

Hsiao Tong (LKKAuto)

From: Hsiao Tong (LKKAuto)
Sent: Tuesday, 18 December 2018 3:57 PM
To: 'geeboonents@gmail.com'
Subject: ACCIDENT INVOLVING YP 624U(AXA) & GBF 3213C ALONG/AT INTERNATIONAL ROAD & KIAN TECK AVE ON 12/12/2018

18 Dec 2018

M/S GEE BOON ENTERPRISES

Dear Sir/ Mdm

OUR REF : CC4/ASM18022605/pb3
YOUR REF : YP 624U
ACCIDENT INVOLVING YP 624U(AXA) & GBF 3213C ALONG/AT INTERNATIONAL ROAD & KIAN TECK AVE ON 12/12/2018

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a claim from AUTOMOTIVE REPAIR CENTRE PTE LTD acting on behalf of the owner of GBF 3213C against your motor insurance policy.

Pursuant to the above said accident wherein you and/or your authorized driver had amongst other information given us your version of how the accident had occurred, we as the appointed agent of your insurers shall proceed to negotiate for an amicable settlement with third party claimant.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

We shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 10 days from the date of this letter. Your intent must be formally expressed to us and acknowledged by us.

Your full co-operation in the handling of the claim is required and kindly submit the following to chewht@lkkauto.com within 10 days from the date of this letter if not provided at our reporting centre. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license or vocational license (if any)
- Authorisation Letter/ Employment Letter from you company
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (if any)
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim

To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without AXA's prior knowledge and consent.

This letter should not be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

CC AXA1802 11/15/18

In the event of receiving and handling of any third party injury claim(s), AXA shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6742 3197 or email us at chewht@lkkauto.com.

Please quote the claim reference when you contact us that we can assist you more effectively.

Best Regards,

Hsiao Tong, Chew | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: chewht@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	YP 624U (Insd veh)	Model: TOYOTA DYNA
	GBF 3213C (TP veh)	
Date of Accident/ Time:	12/12/2018	

Repair Estimate	: \$		
Final Repair Cost	: \$		
Loss of Use	: \$		
Rental (if any)	: \$	days at \$	per day
LTA / GIA Search Fee	: \$	days at \$	per day
Others:	: \$		
	: \$		
Final Settlement Sum	: \$	13,500.00	(GLOBAL SUM)
Payee Name : AUTOMOTIVE REPAIR CENTRE PTE LTD			
Is Third Party Workshop GIA Registered? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability _____ (%)	
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ No BOLA Scenario No: <u>8a</u>	
	BOLA Liability: <u>100</u> (%)	Assessed Liability (*): _____ (%)	
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks:			

NOTE:

- PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- THIS SETTLEMENT IS ON A WITHOUT PREJUDICE BASIS AND SHOULD NOT CONSTRUED AS AN ADMISSION OF LIABILITY ON AXA AND THEIR CLIENT/TORTEASOR IN ANY MANNER WHATSOEVER.
- AXA RESERVES THEIR RIGHTS UNDER THE POLICY TERMS & CONDITIONS AS WELL AS THEIR RIGHTS IN LAW.

Only applicable to rental claim - All document are to be submitted with this settlement confirmation. In the event, rental agreement / invoices are *not received within 7 days* of this signed confirmation, we will automatically revert to loss of use claim per the NIMA rates.

We/I confirmed that this is a full and final settlement that we and or our client have/had/has against you (AXA and their policyholder/authorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

We confirmed that we have the authority of our client to act for and on their behalf in this accident.

Signature of workshop representative / Workshop stamp
Name of Representative: Raymond Tan
Date: 17/04/2020

Signature of Witness / Workshop stamp (if applicable)
Name of Witness: Lin Shu Sun
Date: 17/04/2020

Signature of AXA's surveyor/representative:
Name of AXA's surveyor /Representative:
Date: 20/04/2020





AUTOMOTIVE REPAIR CENTRE PTE LTD
38 WOODLANDS INDUSTRIAL PARK E1
#05-18 SINGAPORE 757700
TEL: 64688834 / FAX: 64622278
E-MAIL: info@automotiverepaircentre.com.sg

AXA Insurance Pte Ltd
Attn: Motor Claims Dept

Dear Sir/ Madam

LETTER OF DEMAND

ACCIDENT INVOLVING VEHICLE NO GBF3213C & YP624U
ALONG JUNCTION OF INTERNATIONAL ROAD & FIRST LOK YANG ROAD
ON 12/12/2018.

