GOH		ID No. S8704955H
Related Vehicle	SLC6845G (Car)		Contact No. 92252087
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: 3 Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL



**SINGAPORE
POLICE FORCE**



T/20211124/7045

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 4

Report No. T/20211124/7045

CONTINUATION OF REPORT

Brief Details.

Travelling along Kramat Road entering CTE Highway.

Vehicle in front suddenly E-Brake, then I followed by an E-brake, however another vehicle (SLJ595E) collided from behind a few seconds later.



**SINGAPORE
POLICE FORCE**



T/20211124/7045

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

4 of 4

Report No. T/20211124/7045

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
SYED ZAYID MUHAMMAD BIN SYED ABDUL
WAHID ALHINDUAN
Contact No.: 65476404

NP168

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

Date/Time:
24/11/2021 21:47

Classification Of Case:

Order

For Insurance Reporting
Claim Purposes Only

5870453



NRIC No. **S8704955H**

Date of issue

12-02-2018

Address

APT BLK 168C SIMEI LANE
#06-56
SINGAPORE 523168

For Insurance Reporting
Claim Purposes Only

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8704955H**



Name

GOH SOCK PEI, PEARL
(WU SHUPEI)

吴淑珮

Race

CHINESE

Date of birth

25-02-1987

Sex

F

Country/Place of birth

SINGAPORE



S8704955H

Driver

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S8800767J**
 Name: **TONG WAI KEONG, NELSON (TANG WEIQIANG)**
 Birth Date: **05 Jan 1988**
 Issue Date: **14 Oct 2008**

001663518J

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8800767J

Name: **TONG WAI KEONG, NELSON (TANG WEIQIANG)**
 唐伟强
 Race: **CHINESE**
 Date of birth: **05-01-1988** Sex: **M**
 Country/Place of birth: **SINGAPORE**

S8800767J

For Insurance Reporting and Claim Purposes Only

relly

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

PASS DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg 14 Oct 2008

For Insurance Reporting and Claim Purposes Only

NP 428A

Licence No: S8800767J

5857809

NRIC No **S8800767J**

Date of issue: **23-01-2018**

Address: **APT BLK 475 PASIR RIS DRIVE 6 #06-544 SINGAPORE 510475**

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)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5123297553

Cover : drivo CLASSIC

- | | |
|---|-----------------------------------|
| 1. Index mark and Registration Number of Vehicle | : SLC6845G |
| Chassis Number | : RU11111409 |
| 2. Name of Policyholder | : GOH SOCK PEI, PEARL (WU SHUPEI) |
| 3. Effective Date of Insurance | : 14 Aug 2021 |
| 4. Expiry Date of Insurance | : 13 Aug 2022 |
| 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/her 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# | |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession. | |

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
ROADSIDE ASSISTANCE AND WELLNESS COVER	: YES
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: GOH SOCK PEI, PEARL (WU SHUPEI)
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: OCBC BANK LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : SONA INSURANCE AGENCIES PTE. LTD. (00000573866)
Date of Issue : 16 Aug 2021 09:32 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	955H
Vehicle Details	
Vehicle No.:	SLC6845G
Vehicle to be Exported:	No
Intended Deregistration Date:	19 Nov 2021
Vehicle Make:	HONDA
Vehicle Model:	VEZEL 1.5X A
Primary Colour:	White
Manufacturing Year:	2015
Engine No.:	L15B4031410
Chassis No.:	RU11111409
Maximum Power Output:	96.0 kW (128 bhp)
Open Market Value:	\$19,721.00
Original Registration Date:	23 May 2016
First Registration Date:	23 May 2016
Transfer Count:	1
Actual ARF Paid:	\$9,721.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	22 May 2026
PARF Rebate Amount:	\$6,804.00
Intended COE Rebate Details	
COE Expiry Date:	22 May 2026
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$47,889.00
COE Rebate Amount:	\$21,588.00
Total Rebate Amount:	\$28,392.00

The information contained herein is correct as at 19 Nov 2021

OK