



CYCLE & CARRIAGE

CYCLE & CARRIAGE-FULCO MOTOR DEALER PTE LTD

EUNOS LINK SERVICE CENTRE

330 Ubi Road 3 Singapore 408650 Tel: 67461000 Fax: 64875857



ESTIMATE

Invoice Name & Address	Owner Name & Vehicle Info	
CHINA TAIPING INSURANCE (SINGAPORE) 3 Anson Road #16-00 Springleaf Tower Singapore 079909 Attn: Claims Dept. Contact No 63896111	Cust No/Name	/Mr Lim Sze Hwee (lin Zihui)
	Reg No/Reg Date	SLM4760C*1F / 31/03/2017
	Date In/Mileage	04/05/2019/ 0
	Chassis No	KNACC81CVH5058710
	Engine No	G4LEHS179007
	Make/Model	KIA/NIRO 1.6 A
	Colour/Trim	K3R / WK

Account No	Terms	Date/Time Printed	CSE	Operator	WIP No				
F0000018.	Credit	04/05/2019/ 11:02	DS	303 / Renemer	23804				
Description of Goods / Services					Qty	Unit Price	Disc%	Amount	
S	MIPNT88088								250.00
	DIAGNOSTIC/SCANNING								
S	MIPNT88088								100.00
	TO CHECK LIGHTING/WIRING SYSTEM ON REAR ACCIDENT AFFECTED AREAS								
S	MIPNT88088								600.00
	TO REMOVE & RE-INSTALL ALL CARPETS/TRIMMING TO GIVE WAY ACCESS REPAIR ON LHR ACCIDENT AFFECTED AREAS								
S	MIPNT88088								600.00
	TO TRANSFER LHR DOOR COMPONENTS/MECHANISM								
S	MIPNT88088								1800.00
	TO REPLACE LHR DOOR,LHR GARNISH,LHR QTR MLDG,ETC TO REPAIR LH SIDE SILL STRAIGHTEN,REFORM,ALIGN ON LHR ACCIDENT AFFECTED AREAS								
S	MIPNT88088								180.00
	WHEEL ALIGNMENT								
S	MIPNT88088								50.00
	WHEEL BALANCING								
S	MIPNT98088								1260.00
	SPRAY PAINTING ON REAR ACCIDENT AFFECTED AREAS								
M	KS 77003 G5 000	LH PANEL ASSY-REAR D	1.00	1317.00	0.00	1317.00			
M	KS 79410 D8 000	LH UPR HINGE ASSY-RR	1.00	33.00	0.00	33.00			
M	KS 79310 2E 000	LH LWR HINGE ASSY-RR	1.00	26.00	0.00	26.00			
M	KS 86381 G5 000	LH TAPE-RR DR BLACK	1.00	11.00	0.00	11.00			
M	KS 86383 G5 000	LH TAPE-RR DR BLACK	1.00	9.00	0.00	9.00			
M	KS 87539 G5 000	LH FILM - ANTI-CHIPP	1.00	15.00	0.00	15.00			
M	KS 87731 G5 000	LH MLDG ASSY-RR DR W	1.00	113.00	0.00	113.00			
M	KS 87751 G5 000W K	LH SIDE SILL MLDG-AS	1.00	201.00	0.00	201.00			
M	KS 87741 G5 000	LH GARNISH ASSY-QTR	1.00	144.00	0.00	144.00			
M	KS 52910 G5 120	WHEEL ASSY-ALUMINIUM	1.00	1250.00	0.00	1250.00			
M	KS 52933 D4 100	VALVE - TIRE PRESSUR	1.00	125.00	0.00	125.00			
Z	NOTES								

Confirm & accepted by

Authorized signatory and company stamp

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required. Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.



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Account No	Terms	Date/Time Printed	CSE	Operator	WIP No
F0000018	Credit	04/05/2019/ 11:02	DS	303 / Renemer	23804

Description of Goods / Services	Qty	Unit Price	Disc%	Amount
ACCIDENT ON 03/05/2019 ALONG MEE TOH SCHOOL 109D EDGEDALE PLAINS HDB OWNER CLAIMING THIRD PARTY REQUIRED REPLACEMENT CAR TP#: SJP6115K TP INS: CHINA TAIPING				
<h1>Estimate</h1>				

Confirm & accepted by

Parts	3,244.00
Labour	0.00
Standard Menu	0.00
Specialist Job	4,840.00
Others(Lub,etc)	0.00
Sundry	0.00
Total(w/o GST)	8,084.00

Authorized signatory and company stamp

Validity of this estimate is 14 days from date of quote. This is a computer generated document, no signature is required. Estimated costs quoted are excluding GST. We would mention that the above estimate is based on our initial inspection and does not include any additional parts or labour which may be required after repair work has commenced. Occasionally worn or damaged parts are discovered after work has started and needed for repairs or replacement. However, should this occur, we would advise you. Please be informed that a deposit of 50% of the above estimate is payable before commencement of the work. Payment for this may be made in cash, credit card or cheque. You must also agree to pay full amount for renewal of the windscreen in the event of inadvertent breakage in the course of renewing the rubber seal or other repair requiring the removal of the windscreen.

