



S THREE AUTOMOTIVE RECOVERY PTE LTD

TO :
ATTN : MOTOR CLAIM DEPT.

T/P VEH. NO. : SHF193A

ESTIMATE REPORT

1st QUOTATION

JOB NO : _____

OWNER'S PARTICULAR

NAME : BRYAN CHRISTOPHER NGIAU CHEAN
ADDRESS : 71 JALAN TUA KONG
#06-06 (S) 457265

CONTACT :

LICENSE NO. : SLX9846Z TRANS. :

CHASSIS NO : VF3MRIHNYWHL077073

MAKE / MODEL : PEUGOET 5008

ENGINE NO :

OWNER'S INSURER : SOMPO INSURANCE SINGAPORE PTE LTD

JOB-CODE : OD

S/A : S THREE

ACCIDENT DATE : 23-Dec-21

CLAIM DETAIL

MATERIALS

	QTY	QUO-PRICE	+15 %	DISC-PRICE	SUR. DISP	REV. PRICE
1 FRONT BUMPER SPONGE	1.00	120.00	10.00	132.00	Y	_____
2 FRONT BUMPER	1.00	700.00	15.00	770.00	Y	_____
3 FRONT BUMPER LOWER	1.00	180.00	15.00	198.00	Y	_____
4 FRONT BUMPER RETAINER RH	1.00	80.00	15.00	88.00	Y	_____
5 FRONT BUMPER RETAINER LH	1.00	80.00	15.00	88.00	Y	_____
6 FRONT BUMPER REINFORCMENT	1.00	380.00	15.00	418.00	Y	_____
7 FRONT BUMPER FOG LAMP LH	1.00	120.00	15.00	132.00	Y	_____
8 FRONT BUMPER FOG LAMP COVER LH	1.00	220.00	15.00	242.00	Y	_____
9 FRONT FOG LAMP COVER CHROME LH	1.00	220.00	15.00	242.00	Y	_____
10 FRONT FOG LAMP BRACKET LH	1.00	120.00	15.00	132.00	Y	_____
11 FRONT BUMPER LOWER GRILLE	1.00	280.00	15.00	308.00	Y	_____
12 FRONT BUMPER LOWER AIR GARNISH	1.00	280.00	15.00	308.00	Y	_____
13 FRONT BUMPER BRACKET RH	1.00	80.00	15.00	88.00	Y	_____
14 FRONT BUMPER BRACKET LH	1.00	80.00	15.00	88.00	Y	_____
15 RADIATOR GRILLE	1.00	400.00	15.00	440.00	Y	_____
16 FRONT GRILLE LOGO	1.00	80.00	15.00	88.00	Y	_____
17 HEADLAMP ASSY HID LH	1.00	1350.00	15.00	1485.00	Y	_____
18 HEADLAMP PANEL LH	1.00	1350.00	15.00	1485.00	Y	_____
19 HEADLAMP INNER PLASTIC RETAINER RH	1.00	180.00	15.00	198.00	Y	_____
20 FRONT FENDER LH	1.00	400.00	15.00	440.00	Y	_____
21 FRONT FENDER TOP CHROME MOULDING LH	1.00	180.00	15.00	198.00	Y	_____
22 FRONT FENDER TOP GRANISH LH	1.00	110.00	15.00	121.00	Y	_____
23 FRONT FENDER INNER SHILED LH	1.00	160.00	15.00	176.00	Y	_____
25 RADIATOR SIDE GARNISH LH	1.00	110.00	15.00	121.00	Y	_____
26 BONNET	1.00	950.00	15.00	1045.00	Y	_____
27 BONNET LOCK	1.00	150.00	15.00	165.00	Y	_____
28 BONNET INSULATOR	1.00	280.00	15.00	308.00	Y	_____
29 WASHER TANK	1.00	120.00	15.00	132.00	Y	_____

