

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

① TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspect Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No. _____

Claims No. _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

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

☒	☒
N/S	O/S
☐	☐

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent? : Yes or No

GIA / PR Seen: _____ Consistent? : Yes or No

Est. Repairs: 11 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____

Vehicle: IN / OUT

Veh No: SLM 55055 Yr Regn: 29/3/17Type: ☒ M. Car / ☐ M. Cycle / ☐ Bus / ☐ Van / ☐ Lorry / ☐ Taxi / ☐ Prime Mover /

Truck / Trailer or

Make: Audi S3 c.c. 1984Colour: Blue A/C: ☐ Insured / ☐ Std / ☐ Nil / ☐ NASp. Reading: 61489 T/Radio: ☐ Insured / ☐ Std / ☐ Nil / ☐ NA

Eng/No: _____

C/No: WAU 2228V3HA103907Gen. Cond: ☒ Good / ☐ Fair / ☐ Poor / ☐ BurntSteering: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt orBrake: ☒ In order / ☐ Jammed / ☐ Leaked / ☐ Burnt orModi: ☐ Nil / ☐ S/Rim / ☐ STD A/Rim, orTyre Size: F: 225/40ZR18R: 11BS / DUN / EXNOVA / GY / FS / LIZA / ☒ MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or _____

Front _____ Rear _____

R/Bal. 5 mm R/Bal. 5 mmL/Bal. 5 mm L/Bal. 5 mmD.O.A. 8/10/22 D.O.I. 12/10/22Survey held at PremiumDes. 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

MV-148X

22/12/22@11.39am confirmed with Mr Boo final fig \$23522.72, 11 days. (Red \$25293.28, 52%)

Date/Time, File Pass to?

☐ : Preli. ReportDays Of Repair: 11

1) _____

☐ : Final ReportResurvey No. of Trip: 2

Date/Time, File Return to?

2) _____

Add Fee: ☐ : Site Insp (\$ _____)☐ : Interview (\$ _____)☐ : Tech. Invs (\$ _____)☐ : Weekend (\$ _____)

Survey Fee:

Transportation:

\$ + RS. \$1

Phone

Others

TOTAL

Report Format: MER-ODComp. Cost: I.B.F. (\$) 23522.72

55 UBI ROAD 1, SINGAPORE 408699

TEL : 6366 2323 FAX : 6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATE : ACCIDENT REPAIRS
WORKSHOP : UBI ROAD 1
CONTACT NO : 6366 2323
FAX NO : 6841 1183
REFERENCE : PA/OD/0873/2022/EQ
DATE : 11-Oct-22
WIP : 45407

VEHICLE IN WORKSHOP. KINDLY ARRANGE FOR SURVEY ON 12/10/2022

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY

#07-16 AIG BUILDING

SINGAPORE 079120

Attn: Motor Claims Dept

Tel: 6880 4602 - Fax: 6880 4838

OWNER'S NAME : MR YEE CHI YWEE
ADDRESS : 10B HOUGANG STREET 11
#10-39, THE MINTON
SINGAPORE 534078
TELEPHONE : HP +65 81836449
TYPE OF CLAIM : OWN DAMAGE CLAIM
POLICY NO : 2100504302-05
VEHICLE NO : **SLM 5505 S**
MODEL CODE : AUDI S3 SB 2.0 TFSI QU
MODEL YEAR : 29/3/2017
ENGINE NO : DJH 008972
CHASSIS NO : WAUZZZ8V3HA103207
MILEAGE : 64,489
DATE IN : 10-Oct-22
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 8-Oct-22
PLACE OF ACCIDENT : TPE, JUST BEFORE KPE EXIT 7A

PREMIUM AUTOMOBILES



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ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SLM 5505 S

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE AND TRANSFER FRONT WIRE HARNESS FOR HEADLIGHTS, HORNS, FOG LAMPS, OUTSIDE TEMPERATURE SENSOR AND HEADLIGHT WASHER ASSY.	S/N \$ 360.00 /	
2	TO REMOVE AND TRANSFER BOTH FRONT HEADLIGHTS CONTROL UNIT AND POWER MODULES. 250x1	S/N \$ 700.00 250	
3	TO REMOVE AND TRANSFER AIRCON CONDENSER, RADIATOR, CHARGED AIR COOLER, ELECTRICAL FANS AND CONTROL UNIT. TO CARRY OUT VACUUM/REGAS AND TO PRESSURISE COOLING SYSTEM.	S/N \$ 1,200.00 /	
4	TO RENEW FRONT WINDSCREEN.	S/N \$ 480.00 /	
5	TO INSTALL SOLAR FILM FOR FRONT WINDSCREEN.	S/N \$ 400.00 /	
TOTAL LABOUR CHARGES		: \$ 3,140.00	