We understand that you are the insurer of vehicle YP624U.

I/We wish to inform you that my/our vehicle GBF3213C have been completed repairs to my/our satisfaction by M/s AUTOMOTIVE REPAIR CENTRE PTE LTD. I/We therefore propose to claim from your as follows:

1.	Cost of Repair	S\$ 12,412.00 (w/GST 7%)
2.	Loss of Rental (S\$150.00 x 14 days + 02 weekends)	S\$ 2,568.00 (w/GST 7%)
3.	Medical Expenses	S\$ 303.41
4.	LTA Search Fee/GIA Reports	S\$ 2.00
TOTAL		S\$ 15,285.41

Please let us have your reply soonest possible.

Thank you.

Yours faithfully



02/10/2019

AUTOMOTIVE REPAIR CENTRE PTE LTD

38 Woodlands Industrial Park E1

#05-18, Singapore 757700

Tel : 64688834 Fax : 64622278

e-mail : info@automotiverepaircentre.com.sg

Company Reg. No : 201312913C GST Reg. No : 201312913C

Tax Invoice : INV00001801

AXA INSURANCE SINGAPORE PTE LTD

8 SHENTON WAY, #27-01 AXA TOWER,
SINGAPORE 068811

Contact : 1800-880-4741 Fax No. : 6880 4740

Date : 02/10/2019

PO/VO No. :

Reference : GBF3213C

Attention :

Terms :

Page No : 1

S/N	Quantity	Particular	Unit Price	Amount S\$
1.	1	COST OF REPAIR (LUMP SUM)	11,600.00	11,600.00

Dollars : Twelve Thousand Four Hundred Twelve Only

Total S\$: 11,600.00
GST @ 7% S\$: 812.00
Amount Due S\$: 12,412.00
=====



Customer Signature & Co. Stamp

AUTOMOTIVE REPAIR CENTRE PTE LTD

LETTER OF AUTHORISATION

I/We, LOGICS HYDRAULIC SERVICES & SUPPLY ("claimant") of 1 YISHUN STREET 23 #05-31 YS-ONE SINGAPORE 768441 (address), owner of (Vehicle no.) GBF3213C hereby authorize AUTOMOTIVE REPAIR CENTRE PTE LTD ("the workshop") to act for me with respect to my claim for repair costs and/or rental and/or loss of use ("claim") for my vehicle no. GBF3213C that was damaged pursuant to the accident which occurred on 12/12/2018 (date) along ALONG JUNCTION OF INTERNATIONAL ROAD & FIRST LOK YANG ROAD (location) involving vehicle no/s YP624U ("the accident").

I further authorize the workshop to settle my above mentioned claim in a manner that they deem fit and the workshop is further authorized to receive payment further to settlement of my claim with payment cheque/s being made in favour of the workshop.

I further acknowledge that any settlement the workshop may reach on my behalf is on a without prejudice and without admission of liability basis insofar as the driver/owner/insurers of the other vehicle/s is concerned.

Dated this 12 (day) of 01 (month) 19 (year)



Signed by "the claimant"
(with chop if applicable)



Signed by "the workshop"
(with chop)

TAX INVOICE

GST REG. NO.: 200106276D

INVOICE TO
LOGICS HYDRAULIC SERVICES AND SUPPLY 1 YISHUN STREET 23 #05-31 YS-ONE SINGAPORE 768441

DATE	INVOICE NO.
18-Jan-2019	A 38747

	VHA NO.	DUE DATE	VEH. NO.
	A 38747	18-Jan-2019	GBG 4388 U
DESCRIPTION	NO. OF DAYS	RATE	AMOUNT
RENTAL FROM 26 DECEMBER 2018 TO 11 JANUARY 2019	16	150.00	2,400.00
GST @ 7%			\$168.00
TOTAL			\$2,568.00

All cheques must be made payable to BKW Rent A Car Pte Ltd.
Please write the vehicle and invoice number on the reserve.



