

LEE BROTHERS AUTOMOTIVE PTE.LTD

NO. 1 KAKI BUKIT AVE 6 #02-47 AUTOBAY

SINGAPORE 417883

TEL: 6509 5521 FAX: 6509 5523 GST Reg. No. : 201101880C

ATTN:THE MOTOR CLAIMS DEPARTMENT
INDIA INTERNATIONAL INSURANCE PTE LTD

64 CECIL STREET#05-00

IOB BUILDING

SINGAPORE 049711

Yrs Ref. : SMV5349S

Our Ref. : LB0824-3701

Date: : 09.09.2024

Accident involving SMM2193R and SMV5349S on 18.08.2024 at 1000HRS along UPPER SERANGOON ROAD SLIP ROAD TO SERANGOON CENTAL

We refer to the above matter. We are instructed that above accident was caused solely and completely by the negligence of your insured, as a result of which, our client have suffered loss and expenses.

We are instructed by our client to make a property damages claims as:-

		<u>Amount</u>
1. Cost of repair (Inc GST)		S\$ 11,772.00
2. Loss of Rental	(8 days x \$150)	S\$ 1,200.00
3. Towing		S\$ -
5. LTA Search fee		S\$ 27.25
4. E-File Serach fee		S\$ 31.00
Claim Amount		<u><u>S\$ 13,030.25</u></u>

Enclosed are the following documents for your perusal.

<input checked="" type="checkbox"/> Original Final repair Bill	<input checked="" type="checkbox"/> Letter of Authority
<input type="checkbox"/> Original Survey Report & Invoice	<input checked="" type="checkbox"/> Rental Agreement /Receipt
<input type="checkbox"/> Original Photographs of [SMM2193R]	<input checked="" type="checkbox"/> E-File Search Fee/LTA Receipt
<input checked="" type="checkbox"/> GIAS Reports of [SMM2193R]	<input checked="" type="checkbox"/> Vehicle Registration Card
<input checked="" type="checkbox"/> Certificate of Insurance	<input type="checkbox"/> Driver's Driving License / Identity Card
<input checked="" type="checkbox"/> Report Of A Traffic Accident	

Your prompt action will be greatly appreciated.

Kindly acknowledge receipt of the above said documents and your favourable reply is greatly appreciated.

Yours faithfully,
Lee Brothers Automotive Pte.Ltd



sales@leebrothers.com.sg

LEE BROTHERS AUTOMOTIVE PTE LTD

1 Kaki Bukit Avenue 6, #02-47 Autobay, Singapore 417883

Tel : (65) 6509 5521 Fax : (65) 6509 5523

Email : sales@leebrothers.com.sg

Co. Reg. : 201101880C

GST Reg. No. : 201101880C

TAX INVOICE

10353

Messrs : **INDIA INTERNATIONAL INSURANCE PTE LTD**
64 CECIL STREET
#05-00 IOB BUILDING
SINGAPORE 049711

Claim No. : LB0824-3701

Acc. Date : 18.08.2024

Veh. No./Model SMM2193R HONDA SHUTTLE

Date : 09.09.2024

QTY	DESCRIPTIONS	AMOUNT
	Repair Cost : Inclusive of supply parts, panel beating, spray painting and labour.	\$ 10,800.00
	Sub-total	\$ 10,800.00
	Add GST 9%	\$ 972.00
	Total Amount	\$ 11,772.00

E. & O.E.

* Please make all payments to " Lee Brothers Automotive Pte Ltd "

* All service and repairing are in good order & conditions.



Lee Brothers Automotive Pte Ltd

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 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 First Submission	19/08/2024 13:19 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	18/08/2024 10:00 (SGT)
Exact Location of Accident	Upper Serangoon Rd, Singapore
Additional Location Information	SLIP RD TO SERANGOON CENTRAL
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMM2193R
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	SYED AHMAD BIN SYED MOHAMAD ALKAFF
NRIC No	S1436481A
Email Address	ALKAFFEIN@GMAIL.COM
Mobile Phone No	(Phone) +65-90625621
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Shuttle
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	1500
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5130577128-01

DRIVER

Name of Driver	SYED AHMAD BIN SYED MOHAMAD ALKAFF
NRIC No	S1436481A
Date Of Birth	04/10/1960
Occupation	Outdoor
Driving Pass Date	25/04/1985
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	39 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90625621
Alt. Phone Number	-
Email Address	ALKAFFEIN@GMAIL.COM
Address	BLK 142 BEDOK RESERVOIR ROAD #02-1545
Address complement	-
Postcode	470142
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	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)	3
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	-

PASSENGER 1

Name	UNKNOWN
Gender	Male

PASSENGER 2

Name	UNKNOWN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20240819/7032.