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ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SLM 5505 S

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
6	TO CARRY OUT WATER SEEPAGE TEST.	S/N \$ 200.00	✓ 150
7	TO REMOVE AND REINSTALL BOTH WING MIRROR ASSY. RENEW WINDOW SLOT SEAL.	S/N \$ 700.00	X
8	TO DISMANTLE FRONT BUMPER, BOTH FRONT FENDERS AND BONNET. RENEW FRONT LOCK CARRIER AND ALIGN TO POSITION. RENEW FRONT BUMPER, BOTH FRONT FENDERS AND BONNET. RE-ORGANISE FRONT CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$ 5,600.00	2500
9	TO RESPRAY FRONT BUMPER, BOTH FRONT FENDERS, BONNET, HINGES, AND BOTH FRONT DOORS.	\$ 5,200.00	2200
10	TO CARRY OUT DIAGNOSTIC CHECK.	S/N \$ 192.00	✓
TOTAL LABOUR CHARGES		: \$ 15,032.00	

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SLM 5505 S

S/N	PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES		REMARKS
			S/NETT		
1	FRONT BUMPER ✓ <i>OK</i>	1	\$	2,664.00	
2	FRONT BUMPER FIXING PARTS <i>X</i>	1	\$	195.00	
3	FRONT BUMPER GUIDE SECTION - LH / RH <i>?</i>	2	\$	86.00	
4	FRONT BUMPER GRILLE - CENTER <i>?</i>	1	\$	179.00	
5	FRONT BUMPER CLOSING ELEMENT - LOWER CENTRE <i>?</i>	1	\$	332.00	
6	FRONT BUMPER CLOSING ELEMENT - LH / RH <i>?</i>	2	\$	636.00	
7	FRONT BUMPER TRIM - LH / RH <i>?</i>	2	\$	388.00	
8	RADIATOR GRILLE ✓ <i>BR</i>	1	\$	1,578.00	
9	"S3" INSCRIPTION ✓ <i>PR</i>	1	\$	133.00	
10	RADIATOR GRILLE CLOSING ELEMENT <i>?</i>	1	\$	210.00	
11	FRONT BUMPER REINFORCEMENT BEAM COVER <i>?</i>	2	\$	272.00	
12	FRONT BUMPER FOAM FILLER PIECE <i>?</i>	1	\$	211.00	
13	FRONT BUMPER REINFORCEMENT BEAM <i>?</i>	1	\$	847.00	
14	AIR CONDITIONER STICKER ✓ <i>ne</i>	1	\$	9.00	
15	CAUTION SIGN STICKER ✓ <i>ne</i>	1	\$	16.00	
16	FRONT FENDER - LH / RH <i>X R</i>	2	\$	1,908.00	
17	FRONT FENDER RIVET <i>?</i>	16	\$	61.00	
18	FRONT FENDER BRACKET - LH / RH <i>?</i>	2	\$	112.00	
19	FRONT FENDER CLOSING ELEMENT - LH / RH <i>?</i>	2	\$	136.00	
20	BONNET ✓ <i>OK</i>	1	\$	3,370.00	
SUB TOTAL SPARE PARTS		:	\$	<u>13,343.00</u>	

ALL CHARGES ARE NOT INCLUSIVE OF GST
 LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APPROVED
 SPARE PARTS ARE SPECIAL NETT.