30	FRONT BRACE PANEL	1.00	100.00	15.00	110.00	Y	_____
31	FRONT PARKING SENSOR	1.00	150.00	15.00	165.00	Y	_____
32	NUMBER PLATE HOLDER	1.00	80.00	15.00	88.00	Y	_____
33	FRONT SUPPORT PANEL TOP COVER	1.00	250.00	15.00	275.00	Y	_____
34	FRONT SUPPORT PANEL	1.00	760.00	15.00	836.00	Y	_____
35	AIRCON CONDENSOR	1.00	1100.00	15.00	1210.00	Y	_____
36	AIRCON PIPE - CONDENSOR TO COMPRESSOR	1.00	300.00	15.00	330.00	Y	_____
37	RADIATOR	1.00	850.00	15.00	935.00	Y	_____
38	AIRCON PIPE - CONDENSOR TO COOLING COIL	1.00	285.00	15.00	313.50	Y	_____
39	INNER COOLER	1.00	480.00	15.00	528.00	Y	_____
40	INNER COOLER INTAKE HOSE	1.00	280.00	15.00	308.00	Y	_____
41	INNER COOLER EXHAUST HOSE	1.00	280.00	15.00	308.00	Y	_____
42	INNER COOLER AIR VENT	1.00	180.00	15.00	198.00	Y	_____
43	INNER COOLER BRACKET 1SET	1.00	150.00	15.00	165.00	Y	_____
44	RADIATOR SPARE TANK	1.00	150.00	15.00	165.00	Y	_____
45	RADIATOR SPARE TANK HOSE	1.00	80.00	15.00	88.00	Y	_____
46	FRONT WHEEL ARCH GRANTISH LH	1.00	220.00	15.00	242.00	Y	_____
TOTAL (PARTS) :			14455.00		15900.50		

SPECIAL NETT ITEM

1	FRONT BUMPER CLIPS 1SET	1.00	50.00	0.00	50.00	Y	_____
2	BONNET INSULATOR CLIPS	1.00	80.00	0.00	80.00	Y	_____
3	FRONT FENDER INNER SHIELD CLIPS 1SET	1.00	50.00	0.00	50.00	Y	_____
4	FRONT NUMBER PLATE	1.00	50.00	0.00	50.00	Y	_____
5	RADIATOR COOLANT	1.00	80.00	0.00	80.00	Y	_____
6	FRONT TYRE LH	1.00	480.00	0.00	480.00	Y	_____
TOTAL (PARTS) :			790.00		790.00		

LABOUR

1	STRAIGHTEN & PANEL BEAT ACCIDENT AREA	1.00	1500.00	0.00	1500.00	Y	_____
2	SPRAY PAINTING ON AFFECTED AREA	1.00	1400.00	0.00	1400.00	Y	_____
3	CHECK WIRING SYSTEM & RESET HEADLAMP SYS	1.00	120.00	0.00	120.00	Y	_____
4	RESPRAY TUFF KOTE ON ACCIDENT AREA	1.00	120.00	0.00	120.00	Y	_____
5	CONDUCT FULL WHEEL ALIGNMENT	1.00	120.00	0.00	120.00	Y	_____
6	R&R AIRCON CONDENSOR & TOP UP AIR CON GAS	1.00	150.00	0.00	150.00	Y	_____
8	TOWING CHARGES	1.00	150.00	0.00	150.00	Y	_____

TOTAL (LABOUR) :	3560.00	3560.00
TOTAL PARTS & LABOUR	18805.00	20250.50

EXCESS : : S\$ _____

NO. OF DAY : _____

RE-SURVEY : BEFORE / AFTER PAINTING

PART-BY-PART OR LUMP-SUM : S\$ _____

DATE OF SURVEY : ____ / ____ / ____

SURVEY BY : _____

CONTACT NO : _____

FAX NO : _____

NOTE : LUMP-SUM AMOUNT WOULD BE REVISED IF SUPPLEMENT REPAIR IS REQUIRED.

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 GlA 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	24/12/2021 14:44 (SGT)
Date of Accident	23/12/2021 14:10 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SCOTTS ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX9846Z
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	BRYAN CHRISTOPHER NGIAU CHEAN
Passport No/FIN	FXXXXX871R
Email Address	BRYAN-NGIAU@HOTMAIL.COM
Mobile Phone No	(Phone) +65-97891967
Alternative Phone No	+65-97891967

VEHICLE PARTICULARS

Manufacturer	Peugeot
Model	5008
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1200

INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	D21MTPV01005595
Cover Note Number	-

DRIVER

Name of Driver	BRYAN CHRISTOPHER NGIAU CHEAN
Passport No/FIN	FXXXXX871R

Date Of Birth	17/05/1976
Occupation	Indoor
Date Of Driving Pass	28/07/1995
Driving experience	26 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97891967
Alt. Phone Number	+65-97891967
Email Address	BRYAN-NGIAU@HOTMAIL.COM
Address	71, JALAN TUA KONG #06-06
Address complement	-
Postcode	457265
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	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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	PASSENGER
Gender	Female

PASSENGER 2

Name	PASSENGER
Gender	Female

PASSENGER 3

Name	PASSENGER
Gender	Male

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 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	SHF193A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	GOH SHEW PENG
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	NGIAN CHEAN SHOONG BRYAN
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	-
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

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.