BKW RENT A CAR PTE LTD

120 Lower Delta Road #02-15 Cendex Centre Singapore 169208 Tel: 6738 7777 Fax: 6738 6666

ACRA No: 20-0106278-D GST Reg. No: 20-0106278-D

24 HOURS HELPLINE : 6223 1122

VEHICLE HIRING AGREEMENT

VHA No: **A 38747**

Workshop: **ACC**

HIRER'S PARTICULARS

Name (as in I/C) **LOGIC HYDRAULIC SERVICES & SUPPLY**
NRIC/Passport No: **41491700K** Date of Birth: _____
Address: **BLK. 1 YISHUN STREET 23** Age: _____
#05-31 (YS. ONE) S: **769641**
Name & Address of Employer: _____
Occupation: _____ Driving Exp: _____
Driving Licence No: _____ Passed Date: _____
D/L Type: Local/Int'l/Others: _____
Tel(O) _____ (R) _____ HP **94279862**

DRIVER'S PARTICULARS

Name (as in I/C) **LEONG YONG WAH**
NRIC/Passport No: **5019402211** Date of Birth: **03-05-1954**
Address: **BLK 785 YISHUN AVENUE 2** Age: **64**
#11-1211 S: **760780**
Occupation: _____ Driving Exp: _____ Yrs
Driving Licence No: _____ Passed / Expiry Date: _____
D/L Type: Local/Int'l/Others: _____ Contact No: _____

Hirer's Own Vehicle No: GBF3213C		Replace Veh No: _____	
Loan Vehicle No: GBG4388U		VR No: _____	
Make & Model: TOYOTA DYNA/D1150		Auto/Manual Group: _____	
CHARGES : \$ cts			
Daily 16 day @ \$ 150	Per day 2,400	-	
Weekly/Monthly week @ \$ _____	Per week/Monthly _____	-	
Others _____			
CDW/PAI @ \$ _____	Per day/Monthly _____	-	
Delivery/Collection Svc _____			
GST 71 168 -			
OR No: _____		(A) SUB-TOTAL 2,568 /	
Petrol Level & Surcharge	OUT IN	E 1/4 1/2 3/4 F	
First _____ km FREE per day	GST _____		
Excess mileage is chargeable at _____ cents per km	TOTAL CHARGES _____		

Security Deposit : \$ _____

Bank: _____

CASH/NETS/VISA/MC/AMEX/CHQ No: _____

Expiry Date: _____

Card ID No: _____

Name as in Card: _____

NON WAIVER EXCESS (Subject to GST): \$ **2,500** **2,500**

ACCESSORIES CHECK

- ☐ Data Cards ☐ Camera Systems ☐ Hub Cap ☐ Radio / CD Cartridge
☐ Jack ☐ Tyre Opener ☐ Petrol Gap ☐ Spare Tyre

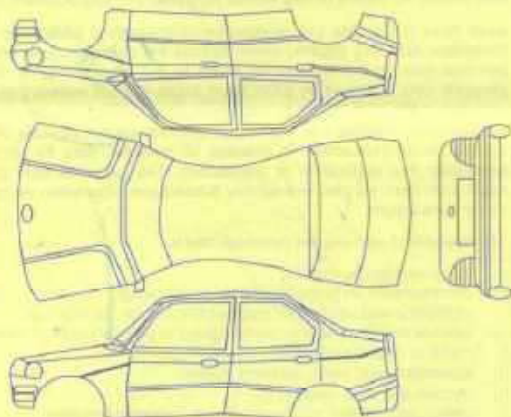
Hirer's Signature: _____

Additional Driver's Signature: _____

SINGAPORE Use Only

INDICATE:

- A - Accidents
D - Dents
S - Scratches
X - Crack



I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge/credit card for payment, I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have been given BKW Rent A Car Pte Ltd in connection with this agreement is true.

IMPORTANT

- The Hirer and the authorized driver must be over 23 years of age and under 65 years and be holding valid driving licenses and have a minimum of 2 years regular and qualified driving experience. Failure to observe stipulation may return all damages costs to be borne by the Hirer/the Authorized Driver.
- All vehicles are supplied with petrol and should be returned with petrol level likewise. A service charge of \$5 on top of a petrol surcharge is payable by the hirer should he fail to return the vehicle at the appropriate petrol level.
- No refund for early return of vehicle. The hirer shall be liable for additional charges for any late return at the rate shown per hour per day, inclusive of CDW and/or PAI where applicable. Any returns after out operation hours will be charged as a full day rental.
- Use of the vehicle for illegal purpose (For instance: in connection with theft, drug peddling or trafficking, smuggling), is strictly prohibited.
- Vehicle strictly for Singapore use only and may not be driven out of Singapore without prior written consent of BKW Rent A Car Pte Ltd. The hirer is liable for a penalty fee of \$200 in addition to the appropriate insurance top up in the case of non-disclosure of Malaysia usage.
- The hirer and/or driver shall be responsible for all damages or losses howsoever caused, all traffic violations, fines and penalties imposed on the vehicle for whatsoever reason in respect of or in connection with its use or operation.
- The hirer and/or driver shall be responsible for all claims, damages, losses, increased insurance premiums, non-waiver excess and cost expense (including

