



Teamwork Garage Pte Ltd
53 Ubi Avenue 1 #01-23/24 Singapore 408934
Paya Ubi Industrial Park
Tel: 6844 2475 Fax: 6844 2474
Email: claims@teamworkgarage.com
GST Register No: 201015366H

11th May 2020

Our reference: 2002-47

Your reference: SKS9030Z

AIG Asia Pacific Insurance Pte Ltd

78 Shenton Way

#08-16

Singapore 079120

Attn: Motor Claims Department

BY HAND

Dear Sir/ Madam,

Claimant : DOLPHY YEO

Address : BLK 640 HOUGANG AVE 8 #01-159 S(530640)

We are instructed by the above named to claim damages against your insured/your insured's driver in connection with a road accident on **20/02/2020** along **Marina Boulevard Towards MCE** involving our client's vehicle registration number **SJR5212J** and vehicle registrations number **SKS9030Z** driven by you/your insured's driver at the material time.

The accident was caused by your insured negligent driving and/or management of the vehicle. As a result of the accident, our client's vehicle was damaged and our client has been put to loss and expense, particulars of which are as follows:-

| | | |
|---|---|--------------|
| Cost of Repair | : | \$ 8,988.00 |
| Loss of Use (\$250 x 9days) | : | \$2,250.00 |
| LTA Search Fee | : | \$ 7.49 |
| Purchase 3 rd Party Report Fee | : | \$ 29.00 |
| Total | : | \$ 11,274.49 |

A copy of each of the following supporting documents is enclosed:-

- a) Our client's Accident Report/Police Report;
- b) COE/PARF Certificates;
- c) Owner / Driver's IC & Driving License;
- d) LTA Search;
- e) Purchase Third Party Report Fee;
- f) Letter Of Authorisation;
- g) Tax Invoice;
- h) Satisfaction of Repaired Vehicle;

The demand herein is in respect of our client's claim for damages pertaining to their motor vehicle and any settlement following or subsequent of this demand shall not prejudice our client's claim in respect of damages and consequential loss in relation to personal injuries.

Please send to us an acknowledgement of receipt of this letter with 14 days of your receipt of this letter, failing which our client will have no alternative but to commence proceedings against you without further notice to you or your insurer. Our client's claim is quantified based on the supporting documents in our file. Until a settlement is reached, all negotiations are conducted on the basis that the damages quantified herein are subject to revision if so instructed by our client.

Yours faithfully,



Teamwork Garage Pte Ltd

Encl.

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 21/02/2020 22:28
Date Of Accident 20/02/2020 21:15
Exact Location Of Accident ALONG MARINA BOULEVARD TOWARDS MCE.
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJR5212J
Insured/Policyholder
Name Of Registered Owner DOLPHY YEO
NRIC No SXXXX444D
Email Address DOLPHYEO@YAHOO.COM
Mobile Phone No (LOCAL) +65-97721240
Alternative Phone No OFFICE-97721240

Vehicle Particulars

Manufacturer MERCEDES-BENZ
Model CLC180 1.8 KOMPRESSOR 17
Exact Purpose for which vehicle was being used at time of accident PRIVATE
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 AVIVA LTD
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number 10921095
Cover Note Number

Driver

Name of Driver DOLPHY YEO
NRIC No SXXXX444D
Date Of Birth 24/03/1982
Occupation INDOOR
Date Of Driving Pass 19/02/2008
Driving Experience 12 YEARS AND 0 MONTHS
Gender FEMALE
Mobile Number (LOCAL) +65-97721240
Fax Number
Contact Number OFFICE-97721240
Email Address DOLPHYEO@YAHOO.COM

| | |
|---|-------|
| Address | NIL |
| Postcode | |
| 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 | SIDE SWIPE |
| 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? | NO |
| 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) | 2 |
| Passenger 1 | |
| | NAME: : LEE PENG SOON |
| | GENDER: : MALE |

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

I was driving my car along Marina boulevard towards MCE. I was going straight, Suddenly I felt a bang from my rear right side position. Subsequently I coming and checked, there was vehicle SKS9030Z was hit onto my car rear right side position. Damages of my car rear right side position. No injuries were involved.