6. 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, receipts or notices to me which would involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/postal 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 the purpose(s) of (i) to (v) above.

(c) My Personal Information may/also 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.

CITY AUTO PTE LTD
 111, Sin Ming Road
 #01-01/02 Sin Ming Ind Bldg
 Singapore 575643
 Tel: 6453 1235 Fax: 6453 7944
 Claims Section

Policyholder's Signature / Date & Time

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

Witnessed by Recording Centre
 Date/Time

Sketch Plan

Describe Circumstances of the Accident

On 12/12/2012 at 10:00 AM, I was driving my car (No. 123456) on the road. I was driving in the right lane and was approaching a red traffic light. The car was moving at a speed of about 20 km/h. I saw a car (No. 789012) in the left lane, which was also approaching the red light. The car was moving at a speed of about 30 km/h. I saw the car (No. 789012) start to move forward when the light turned red. I tried to stop my car, but I was too late. My car collided with the car (No. 789012) from behind. The car (No. 789012) was damaged and stopped. My car was also damaged and stopped. I was not injured. The car (No. 789012) was driven by Mr. John Doe. I am Mr. John Doe's friend. I am reporting this accident to you.

Declaration

We declare the foregoing particulars are true in every respect.

CITY AUTO PTE LTD
318 B Sin Ming Road
Unit #01-02/03 Sin Ming Ind Est
Singapore 575643
Tel: 6453 1236 Fax: 6453 7944
(Claims Section)

Polyholder's Signature (Name & Title)

Driver's Signature (If driver is not the policyholder) (Name & Title)

Witnessed By, Reporting Party (Name)



with energy

POLICE REPORT (NP299)

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

Report No. G/20211224/7020

Date/Time Report Made 24/12/2021 12:11	Vide Report No.	Station Diary No.
Name Of Informant BRYAN CHRISTOPHER NGIAU CHEAN SHOONG	Address 71 JALAN TUA KONG #06-06 SINGAPORE 457265	
ID Type / ID No. FIN NO / F1072381R	Contact No. Home/Office:	Mobile: 97891967
Nationality MALAYSIAN	Email Address BRYAN_NGIAU@HOTMAIL.COM	
Occupation unemployed	Sex Male	Age 45
Institution/School Name	Date of Birth 17/05/1976	Race Chinese
Date/Time Of Incident 23/12/2021 14:06 - 23/12/2021 14:07	Language English	
Brief details	Location Of Incident 1 SCOTTS ROAD	

Taxi SHF193A driven by Goh Shew Peng S6920885A was stopped in traffic in the 3rd lane and very suddenly pulled out in front of my car SLX9846Z driving on the 4th lane travelling about 40kmh in a reckless act causing an accident as I was unable to stop in time. My wife Sara Ngiau sustained a neck injury for which she received 5 days MC later that evening. My children Kyle sustained a minor injury to his face, and My daughter Kara in a baby seat was ok. I sustained injury to my right arm and neck. we all received painkillers from the doctor. Goh blamed the incident on me and said he will be making a report. My dash camera unfortunately malfunctioned and I do not have any footage of the incident.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 24/12/2021 12:11
Officer In-Charge Of Case:	Classification Of Case:

This report is lodged at Siglap NPP Kiosk

to 910.
ad WH 98, 550
QCE.
bal WH 84 100%
= 14, 410



**SINGAPORE
POLICE FORCE**



G/20211224/7020

2 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20211224/7020

Subjects Involved			
Suspect			
Person Name	Goh shew peng		
ID No	S6920885A	Gender	Male
Age	50-60	Race	Chinese
Language	English	Occupation	Taxi driver
Build	Medium	Height About	165cm
Relation To Informant	taxi driver		
Victim			
Person Name	Sara Ngiau		
ID No	S8472603F	Gender	Female
Age	37	Occupation	Sales and related associate professional nec
Address	71 JALAN TUA KONG #06-06 PARK EAST SINGAPORE 457265	Mobile No	96850880
Relation To Informant	wife		
Person Name	Kyle Ngiau		
ID Type	OTHERS / SG Citizen Cert	ID No	T1104206B
Gender	Male	Age	10
Race	Chinese	Occupation	Student