ATTACHMENT(S)

Are accident photos available for attachment? Yes
Was there any video captured by Car Camera? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMV5349S
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
Name of Driver ROHAIZAT BIN ANWA
Contact Number -
Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident VEHICLE B
No. Of Passenger (Including Driver) -

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLP5597K
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 VEHICLE C
No. Of Passenger (Including Driver) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person SYED AHMAD BIN SYED MOHAMAD ALKAFF
Gender Male
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? SMM2193R
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 Actual 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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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:

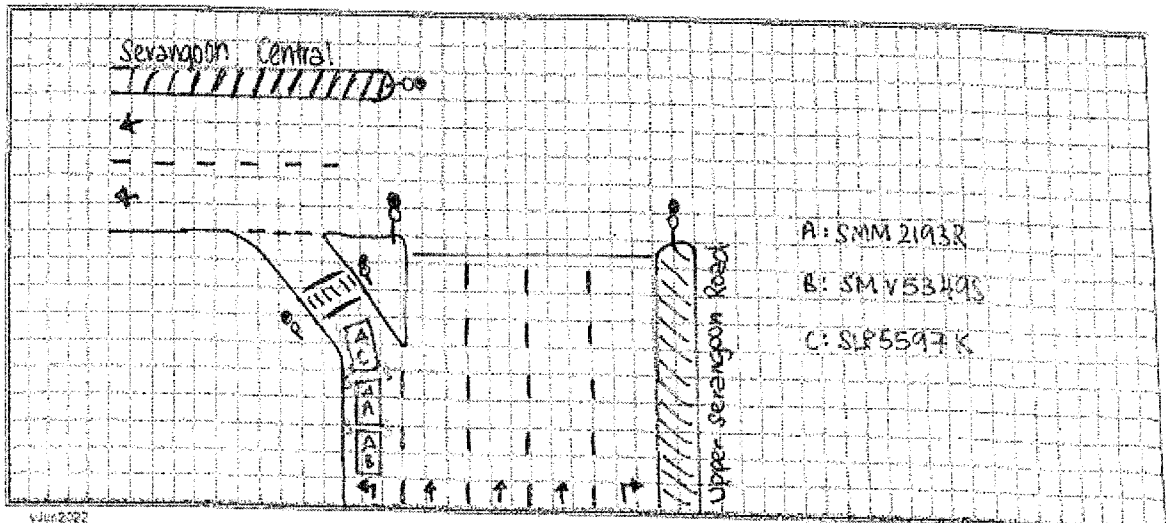
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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

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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan



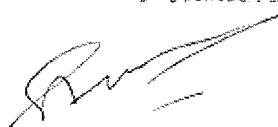
vJun2022

Describe Circumstance of the Accident

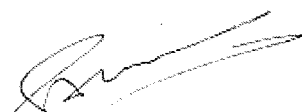
AS PER POLICE REPORT

Declaration

We declare the foregoing particulars are true in every respect



Policyholder's Signature / Date & Time



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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

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: 5130577128-01

Cover : drivo CLASSIC

- | | |
|--|---|
| 1. Index mark and Registration Number of Vehicle | : SMM2193R |
| Chassis Number | : GK82002176 |
| 2. Name of Policyholder | : SYED AHMAD BIN SYED MOHAMAD ALKAFF |
| 3. Effective Date of Insurance | : 21 Dec 2023 |
| 4. Expiry Date of Insurance | : 20 Dec 2024 |
| 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 or Hirer's business. | |

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
 - (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
 - (c) 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\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
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	: SYED AHMAD BIN SYED MOHAMAD ALKAFF
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: INDEX CREDIT PTE 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 : INDEX AGENCY PTE. LTD. (00000572017)
 Date of Issue : 23 Nov 2023 16:58 hrs
 Reprint : 23 Nov 2023 16:59 hrs

For INCOME INSURANCE LIMITED



Chief Executive



SINGAPORE POLICE FORCE



T/20240819/7032

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

1 of 3

Report No. T/20240819/7032

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/08/2024 11:20		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: SYED AHMAD BIN SYED MOHAMAD ALKAFF			Address: 142 BEDOK RESERVOIR ROAD #02-1545 SINGAPORE 470142		
ID Type / ID No.: NRIC NO / S1436481A			Contact No.: Home/Office: Mobile: 90625621		
Nationality: SINGAPORE CITIZEN			Email: ALKAFFEIN@GMAIL.COM		
Sex: Male	Age: 63	Date of Birth: 04/10/1960	Type of Informant: Driver		
Race: Arab			Language: English		
Occupation: Self Employed			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/08/2024 10:00	Type of Location: X-Junction
Location: UPPER SERANGOON ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLP5597K	Motor car					0
SMM2193R	Motor car	HONDA	SHUTTLE 1.5G CVT	White		0
SMV5349S	Motor car					0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date