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 OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------|---|
| Vehicle Registration Number | SKS9030Z |
| Vehicle Make/Model/Colour | LAND ROVER / RANGE ROVER SPORT 3.0D TSS 7S SR |
| Details Of Properties | NA |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | SANADHYA SUDHANSHU |
| NRIC/Passport Number | GXXXX605W |
| Contact Number | 98325012 |
| Address | |
| Postcode | |
| Insurance Company Name | |

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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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:

21-2-2020

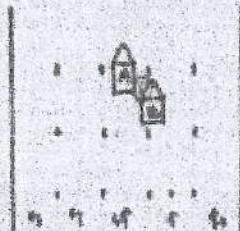
Driver's Signature
(If driver is not the policyholder)
Date & Time:

**VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
VOO CHEON YEE**

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



A: 53R52123
C: SKS90302

Along Marina Boulevard Towards MCE

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO ATTACHED STATEMENT

DECLARATION

(I declare that the above particulars are true in every respect.)

Policyholder's Signature
Date & Time

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

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
VDO CHEON YEE

Reporting Officer's Signature
Name
RACON No.

ACCIDENT STATEMENT (2000 characters)

I was driving my car along Marina boulevard towards MCE. I was going straight, Suddenly I felt a bang from my rear right side position. Subsequently I coming and checked, there was vehicle SKS9030Z was hit onto my car rear right side position. Damages of my car rear right side position. No injuries were involved.

Taxi Voucher No.:

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -
JOHNNY VOO CHEON YEE

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

21 February 2020 at 6:33 PM

Date/Time:

21 February 2020 at 6:33 PM

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Singapore NRIC

Owner ID:

444D

Vehicle Details

Vehicle No.:

SJR5212J

Vehicle to be Exported:

No

Intended Deregistration Date:

26 Feb 2020

Vehicle Make:

MERCEDES BENZ

Vehicle Model:

CLC 180 K

Primary Colour:

Black

Manufacturing Year:

2009

Engine No.:

27194631194577

Chassis No.:

WDB2037462E066187

Maximum Power Output:

105.0 kW (140 bhp)

Open Market Value:

\$34,338.00

Original Registration Date:

26 Jun 2009

First Registration Date:

26 Jun 2009

Transfer Count:

1

Actual ARF Paid:

\$34,338.00

Intended PARF Rebate Details

PARF Eligibility:

Forfeited

PARF Eligibility Expiry Date:

-

PARF Rebate Amount:

\$0.00

Intended COE Rebate Details

COE Expiry Date:

31 May 2029

COE Category:

B - Car (1601cc & above)

COE Period(Years):

10

PQP Paid:

\$39,563.00

COE Rebate Amount:

\$36,648.00

Total Rebate Amount:

\$36,648.00

The information contained herein is correct as at 26 Feb 2020

OK

> Back to OneMotoring

Enquire Road Tax Payable / Prerequisite(s) To Fulfil

Please Note :

- The information contained herein is correct as at 26 Feb 2020.

Vehicle Particulars

| | |
|-------------------------------|-------------|
| Vehicle No.: | SJR5212J |
| Current Road Tax Expiry Date: | 25 Jun 2020 |
| New Road Tax Start Date: | 26 Jun 2020 |
| New Road Tax Expiry Date: | 25 Dec 2020 |

Prerequisites (Updating of records may take about 3 working days)

| | |
|---------------------------------|-----|
| Sufficient Insurance Coverage : | No |
| Vehicle Inspection Required : | Yes |

Net Road Tax Amount

| | Amount (S\$) |
|-----------------------|-----------------|
| Road Tax Amount: | 585.00 |
| Nett Road Tax Amount: | 585.00 |
| Amount Payable | |

| | Amount Before GST (S\$) | GST Amount (S\$) | Amount After GST (S\$) |
|-----------------------|----------------------------|---------------------|---------------------------|
| Nett Road Tax Amount: | 585.00 | - | 585.00 |
| Total Amount Payable | | | 585.00 |

Late Renewal Fees Payable From

| | Late Renewal Fees (S\$) | Total Amount with Late Renewal Fee (S\$) |
|-------------|----------------------------|--|
| 26 Jun 2020 | 30.00 | 615.00 |
| 26 Jul 2020 | 80.00 | 665.00 |
| 09 Sep 2020 | 100.00 | 685.00 |
| 26 Sep 2020 | 250.00 | 835.00 |

Message

The road tax schedules for petrol-electric cars and electric vehicles (EV) will be revised from 1 January 2021. The current enquiry result does not include the revised road tax schedules commencing 1 January 2021. Please refer to the [Press Release](#) for more information.