Signature Of Officer Recording The Report:
Not applicable

Signature Of Informant:

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

Signature Of Interpreter:
Not applicable

Date/Time:
24/12/2021 12:11

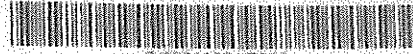
Officer In-Charge Of Case:

Classification Of Case:

This report is lodged at Siglap NPP Kiosk



SINGAPORE
POLICE FORCE



G/20211224/7020

3 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20211224/7020

Address	71 JALAN TUA KONG #06-06 PARK EAST SINGAPORE 457265	Mobile No	97891967
Relation To Informant	son		
Person Name	Kara Ngiau	ID No	T1528489C
ID Type	OTHERS / SG citizen cert	Age	6
Gender	Female	Address	71 JALAN TUA KONG #06-06 PARK EAST SINGAPORE 457265
Occupation	Student	Relation To Informant	daughter
Mobile No	97891967		
Person Name	BRYAN CHRISTOPHER NGIAU CHEAN SHOONG	ID No	F1072381R
ID Type	FIN NO	Age	45
Gender	Male	Language	English
Race	Chinese	Address	71 JALAN TUA KONG #06-06 SINGAPORE 457265
Occupation	unemployed	Is Informant A Victim?	Yes
Mobile No	97891967		
Person Name	BRYAN CHRISTOPHER NGIAU CHEAN SHOONG (Informant)		

Signature Of Officer Recording The Report.
Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

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

Date/Time:
24/12/2021 12:11

Classification Of Case:

This report is lodged at Siglap NPP Kiosk

Certificate of Insurance**ROAD TRAFFIC ACT (CHAPTER 276) (REPUBLIC OF SINGAPORE)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
ROAD TRANSPORT ACT 1987 (MALAYSIA)
ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (MALAYSIA)**

Certificate/Policy No. : D21MTPV01005595
Insured : NGIAU CHEAN SHOONG BRYAN CHRISTOPHER
Motor Vehicle (Registration No.) : SLX9846Z
Coverage : Comprehensive - ExcelDrive PRESTIGE
Policy Commencement Date : 19 APRIL 2021 00:00
Policy Expiry Date : 18 APRIL 2022 23:59
Maximum Liability (Section I) : Market value at time of loss
Excess* : \$600 - Section I
Voluntary Excess* : N.A
Windscreen Excess* : S\$100.00 for each and every applicable claim.
* Subject to GST wherever applicable

Persons or Classes of Persons entitled to drive*

1. The Insured.
2. Any other person who is driving on the Insured's order or with his permission.
3. In the event of the death of the Insured,
 - a. any member of the Insured's family, or a paid driver who has been driving the Motor Vehicle during the life of the Insured and permission to drive had not been withdrawn prior to the death of the Insured; and
 - b. any other person who has been given permission to drive the Motor Vehicle prior to the death and such permission had not been withdrawn by the Insured.

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. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Chapter 276) and its registration under the Road Traffic Act (Chapter 276) has not been cancelled at the time of the accident, loss or damage.

Limitations As To Use

Use only for social, domestic and pleasure purpose and for the Insured's business. The Policy does not cover use for hire or reward, racing, pace-making, speed testing, reliability trial, the carriage of goods other than samples in connection with any trade or business or use for any purposes in connection with the Motor Trade.

ExcelDrive Workshops and Accident Reporting

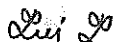
It is a condition precedent to liability that the Insured shall call at the Company's Accident Reporting Center with the Motor Vehicle within 24 hours of the accident or by the next working day thereof.

All accident repairs to the Motor Vehicle must be carried out at ExcelDrive Workshops, otherwise the claim is not payable under the Policy. For ExcelDrive Prestige Plan, accident repairs to the Motor Vehicle can be carried out at any workshop other than ExcelDrive Workshops.

For the list of Accident Reporting Centres and ExcelDrive Workshops, please visit our website at www.sompo.com.sg or call our Emergency Hotline: (65) 6226 3323.

I/We HEREBY CERTIFY that the policy to which this Certificate relates is issued in accordance with (1) the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia); and (2) the Policy terms, conditions and exceptions of the Private Car Policy ref MTP.30

Sompo Insurance Singapore Pte. Ltd.