SINGAPORE POLICE FORCE



T/20240819/7032

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

2 of 3

Report No. T/20240819/7032

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SMM2193R	NTUC Income Insurance Co-Operative Limited	5130577128-01	21/12/2023	20/12/2024

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	SYED AHMAD BIN SYED MOHAMAD ALKAFF		ID No. S1436481A
Related Vehicle	SMM2193R (Motor car)		Contact No. 90625621
Hospital/Clinic	KIRIN CLINIC & SURGERY		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave (MC)		03	Degree of Injury Slight

Brief Details.

I was travelling along Upper Serangoon Road Slip Road towards Serangoon Central on 18/08/2024 at about 10.00am with my car bearing car plate number SMM2193R. I was travelling straight at the slip road turning left when the vehicle in front slow down and stopped due to traffic light red, I follow suit and stopped. Suddenly I felt a huge impact from the rear and the impact caused my vehicle to be pushed forward and collided onto the vehicle bearing car plate number SLP5597K in front. Vehicle Bearing Car plate number SMV5349S collided onto the rear of vehicle. We alighted, exchange particulars and left the scene.

After the accident I felt pain on my Neck, went home to rest and still felt pain on 19/08/2024. Therefore I proceeded to consult a Doctor and was given 3 days MC.



**SINGAPORE
POLICE FORCE**



T/20240819/7032

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

3 of 3

Report No. T/20240819/7032

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
LEE GUANG HUI
Contact No.: 65476414

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

Date/Time:
19/08/2024 11:20

Classification Of Case:

Authorisation Third Party Claim Demand

Date:

To: Indis International Insurance Pte Ltd

RE: ACCIDENT INVOLVING VEHICLE No.: SMM2193R And SMV53H9S

AT / ALONG Upper Serangoon Road slip Road to Serangoon Central

ON 18.08.2014

I/We, Syed Ahmad Bin Syed Mohamed Alkaff of (NRIC No. / ROC No.)

SH36481A of BK 142, Bedok Reservoir Road #02-154S
Singapore (470142)

owner of vehicle no. SMM2193R in consideration of M/S

Lee Brothers Automotive Pte Ltd repairing my/our vehicle SMM2193R at
my/our instruction and hereby authorise M/S Lee Brothers Automotive Pte Ltd to
demand claim settle receive 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 less 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 further agree and undertake to indemnify them against the above mentioned claim costs which
may arisen therewith.

Signature of Owner: 

Date:

CARZ RENTAL PTE. LTD.

1 Kaki Bukit Avenue 6, #02-47 Autobay,
Singapore 417883
Tel: (65) 6509 5521 Fax: (65) 6509 5523

SMM2193R
Lee Batters

VEHICLE RENTAL AGREEMENT

ROC NO: 201312119K

RA NO: 4436

Hirer Particulars -		Veh. No. <u>SLP6069L</u>		Replace veh. No.	
Name	<u>Syed Ahmad Bin Syed Mohamed Alkaff</u>	Make / Model <u>Toyota Siata</u>		Auto/Manual	
Address	<u>Bilik 142, Bedok Reservoir Road</u> <u>#02-1545, S' (H70/H2)</u>	Date/Time Out	<u>18/8/14</u> <u>(14 hours)</u>	KM Out	
NRIC/Passport	<u>S1426481A</u>	Date/Time In	<u>20/8/14</u> <u>(12 hours)</u>	KM In	
Tel (O)		Estimated Date/Time Return			
		Rental charges -		S\$	S\$
Authorised Driver's Particulars -		Hours	@	Per Hour	
Name	<u>Syed Ahmad Bin Syed Mohamed Alkaff 8</u>	Days	@	Per day	<u>\$150</u>
Address	<u>Bilik 142, Bedok Reservoir Road</u> <u>#02-1545, S' (H70/H2)</u>	Weeks	@	Per Week	
NRIC/Passport	<u>S1426481A</u>	Months	@	Per Month	
Date of Birth	<u>04-10-1960</u>	Sub-Total			
D/Licence No.	<u>S1436481A</u>	Less Discount			
Expiry Date	<u>25-04-1983</u>	Sub-Total			
Country of Issue	<u>Pass</u>	Optional Charges -			
(A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES		Delivery	@	Per Trip	
		Collection	@	Per Trip	
<div style="display: flex; justify-content: space-around;"> <div> <p>FRONT</p> </div> <div> <p>LEFT</p> </div> <div> <p>RIGHT</p> </div> </div> <div style="display: flex; justify-content: space-around;"> <div> <p>REAR</p> </div> </div>		Others			
		Sub-Total			
		Add 7% GST			
		(A) Estimated Total Rental			
		Extension -			
		Extension Rental	X		
		Surcharge (Malaysia)	X		
		P.A.I.	X		
			X		
		Others -			
		Misc :			
		Cash/Nets/Cheque/VISA/MC Card No:			
		Sub-Total		<u>\$1200/-</u>	
		Add 7% GST			
		(B) Extension/others Total			
		(A) + (B) Grand Total Rental Charges			
		Less Prepayment			
		Balance Due			
		Deposit	Deposit Refunded		
		Amount			
		Remarks:		Received by	
IMPORTANT NOTE: 1. Only persons aged 24 and above or below 65 with 2 years or more driving experience, authorized, licensed and signing this agreement may drive the vehicle. 2. In case of accident, the Hirer shall report to rental office immediately. If there is any bodily injury, a police report must be made within 24 hours. 3. Vehicle is strictly for SINGAPORE USE ONLY, and may not be driven out of Singapore without prior consent of Carz Rental Pte. Ltd. 4. Unauthorised drivers, drivers who did not fulfill the above requirement are liable for the full cost & other losses suffered by Carz Rental Pte. Ltd. should the vehicle is damaged or stolen.		The hirer hereby read and understood all terms and conditions stated on this page and overleaf : <div style="display: flex; justify-content: space-between;"> <div> Hirer Signature/Co's Stamp/Date </div> <div> for Carz Rental Pte. Ltd. Authorised Signature/Date </div> </div>			