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 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 Report	03/05/2019 17:43
Date Of Accident	03/05/2019 13:30
Exact Location Of Accident	MEE TOH SCHOOL 3ESIDE 109D EDGEDALE PLAINS HDB
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM4760C
Insured/Policyholder	
Name Of Registered Owner	LIM SZE HWEE (LIN ZIHUI)
NRIC No	S8132140Z
Email Address	LIN_ZIHUI@YAHOC.COM
Mobile Phone No	(LOCAL) +65-90882-74
Alternative Phone No	OTHERS-NOPHONE

Vehicle Particulars

Manufacturer	KIA
Model	NIRO HYBRID-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00617383
Cover Note Number	

Driver

Name of Driver	LIM SZE HWEE (LIN ZIHUI)
NRIC No	S8132140Z
Date Of Birth	21/10/1981
Occupation	INDOOR
Date Of Driving Pass	30/07/2003
Driving Experience	15 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90882474
Fax Number	
Contact Number	OTHERS-NOPHONE

Address	25 PUNGGOL FIELD WALK #12-21 SINGAPORE
Postcode	828751
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PARKED VEHICLE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	0

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

WHILE I WAS WAITING TO PICK UP MY DAUGHTER AT MEE TOH SCHOOL, VEHICLE B "SJP6115K" WAS TRYING TO PARK AND ACCIDENTALLY HIT MY CAR LEFT HAND SIDE WHILE REVERSING. AFTER SHE PARKED THE CAR AT ANOTHER POSITION, SHE LOOKED FOR ME TO APOLOGIZE AND ADMITTED HER MISTAKE. THE DRIVER OF VEHICLE C WAS AN EYEWITNESS TO THE ACCIDENT AND HE APPROACHED ME AND OFFERED HIS HELP AS AN EYEWITNESS TO THE ACCIDENT. HIS HP IS 87814444 AND HIS NAME IS EDDY.

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 Witness 1

Name	EDDY
Phone Number	87814444
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJP6115K
Vehicle Make/Model/Colour	MERCEDEZ BENZ
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	XIE JINHUA
NRIC/Passport Number	S8082145Z
Contact Number	88858818

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

MOTOR ACCIDENT REPORT FORM

BASIC INFORMATION	
Date of Report:	
Date of Accident:	03/05/19
Time:	13:30
Exact Location of Accident:	MEE TOW SCHOOL BESIDE 109D EDGEHILL PLAINS HDB
DETAILS OF OWN VEHICLE	
Vehicle Registration Number:	SLM4760C
Name of Registered Owner:	LIM SZE HUIE (LIN ZIHUI)
NRIC/Passport No./FIN:	581321402
Company Reg. No.(for Company Veh):	
VEHICLE PARTICULARS	
Manufacturer:	KIA
Model:	NIRO
Exact Purpose for which vehicle was being use at time of Accident	<input checked="" type="checkbox"/> Normal Usage <input type="checkbox"/> Others
Are You Claiming Under Your Own Insurance?	<input type="checkbox"/> YES <input type="checkbox"/> NO Reporting Only <input checked="" type="checkbox"/> NO 3rd Party
Vehicle Category	<input checked="" type="checkbox"/> Private car <input type="checkbox"/> Commercial Vehicle <input type="checkbox"/> Private Hire
INSURANCE DETAILS	
Name of Insurance:	DIRECT ASIA
Type of Coverage:	<input checked="" type="checkbox"/> Comprehensive <input type="checkbox"/> Third Party
Policy Number:	MT/00617383
Driver when the Accident Happen	
Name of Driver:	LIM SZE HUIE
NRIC/Passport/Fin No:	581321402
Date of Birth:	21-10-1981
Occupation:	PILOT
Date of Driving Pass:	30-07-2003
Gender:	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female
Mobile No.:	90882474
Home No.:	-
Address:	25 PUNGGOL FIELD WALK #12-21 (S)
Postal Code	628757
Email Address:	LIN-ZIHUI@YAHOO.COM
Was the Driver an Employee of the Insured's Company:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No State the relationship of the driver to insured OWNER
Vehicle Registration Number of driver's Own Vehicle:	
Insurance Company:	
OTHER INFORMATION OF THE ACCIDENT	
Type of Accident:	HIT WHILE PARKED
Weather Condition:	<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Raining <input type="checkbox"/> Others, please specify
Road Surface	<input checked="" type="checkbox"/> Dry <input type="checkbox"/> Wet <input type="checkbox"/> Others, please specify
Was Anybody Injured:	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Was Any other material or Property Damaged:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Any Accident Photo in the Scene of Accident:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was the Accident reported to police:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Which Police Station:	
Was notice of Intended Prosecution given:	
Number of Passengers(Including Driver):	0
Was there any video captured by your Camera?	NO
Was there any audio recording?	NO
DETAILS OF OTHER VEHICLE (Please fill Annex A if more vehicles involve)	
Vehicle Registration Number:	CJP 6115K
Name of Registered Owner:	
NRIC/Passport No./FIN:	
Company Reg. No.(for Company Veh):	
Name of Driver:	XIE JIN HUA
NRIC/Passport/Fin No:	580221452
Mobile No.:	90258312
Home No.:	
Address:	
Postal Code	
Email Address:	
Insurance Company:	
Details of Passenger if any	
Passenger Name:	
Contact Number:	
Gender	
Details of Injured Person	
Name:	
Age:	
Address	
Injured Sustained:	
Injured Person in which vehicle:	
Were Seatbelts worn:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were Injured Convey to Hospital by Ambulance:	<input type="checkbox"/> Yes <input type="checkbox"/> 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 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. 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 lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time: 03/05/19 17:00