- legal costs on a full indemnity basis), whatsoever and howsoever brought against, suffered or incurred by you in respect of the vehicle or the use or the operation of the vehicle. Full excess amount have to be paid immediately in the event of an accident. The owner reserve the right not to replace a replacement vehicle if an accident occurred. Any damage to the car will be repair at BKW authorized workshop.
- Smoke or permit smoking and transport of pets in the vehicle are not allowed. Any offensive smell e.g. cigarette, durian or pet's smell, the hirer and/or driver shall bear the cost of removing the offensive smell or pet's hair between \$200 - \$400.
 - The Hirer agrees that a punctured tyre, empty petrol tank, loss of vehicle's key or locked keys inside of vehicle, by itself, does not constitute a breakdown and that in the event the owner's 24-Hours Emergency Service is called upon to respond to such occurrence, the Hirer shall bear the cost of such response at \$50.00 per trip.
 - In case of accident, the hirer shall report to rental office immediately. An accident report must be made within 24 hours. Failure to comply, the hirer will have to borne all liability from all parties claim. Full excess amount have to be paid immediately in the event of an accident.
 - The hirer/Driver also have the responsibility to ensure that the radiator water level in the car is sufficient and do not drive when the vehicle is stall and does not have sufficient water. Any damage to the engine will be bear by the hirer/Driver.
 - All customers' data will be kept strictly confidential and is solely used for the purpose of completing the sales transactions and other relating matters.
 - I understand and agree to the personal data collection statement stated on the Terms and Conditions Page.

Date Out	Time Out	Mileage	Check By	Remarks
06/12/19	1050	230T	PVG	Bill to 11/01/2019

Hirer/Driver Signature

Return of Vehicle: The Hirer/Driver is Required to Sign in The Column "Signature of Hirer/Driver Failing Which The Day And Time Inserted Below Shall Be Deemed To Be The Day And Time The Vehicle is Returned To BKW Rent A Car Pte Ltd And The Same Shall Be Accepted As Conclusive Evidence Of The Same And Shall Not Be Challenged Or Questioned On Any Account Whatsoever. And I had cleared my belonging items from the rental vehicle (cashcard, parking coupons, etc)"

**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

Third Party Insurer Enquiry

Our Ref No: GR-18-192947

Date of Request: 13/12/2018

Your Ref No: Online Purchase

Automotive Repair Centre Pte Ltd
38 Woodlands Industrial Park E1
#05-18
Singapore 757700

Dear Sir/Madam,

Enquiry Date 13/12/2018
Enquiry By Lin Shu Juan
TP Vehicle No. YP624U
Accident Date 12/12/2018

Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
YP624U	AXA Insurance Pte Ltd	04/01/2018-03/01/2019	6338 7288

Thank You.

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.

This is a computer generated document and requires no signature.

**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-18-192947
Date of Request: 13/12/2018

Your Ref No: Online Purchase

Automotive Repair Centre Pte Ltd
38 Woodlands Industrial Park E1
#05-18
Singapore 757700

Dear Sir/Madam,

Enquiry Date 13/12/2018
Enquiry By Lin Shu Juan
TP Vehicle No. YP624U
Accident Date 12/12/2018

DESCRIPTION	AMOUNT (\$\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque



**SINGAPORE
POLICE FORCE**

Attn: Mrs. Sr. Juan

Traffic Police
10 Ubi Avenue 3
Singapore 408866
Tel +65 6547 0000
Fax +65 6547 0203
www.police.gov.sg

Our Ref : TP/IP/68583/2018
Date : 14 May, 2019

HENG YONG WAH
BLK 785 YISHUN AVENUE 2
#11-1511
SINGAPORE 760785

Dear Sir/Madam

**ACCIDENT INVOLVING GBF3213C & YP624U ALONG INTERNATIONAL
ROAD JUNCTION OF FIRST LOK YANG ROAD ON 12 DECEMBER 2018 AT
1416 HRS**

I refer to the above accident.

2. Please be informed that we have completed our investigations which revealed that the driver of YP624U had committed an offence of Inconsiderate Driving under Section 65(b) of the Road Traffic Act, Chapter 276. Action has been initiated against the said driver for the said offence.