Land Transport Authority
10 Sin Ming Drive
Singapore 575701
GST Registration No. : M4-0006529-2

Print Date/Time : 19 Aug 2024 / 10:36:54
Receipt Date/Time : 19 Aug 2024 / 10:36:54

Tax Invoice/Receipt

Receipt No. : ITNET-00000-240819-001051

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SMV5349S				
As at 18 Aug 2024/10:00:00				
Insurance Co: INDIA INT'L INS PTE LTD				
1	Insurance Enquiry - SMV5349S			
	Enquiry Fee	25.00	2.25	27.25
	20240819103611762160			
Sub-Total		25.00	2.25	27.25
Total Before Rounding		25.00	2.25	27.25
Rounding Difference				0.00
Total Amount Payable				27.25
Paid By				
	20240819103627282	Direct Debit: eNETS Debit (Internet Banking)		27.25
Total				27.25
Cash Change				0.00
Tendered Amount				27.25
Excess Refundable Amount				0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.



RECORD MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE

9 Temasek Boulevard #42-01b, Singapore 038989

Email: gears-support@shift-technology.com

GST Reg No: M400017735

UEN: S66SS0020G

TAX INVOICE

LEE BROTHERS AUTOMOTIVE PTE
LTD - SYED AHMAD BIN SYED
MOHAMAD ALKAFF

Invoice Number
GR-2024-005678

Invoice Issue Date
23 Aug 2024

Invoice Due Date
30 Aug 2024

Total Amount (S\$) 28.44
Total GST 9.00% (S\$) 2.56
Total Amount Incl. of GST (S\$) 31.00

Bill Type	Reference	Amount (S\$)	GST 9.00% (S\$)	Amount Incl. of GST (S\$)
Sale of Accident Report - Publ	23/08/2024,18/08/2024,SMM2193R,SMV5349S	28.44	2.56	31.00
Total Amount (S\$)				28.44
Total GST 9.00% (S\$)				2.56
Total Amount Incl. of GST (S\$)				31.00

*This is a computer generated document.
No signature is required.*

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	481A
Vehicle Details	
Vehicle No.:	SMM2193R
Vehicle to be Exported:	Yes
Intended Deregistration Date:	10 Sep 2024
Vehicle Make:	HONDA
Vehicle Model:	SHUTTLE 1.5G CVT
Primary Colour:	White
Manufacturing Year:	2019
Engine No.:	L15B6002568
Chassis No.:	GK82002176
Maximum Power Output:	97.0 kW (130 bhp)
Open Market Value:	\$19,799.00
Original Registration Date:	21 Jun 2019
First Registration Date:	21 Jun 2019
Transfer Count:	1
Actual ARF Paid:	\$9,799.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	20 Jun 2029
PARF Rebate Amount:	\$6,859.00
Intended COE Rebate Details	
COE Expiry Date:	20 Jun 2029
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$30,009.00
COE Rebate Amount:	\$14,337.00
Total Rebate Amount:	\$21,196.00
Message	

You will not be eligible for any COE rebate from the current COE (including unused COE from any lay-up period/s), if you renew your COE.
The information contained herein is correct as at 10 Sep 2024

OK