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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SLM 5505 S

			DAMAGED PARTS & PRICES	
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
21	BONNET ATTACHMENT PARTS X	1	\$	172.00
22	BONNET HINGE - LH / RH ?	2	\$	136.00
23	COWL SIDE PANEL SEAL - LH / RH V	2	\$	92.00
24	BONNET EDGE PROTECTION - MC	1	\$	31.00
25	BONNET CATCH HOOK ?	1	\$	100.00
26	BONNET STRIKER - LH / RH - BT	1 2	\$	246.00
27	BONNET CATCH HOOK ?	1	\$	71.00
28	BONNET LOCK - LH / RH - BT	1 2	\$	455.00
29	BONNET BOWDEN CABLE - CENTER ?	1	\$	64.00
30	HEADLIGHT - LH / RH - BR	1 2	\$	11,758.00
31	LOCK CARRIER - BR	1	\$	806.00
32	RADIATOR AIR GUIDE - LH / RH ?	2	\$	56.00
33	A/C CONDENSER ?	1	\$	605.00
34	FRONT PARKING AID SEAL RING ?	2	\$	25.00
35	CHARGE AIR COOLER ?	1	\$	1,338.00
36	RADIATOR ?	1	\$	1,093.00
37	RADIATOR RUBBER BUSH ?	2	\$	90.00
38	FRONT WINDSCREEN - BR	1	\$	1,206.00
39	FRONT RAIN SENSOR GEL FOIL - MC	1	\$	131.00
40	FRONT WING MIRROR RETAINER - MC	1	\$	23.00
SUB TOTAL SPARE PARTS			\$	18,498.00

ALL CHARGES ARE NOT INCLUSIVE OF GST
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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SLM 5505 S

S/N	PARTS DESCRIPTION	QTY	DAMAGED PARTS & PRICES		REMARKS
			S/NETT		
41	MIRROR PRIMER / M	1	\$	22.00	
42	PLENUM CHAMBER COVER / CV	1	\$	199.00	
43	FRONT WATER DEFLECTOR STRIP - LH / RH X	2	\$	150.00	
44	FRONT WINDOW SLOT SEAL TRIM STRIP - LH / RH X	2	\$	604.00	
45	FRONT NO PLATE / BT	S/N	\$	60.00	
46	SUNDRIES ?		\$	600.00	
TOTAL SPARE PARTS		:	\$	33,476.00	
TOTAL LABOUR CHARGES		:	\$	15,032.00	
GRAND TOTAL		:	\$	48,508.00	

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PREMIUM AUTOMOBILES



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TEL: 6366 2323 FAX: 6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

NAME :
SURVEYED DATE :
AUTHORISED DATE :
EXCESS COST :
LIABILITY :
REMARKS :

Store (LKK)

12/10/22, 17:00

OD-LA ML

EXCESS - ?

PIP

12/10/22, 11:45

PLEASE NOTE :

THIS ESTIMATE IS BASED ON VISUAL INSPECTION OF THE AFFECTED VEHICLE. SHOULD WE REQUIRE FURTHER LABOUR CHARGES AND SPARE PARTS IN THE PROGRESS OF REPAIR, WE SHALL INFORM YOU ACCORDINGLY. FOR INSPECTION OF VEHICLE, PLEASE REFER TO MS. NORAH KHAI AT TEL: 6768 9828 / 6768 9911 FOR APPOINTMENT.

YOURS FAITHFULLY,
PREMIUM AUTOMOBILES PTE LTD

- LKK Auto Consultants hence notify the Repairer of the following:
- To resurvey before/after spray painting
 - 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

Acknowledged by Repairer

Signature:

Date:

JOHNNY BOO
BODY REPAIR MANAGER

ALLAN WU
CLAIMS CONSULTANT

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 Actual 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	10/10/2022 15:19 (SGT)
Reported by	Both
Date of Accident	08/10/2022 12:30 (SGT)
Exact Location of Accident	TPE, Singapore
Additional Location Information	TPE, JUST BEFORE KPE EXIT 7A
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM5505S
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	YEE CHI YWEE
NRIC No	SXXXX751I
Email Address	ANDYCYEE@YAHOO.COM
Mobile Phone No	(Phone) +65-81836449
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	S3
Variant	SPORTBACK 2.0 TFSI
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	1984

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2100504302-05

DRIVER

Name of Driver	YEE CHI YWEE
NRIC No	SXXXX751I
Date Of Birth	19/04/1973
Occupation	Indoor

Date Of Driving Pass
Driving experience
Gender
Mobile Number
Alt. Phone Number
Email Address
Address
Address complement
Postcode

Is the driver the policyholder?
If No, Relationship of the Driver with the Insured
Does Driver Own Other Vehicles?
Vehicle Registration Number of Other Vehicle Owned by Driver