3. If you have any queries, please contact the Investigation Officer, Daniel Yan at 65476252 or via email at Daniel_Yan@spf.gov.sg

Yours faithfully

Perlin Chong
for Head Investigation
Traffic Police





Pls proceed DS with below revised quantum

Type

🔗 Question

Message

COR: \$11,770.00; LOR: \$1498.00 (\$107/day for 14 days); MEDICAL EXPENSE: \$200.00 (refer to below reason). TOTAL mandate: \$13468.00. You have global-sum mandate up to \$13500.00. Reason for partial settlement of medical expenses: Some medication expense incurred is not related to the accident, eg: renal panel with glucos, tussidex forte, fluimucil lozenges, etc.

Reply



TAX INVOICE

TO:
MR. HENG YONG WAH
BLK 785 #11-1511
YISHUN AVENUE 2
SINGAPORE 760785

MRN/NRIC : S0194022H
BILL NO : 13068703B
BILL DATE : 12.12.2018
VISIT DATE : 12.12.2018
TYPE OF SUPPLY : CASH/CREDIT
GST REG NO : 200910555Z

PATIENT NAME: HENG YONG WAH

PLEASE PAY UPON RECEIPT OF THIS INVOICE

SERVICES	AMOUNT PAYABLE (\$)
Case No : 9218579458A Specialty / Class : Accident & Emergency / NA	
A&E Attendance Fee	120.00
FBC	26.30
Renal Panel With Glucose	47.10
ECG 12 Leads	24.60
XR Chest AP / PA	33.00
XR Chest Oblique Right	37.40
Orphenadrine 35MG/Paracetamol 450MG Tab	4.00
Etoricoxib 60MG Tab (Arcoxia)	1.95
Etoricoxib 60MG Tab (Arcoxia)	9.75
Total Charges	304.10
Less: Government Subsidy	172.40-
Add: 7% GST	9.22
Less: GST Absorbed	9.22-
Amount Payable	131.70

Payer(s) Summary					
Payable By	Payable Amt (\$)	Payment Amt (\$)	Adjustment (\$)	Amount Due (\$)	Policy No
Total Bill Amount	131.70				
HENG YONG WAH	131.70	131.70-	0.00	0.00	

Amount to be paid: \$0.00

Receipt Information

12.12.2018 Receipt No: J000896450

\$131.70 (NETS)



TAX INVOICE

TO:

MR. HENG YONG WAH
BLK 785 #11-1511
YISHUN AVENUE 2
SINGAPORE 760785

MRN/NRIC : S0194022H
BILL NO : 13070858G
BILL DATE : 17.12.2018
VISIT DATE : 17.12.2018
TYPE OF SUPPLY : CASH/CREDIT
GST REG NO : 200910555Z

PATIENT NAME: HENG YONG WAH

PLEASE PAY UPON RECEIPT OF THIS INVOICE

SERVICES	AMOUNT PAYABLE (\$)
Case No : 9218580445E Specialty / Class : Surgery / SUB	
Consultation and Services	
Consultation - First Visit	74.00
Subtotal Charges (before Government Subsidy)	74.00
Less: Government Subsidy	51.80-
Subtotal Charges (after applicable Government Subsidies)	22.20
Subsidised Drugs	
Paracetamol 500MG Tablet	5.50
Tramadol 50MG Tab	5.04
Omeprazole 20MG Capsule	1.68
Subtotal Charges (before Government Subsidy)	12.22
Less: Government Subsidy	9.16-
Subtotal Charges (after applicable Government Subsidies)	3.06
Others	
Etoricoxib 90MG Tab (Arcoxia)	14.98
Subtotal Charges	14.98
Total Charges	40.24
Add: 7% GST	2.82
Less: GST Absorbed	2.82-
Amount Payable	40.24
For Information: With Referral	



TAX INVOICE

PATIENT NAME: HENG YONG WAH

MRN/NRIC : S0194022H
BILL NO : 13070858G

Payer(s) Summary

Payable By	Payable Amt (\$)	Payment Amt (\$)	Adjustment (\$)	Amount Due (\$)	Policy No
Total Bill Amount	40.24				
HENG YONG WAH	40.24	40.20-	0.04-	0.00	

Amount to be paid: \$0.00

Receipt Information

17.12.2018 Receipt No: J000899621

\$40.20 (CASH)

For Information

The amount payable by patient has been rounded down to the nearest cents.

