

COMPLETE VMS PTE LTD The Premier One-Stop Vehicle Accident Claims Centre
176 Sin Ming Drive, #03-14 / 07, Sin Ming Autocare Complex, Singapore 575721
Tel: 6455 0012 | Fax: 6554 0012 | Email: main@completevms.com.sg
Web: www.completevms.com.sg | Social: www.fb.com/completevms

Your Ref: SLL19S

Our Ref: TPDS18063 - SKS9572B

27th June 2018

By Postage

AIG ASIA PACIFIC INSURANCE PTE LTD

78 Shenton Way #07-16 Charitis Building Singapore 079120

Attention: Motor Claims Department

Dear OIC,

ACCIDENT INVOLVING VEHICLE: SKS9572B AND SLL19S ALONG T JUNCTION OF JERVOIS HILL/JERVOIS ROAD ON 25/04/2018

We are the authorized repair workshop for the owner of motor vehicle no. **SKS9572B**, which is involved in the captioned accident with your insured vehicle **SLL19S**. 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 driving, we are submitting these claims for your consideration on behalf of the owner/claimant.

1	Cost of Repair	S\$ 7,222.50 (inclusive GST)
2	5Days Loss of USE @ \$100	S\$ 500.00
3	GIA search fee	S\$ 29.00
136	Loss of Income	S\$ 1,000.00
	Ess of Meenic	S\$ 8,751.50

We enclosed herewith the following documents to support the claims:-

- a. GIA Report
- b. Proforma invoice
- c. GIA search fee/income tax return

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 Faithfulk

Chiu Siong Lim

6455 0012

For Complete VMS Pte Ltd

COMPLETE VMS PTE LTD





AIG ASIA PACIFIC INSURANCE PTE LTD 78 Shenton Way #07-16 Chartis Building Singapore 079120

Attention: MOTOR CLAIMS DEPT

Proforma Invoice: TP006337

Date: 27/06/2018

Vehicle Num.: SKS9572B Make/Model: TOYOTA ALTIS 1.6-2015

Chassis/Eng#: MR053REH104530962/1ZRX502351

Accident Date: 25/04/2018

Claim No. : Reference: Policy No.:

Amount S\$

6.750.00

COST OF REPAIR AS AGREED

SingDollars: Seven Thousand Two Hundred Twenty-Two & Cents Fifty Only

Total S\$: GST S\$: 6,750.00 472.50

Amount Due S\$:

7.222.50

COMPLETE VMS PTE LTD



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

TAX INVOICE

Our Ref No:

GR-18-064097

Date of Request:

27/04/2018

Your Ref No:

WALK IN CHIU KM

COMPLETE VMS PTE LTD 176 SIN MING DRIVE #03-14 SIN MING AUTOCARE COMPLEX SINGAPORE 575721

Dear Sir/Madam,

Your Vehicle No:

SKS9572B

Date of Accident:

25/04/2018

Place of Accident: Involving Vehicle No: SLL19S

JEVVOIS HILL

DESCRIPTION	AMOUNT (S\$)	
E-File Search Fee (Public)	14.02	
GST Amount	0.98	
Total Amount Due (GST Inclusive)	15.00	

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

[] GIRO [X] Cash [] Cheque



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00, Singapore 048580 Phone: +65 6224 0010 Fax: +65 6224 0030 Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

TAX INVOICE

Our Ref No:

GR-18-064098

Date of Request:

27/04/2018

Your Ref No:

WALK IN CHIU KM

COMPLETE VMS PTE LTD

176 SIN MING DRIVE #03-14 SIN MING AUTOCARE COMPLEX

SINGAPORE 575721

Dear Sir/Madam,

Date of Accident:

25/04/2018

Vehicle No:

SKS9572B

Place of Accident:

T JUNCTION OF JERVOIS HILL/JERVOIS ROAD

Involving Vehicle No: SLL19S

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SLL19S	T JUNCTION OF JERVOIS HILL/JERVOIS ROAD	14.00	1	13.08
GST Amount				
Total Amount Due (GST Inclusive)				14.00

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

[] GIRO [X] Cash [] Cheque

File Form B for YA 2018

+ EXPAND ALL RECORDS

PRINT

Consolidated Statement

This is a consolidation of all information entered by you and from the relevant organisations. Please check the information and proceed to submit your Income Tax Return to complete e-Filing. A copy of your Consolidated Statement will be available in the 'Notices' e-Service within 5 days. You can also save a copy of your Consolidated Statement to your desktop/mobile device.

Section A: Income	S\$	
Employment	20,110.00	
Less: Expenses	0.00	
Trade, Business, Profession or Vocation	40,425.00	C
Other Income	1.20	
Total Income LESS Expenses	60,536.20	
Section B: Deductions and Personal Reliefs	S\$	
Donations and Zakat Expenses	0.00	
Earned Income Relief	1,000.00	
Spouse/Handicapped Spouse	0.00	
Child	0.00	

	Sole-Proprietorship/Self-employed Income 1		
	Business Name	UBER 9572	
	Nature of Business	PRIVATE HIRE CAR DRIVERS	
1	Date of Commencement (For NEW business only)	08 May 2017	/
	Accounting Period From	08 May 2017	
	Accounting Period To	31 Dec 2017	
	Are you an owner of a business registered with ACRA?	Yes	
	Business Registration No.	53362128C	
	4-Line Statement		
	Revenue (Total Sales/Income)	S\$47,635.00	
	Gross Profit/Loss	S\$0.00	
	Less: Allowable Business Expenses	S\$0.00	
	Adjusted Profit/Loss	\$\$40,425.00	
	Total Sole-Proprietorship/ Self-employed Income	S\$40,425.00	
	CPF/Provident Fund		
	CPF/Provident Fund employee contributions in the year 2017 if your employer is not participating in the Auto-Inclusion Scheme for Employment income	S\$4,022.00	

Your income tax payable is \$\$741.94

Your income tax payable is \$\$741.94 based on the income, deductions and reliefs declared but before any tax adjustments or Parenthood Tax Rebate entitlement.

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My Declaration

I declare that:

- The information on my income and claim for deductions and reliefs given in this tax return and in any supporting documents to be submitted is true, correct and complete.
- I made my claims for reliefs and deductions after having read, understood and confirmed that I meet all the criteria for the claims.
- I am aware that there are penalties for furnishing incorrect tax return.

Next Step

Proceed to Submit Income Tax Return to complete your e-Filing.

SUBMIT