Driver's Signature

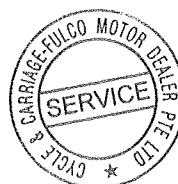
(If driver is not the policyholder)

Date & Time: 03/05/19 17:00

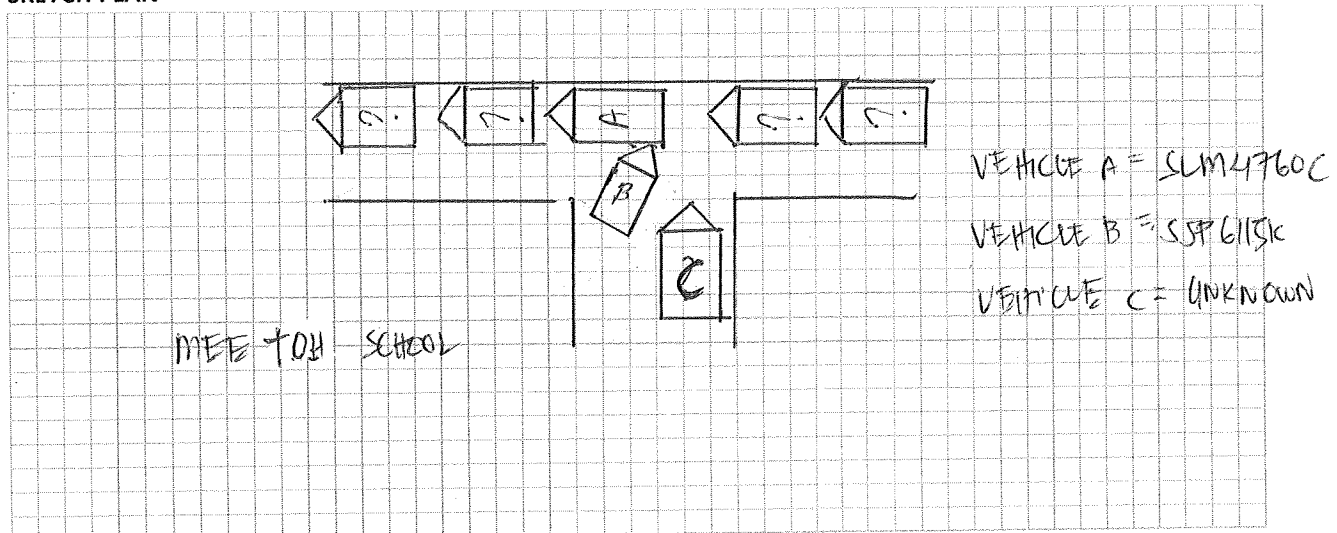
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

WHILE I WAS WAITING TO PICK UP MY DAUGHTER AT MEE TOM SCHOOL, VEHICLE B "SJPG115K" WAS TRYING TO PARK AND ACCIDENTALLY HIT MY CAR'S LEFT HAND SIDE WHILE REVERSING. AFTER SHE PARKED THE CAR AT ANOTHER POSITION, SHE LOOKED FOR ME TO APOLOGISE AND ADMITTED HER MISTAKE. THE DRIVER OF VEHICLE C WAS AN EYEWITNESS TO THE ACCIDENT AND HE APPROACHED ME AND OFFERED HIS HELP AS AN EYEWITNESS TO THE ACCIDENT. HIS HP IS 87814444 AND HIS NAME IS EDDY.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