NAME:	HENG YONG WAH	IDENTIFICATION:	S0194022H
ATTENDING DR:	DR. LOCUM	VISIT DATE:	23-12-2018
PAYMENT MODE:	CHAS BLUE CHASB / NETS		

DRUGS		\$58.70
PANAMOL 500MG TABLET [PARAG50TA]	\$6.00	
TUSSIDEX FORTE LINCTUS - 90ML [TUSSI12SY]	\$9.50	
TUSSIDEX FORTE LINCTUS - 90ML [TUSSI12SY]	\$9.50	
FLUIMUCIL 600MG EFFERVESCENT TABLET [FLUIM60TA]	\$13.50	
VIOCIL LOZENGE [VIOCI00TA]	\$7.20	
ZYRTEC-D TABLET [ZYRTD00TA]	\$13.00	

MEDICAL SERVICES		\$14.02
CHAS/PG CONSULTATION [OTHER CONSULTATION]	\$14.02	

SUBTOTAL CHARGE	\$72.72
GST@7%	\$5.09
TOTAL CHARGE	\$77.81
PAY BY CHAS BLUE CHASB	\$18.50
PAY BY NETS	\$59.31

This is a computer generated document that does not require a signature

Invoice No: 20183571029325

Printed By: Clinic Assistant 1 YIS (23-12-2018)



TAX INVOICE

TO:

MR. HENG YONG WAH
BLK 785 #11-1511
YISHUN AVENUE 2
SINGAPORE 760785

MRN/NRIC : S0194022H
BILL NO : 13080560D
BILL DATE : 02.01.2019
VISIT DATE : 02.01.2019
TYPE OF SUPPLY : CASH/CREDIT
GST REG NO : 200910555Z

PATIENT NAME: HENG YONG WAH

PLEASE PAY UPON RECEIPT OF THIS INVOICE

SERVICES	AMOUNT PAYABLE (\$)
Case No : 9218580445E Specialty / Class : Surgery / SUB	
Consultation and Services	
Consultation - Repeat Visit	68.00
Subtotal Charges (before Government Subsidy)	68.00
Less: Government Subsidy	47.60-
Subtotal Charges (after applicable Government Subsidies)	20.40
Subsidised Drugs	
Omeprazole 20MG Capsule	3.36
Dextromethorphan 15MG/5ML 100ML Linctus	2.50
Subtotal Charges (before Government Subsidy)	5.86
Less: Government Subsidy	4.39-
Subtotal Charges (after applicable Government Subsidies)	1.47
Others	
Etoricoxib 90MG Tab (Arcoxia)	29.96
Subtotal Charges	29.96
Total Charges	51.83
Add: 7% GST	3.63
Less: GST Absorbed	3.63-
Amount Payable	51.83



TAX INVOICE

PATIENT NAME: HENG YONG WAH

MRN/NRIC : S0194022H
BILL NO : 13080560D

Payer(s) Summary

<u>Payable By</u>	<u>Payable Amt</u> (\$)	<u>Payment Amt</u> (\$)	<u>Adjustment</u> (\$)	<u>Amount Due</u> (\$)	<u>Policy No</u>
Total Bill Amount	51.83				
HENG YONG WAH	51.83	51.80-	0.03-	0.00	

Amount to be paid: \$0.00

Receipt Information

02.01.2019 Receipt No: J000910075

\$51.80 (CASH)

For Information

The amount payable by patient has been rounded down to the nearest cents.



TAX INVOICE

TO:
MR. HENG YONG WAH
BLK 785 #11-1511
YISHUN AVENUE 2
SINGAPORE 760785

MRN/NRIC : S0194022H
BILL NO : 13197960F
BILL DATE : 01.02.2019
VISIT DATE : 01.02.2019
TYPE OF SUPPLY : CASH/CREDIT
GST REG NO : 200910555Z

PATIENT NAME: HENG YONG WAH

PLEASE PAY UPON RECEIPT OF THIS INVOICE

SERVICES	AMOUNT PAYABLE (\$)
Case No : 9218644071F Specialty / Class : Surgery / SUB	
Consultation and Services	
Consultation - Repeat Visit	68.00
Subtotal Charges (before Government Subsidy)	68.00
Less: Government Subsidy	47.60-
Subtotal Charges (after applicable Government Subsidies)	20.40
Total Charges	20.40
Add: 7% GST	1.43
Less: GST Absorbed	1.43-
Amount Payable	20.40

Payer(s) Summary					
Payable By	Payable Amt (\$)	Payment Amt (\$)	Adjustment (\$)	Amount Due (\$)	Policy No
Total Bill Amount	20.40				
HENG YONG WAH	20.40	20.40-	0.00	0.00	

Amount to be paid: \$0.00

Receipt Information

01.02.2019 Receipt No: J000932099 \$20.40 (CASH)