Authorised Signatory

Date/Time of Issue : 13 APRIL 2021 18:11

IMPORTANT NOTICE

- o Keep the Certificate in your Motor Vehicle;
- o Under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189), it shall be unlawful for any person to use or cause to permit any other person to use a Motor Vehicle without a valid policy of insurance under the Act;
- o On the sale of the Motor Vehicle or if for any reason the insurance is terminated during its currency, the Insured must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a statutory declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189);
- o This Policy will cease to be valid once the Motor Vehicle has been sold to another person. The Policy is not transferable to the new owner of the Motor Vehicle.

Intermediary Code & Name : 11104805 & I-N-S MANAGEMENT CI Code: 22A XF0DOL64J0TTBHPA

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

NAME: NGIAU CHEAN SHOONG F1072381R

BRYAN CHRISTOPHER NGIAU
CHEAN SHOONG

Birth Date: 17 May 1976
Licence Date: 28 Sep 2017
Valid Till: 27/09/2022

002728246J

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

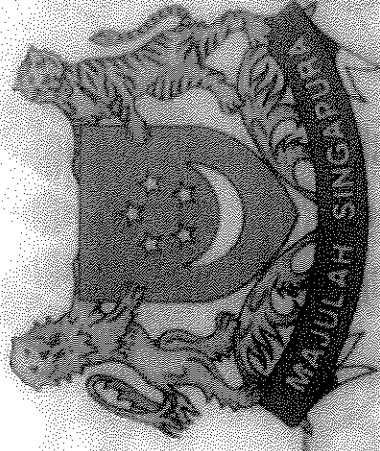
		EFFECTIVE DATE
Class 2B	Motorcycles \leq 200 cc	03 Jun 1999
Class 2A	Motorcycles between 201 cc and 400 cc	03 Jun 1999
Class 3	Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg	28 Jul 1995

NP 428A



REPUBLIC OF SINGAPORE

FIN F1072381R



Name

BRYAN CHRISTOPHER NGIAU
CHEAN SHOOONG

Date of Birth

17-05-1976

Sex

M

Nationality

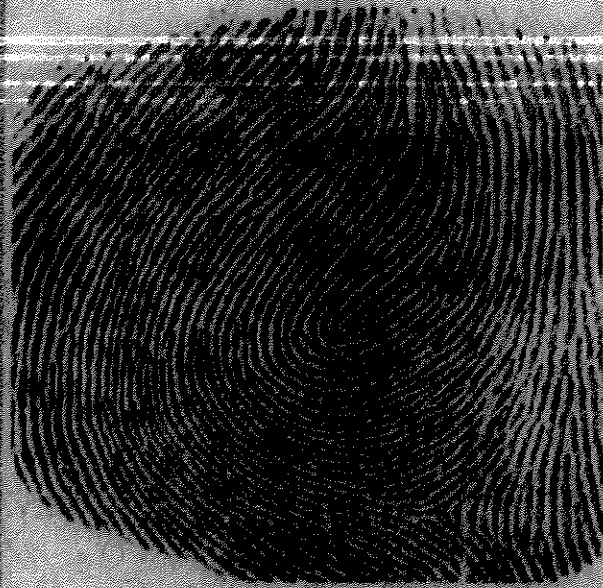
MALAYSIAN



FA2384536

VISIT PASS

Immigration Regulations

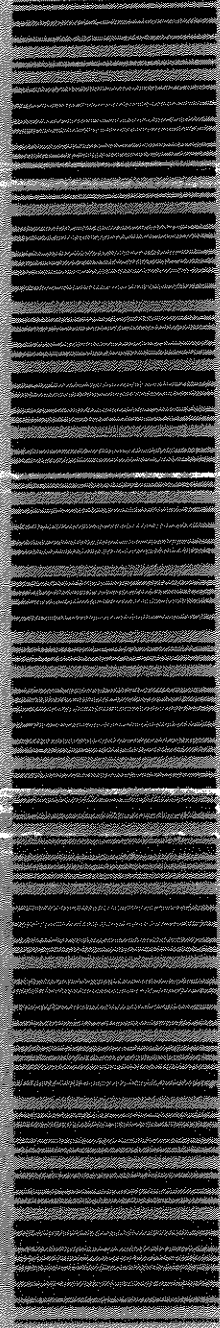


FIN F1072381R

PLUS

Date of Issue
04-12-2020

Date of Expiry
04-12-2023



YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.