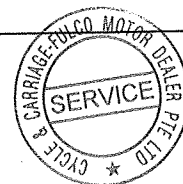
Date & Time: 03/05/19 17:00

GIARMC SketchPlanForm_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time: 03/05/19 17:00



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act")
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore)
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No.	: MT/00617383
Type of Coverage / Driver Plan	: Car Comprehensive (Value Plus Plan)
1) Vehicle Registration No.	: SLM4760C
Chassis No.	: KNACC81CVH5058710
2) Name of Policy Holder	: Lim, Sze Hwee
3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	: 31/03/2019 00:00
4) Date/Time of Expiry of Insurance	: 30/03/2020 23:59
5) Persons or Classes of Persons Entitled to Drive	
(a) Any named person under the policy who is driving on the Policyholder's permission.	
(b) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Policyholder's permission	
The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.	
6) Limitations as to use*	
Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Private car-pooling arrangements where you commute with passengers and split the fuel expense is covered under the standard policy. Grab Hitch will only be covered if this is the declared usage stated on your Policy Schedule. Only two rides are permitted a day. Other forms of commercial car-pooling or any ride hailing services (e.g. Grab, Go-Jek etc.) are not allowed.	
*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.	
Sum Insured	: Market Value
Own Damage Excess	: S\$ 500.00 (before any applicable GST)
Windscreen Excess	: S\$ 100.00 (before any applicable GST)
Choice of workshop	: My Workshop/ My Authorised Distributor Workshop
Finance company / Hire Purchase	: DBS BANK LIMITED
Main driver	: Lim, Sze Hwee
Named driver	: None
Important Note: This policy does not cover the Policyholder/drivers below the age of 30 and Policyholder/drivers who hold a valid driving licence of less than 2 years with the exception of the main/named drivers above.	

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 the Road Transport Act, 1987 (Malaysia).

Issued on: 27/03/2019

Direct Asia Insurance (Singapore) Pte. Ltd.



Edip Okur (Chief Underwriting Officer)

Direct Asia Insurance (Singapore) Pte Ltd
20 Anson Road #08-01 Twenty Anson Singapore 079912
www.DirectAsia.com

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S 8132140Z**



Name: **LIM SIZE HWEE (LIN ZIHUI)**

Birth Date: **21 Oct 1981**

Issue Date: **30 Jul 2003**

000696218H

FOR C&C USE ONLY

YOU ARE LICENSED TO DRIVE VEHICLES OF THE FOLLOWING CLASS(ES)


Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE: **30 Jul 2003**

NP 428A

Licence No: **S8132140Z**

FOR C&C USE ONLY



4792401



NRIC No. **S8132140Z**

Date of Issue: **11-11-2011**

25 PUNGOL FIELD WALK #12-21 SINGAPORE 828751

NRIC No. **S8132140Z** Date: **02/04/2016**

FOR C&C USE ONLY

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8132140Z**

Name: **LIM SIZE HWEE (LIN ZIHUI)**





Race: **CHINESE**

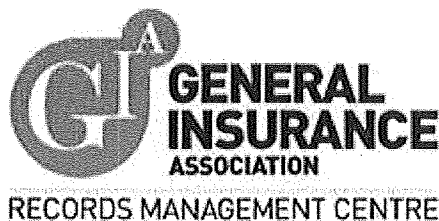
Date of birth: **21-10-1981**

Country of birth: **SINGAPORE**

Sex: **M**

FOR C&C USE ONLY



**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-19-069976

Date of Request: 04/05/2019

Your Ref No:

Online Purchase

Cycle & Carriage Fulco Motor Dealer Pte Ltd
330 Ubi Road 3
Singapore 408650

Dear Sir/Madam,

Enquiry Date 04/05/2019
Enquiry By Renemer Bagang
TP Vehicle No. SJP6115K
Accident Date 03/05/2019

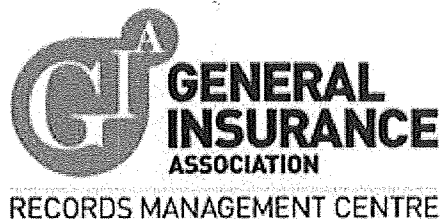
Enquiry Result

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SJP6115K	China Taiping Insurance (Singapore) Pte. Ltd.	24/04/2019-23/04/2020	6389 6111

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-19-069976

Date of Request: 04/05/2019

Your Ref No:

Online Purchase

Cycle & Carriage Fulco Motor Dealer Pte Ltd
330 Ubi Road 3
Singapore 408650

Dear Sir/Madam,

Enquiry Date 04/05/2019
Enquiry By Renemer Bagang
TP Vehicle No. SJP6115K
Accident Date 03/05/2019

DESCRIPTION	AMOUNT (S\$)
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