Insurance Company of Other Vehicle Owned by Driver

03/01/1997
25 YEARS AND 9 MONTHS
Male
(Phone) +65-81836449
-
ANDYCYEE@YAHOO.COM
10B HOUGANG STREET 11
#10-39, THE MINTON
534078
Yes
-
No
-
-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Collision - Head to Rear
Clear
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? No
Was any injured conveyed to hospital by ambulance? -
Was any other vehicle or property damaged? Yes
Number of Passengers (Including Driver) 5
Has the driver been approached by unknown person(s) soliciting offering accident claims assistance? No
Translator's name -
Translator's ID -
Translator's phone number -
Translator's email -
Original language used in the statement -

WITNESSES

Name SHARON LEE
Gender Female

WITNESS 2

Name CHENG BOH MOI
Gender Female

WITNESS 3

Name SHANNON YEE
Gender Female

WITNESS 4

Name CHARLES YEE
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

VEHICLE ALONG
EXIT 7A FOR K
RMALLY. THERE W
HE FRONT BRAKE A FEW
HE ABRUPT STOP OF THE C

ATTACHMENT(S)

Are accident ph
Was there ar

TRAVELLING ALONG TPE TOWARDS TAMPINES, JUST AFTER PUNGGOL FLYOVER. FILTER TO THE LEFTMOST LANE TO TAKE EXIT 7A FOR KPE. ENTER THE FILTER LANE FOR KPE EXIT. FILTER LANE HAD TRAFFIC BUT WAS MOVING NORMALLY. THERE WERE ABOUT 3 CARS IN LENGTH OF SPACE BETWEEN ME AND THE CAR IN FRONT. NOTICED THAT THE FRONT BRAKE A FEW TIMES (2 TO 3) SOFTLY THEN SUDDENLY A HARD BRAKE. JAMMED MY BRAKES AS I NOTICED THE ABRUPT STOP OF THE CAR IN FRONT. STILL HIT THE BACK OF THE CAR IN FRONT.

ATTACHMENT(S)

Are accident photos available for attachment?
Was there any video captured by Car Camera?

Yes
No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SME982K
Vehicle Manufacturer	Toyota
Vehicle Model	Harrier
Vehicle Variant	-
Vehicle Colour	Black
Vehicle Category	Private car
Name of Driver	BHATNAGAR SHUCHI
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

1. Take care to correctly the details of the accident to speed up the claims process.
2. The Report 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 lead to insurance companies to **repudiate policy liability**.
4. The insurer's acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance company.
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 (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the submission 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)**
 - a. I acknowledge, agree and consent that:
 - i. my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose my personal data/personal information set out in this [form] and any other personal information provided by me or my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) and vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant agency/authority (such as the police), for the purpose(s) of:
 - handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the accident and/or my claims;
 - handling and/or dealing with my instructions or responding to any enquiries by me;
 - settling my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve obtaining personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail etc);
 - compliance with applicable law in administering, processing, handling and/or dealing with my claims.
 - ii. "Purposes":
 - Insurers who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, store and/or process my Personal Information for one or more of the above Purposes; and
 - Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including 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

→ SAE 982K

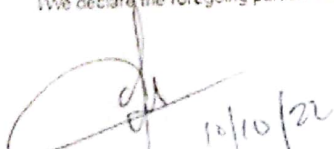
→ SLM550SS

Describe Circumstances of the Accident

- TRAVELLING ALONG THE TOWARDS TAMIPING, JUST AFTER CHANGING LANE
- FILTER TO LEFT ^{most} LANE ^{lane}
- FILTER TO LEFT MUST HAVE TO TAKE EXIT TO THE KPE
- ENTER FILTER LANE FOR KPE EXIT
- FILTER LANE HAD TRAFFIC BUT WAS MOVING NORMALLY
- WHEN THERE WAS ABOUT 2-3 CAR LENGTH SPACE BETWEEN ME AND THE CAR IN FRONT
- NOTICED THAT THE FRONT BRAKE A FEW TIMES (1 TO 3) THEN SUDDENLY A HARD BRAKE
- JAMMED MY BRAKES AS I NOTICED THE APPROX OF THE CAR IN FRONT
- VEHICLE WAS STILL HIT THE BACK OF THE CAR IN FRONT

Declaration

We declare the foregoing particulars are true in every respect


Policyholder's Signature / Date & Time
11/30/22

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



Witnessed by Reporting Officer
Personnel Tony Fong