Previous

OK

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8208444D



Name

DOLPHY YEO



杨晴雯

Race

CHINESE

Date of birth

24-03-1982

Sex

F

Country of birth

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S8208444D

Name

DOLPHY YEO



Start Date 24 Mar 1982

Valid Date 19 Feb 2008



4430933



NRIC No S8208444D



Date of issue

30-05-2009

Address

APT BLK 640 HOUGANG AVENUE 8
#01-159
SINGAPORE 530640

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

PASS DATE

Class 3 Motor cars < 3000kg with < 7 passengers, exclusive of the driver, and other motor vehicles < 2500kg 19 Feb 2008





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

Print Date/Time : 26 Feb 2020 / 14:23:27

Receipt Date/Time : 26 Feb 2020 / 14:23:27

Tax Invoice/Receipt

Receipt No. : ITNET-00000-200226-002102

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 - SLL6710P

As at 25 Feb 2020/21:40:00

Insurance Co: AUTO & GENERAL INSURANCE (SINGAPORE) PTE.
LIMITED

1 Insurance Enquiry - SLL6710P
Enquiry Fee
20200226142249297370

| | | |
|------|------|------|
| 7.00 | 0.49 | 7.49 |
|------|------|------|

Sub-Total

| | | |
|------|------|------|
| 7.00 | 0.49 | 7.49 |
|------|------|------|

Result of Insurance Enquiry - SDU1313H

As at 25 Feb 2020/18:20:00

Insurance Co: NTUC INCOME INS CO-OP LTD

2 Insurance Enquiry - SDU1313H
Enquiry Fee
20200226142249371437

| | | |
|------|------|------|
| 7.00 | 0.49 | 7.49 |
|------|------|------|

Sub-Total

| | | |
|------|------|------|
| 7.00 | 0.49 | 7.49 |
|------|------|------|

Result of Insurance Enquiry - SKS9030Z

As at 20 Feb 2020/21:15:00

Insurance Co: AIG ASIA PACIFIC INSURANCE PTE. LTD.

3 Insurance Enquiry - SKS9030Z
Enquiry Fee
20200226142249449211

| | | |
|------|------|------|
| 7.00 | 0.49 | 7.49 |
|------|------|------|

Sub-Total

| | | |
|------|------|------|
| 7.00 | 0.49 | 7.49 |
|------|------|------|

Total Before Rounding

| | | |
|-------|------|-------|
| 21.00 | 1.47 | 22.47 |
|-------|------|-------|

Rounding Difference

0.02

Total Amount Payable

22.45

Paid By

xxxxxxxxxxxx5880

Credit Card:
Visa/MasterCard

22.45

Total

22.45

Cash Change

0.00

Tendered Amount

22.45

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.



**GENERAL
INSURANCE
ASSOCIATION**

RECORDS MANAGEMENT CENTRE

**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

2002-47 SJR52123

3P

Our Ref No: GR-20-034555

Date of Request: 27/02/2020

Your Ref No: WALK IN SEAH

TEAMWORK GARAGE PTE LTD
53 UBI AVE 1 #01-24, PAYA UBI INDUSTRIAL PARK
SINGAPORE 408934

Dear Sir/Madam,

Your Vehicle No: SJR5212J
Date of Accident: 20/02/2020
Place of Accident: MARINA BLVD
Involving Vehicle No: SKS9030Z

| 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:

Date:

☐ GIRO ☒ Cash ☐ Cheque



RECORDS MANAGEMENT CENTRE

**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-20-034556

Date of Request: 27/02/2020

Your Ref No: WALK IN SEAH

TEAMWORK GARAGE PTE LTD
53 UBI AVE 1 #01-24, PAYA UBI INDUSTRIAL PARK
SINGAPORE 408934

Dear Sir/Madam,

Date of Accident: 20/02/2020

Vehicle No: SJR5212J

Place of Accident: Along Marina boulevard towards MCE.

Involving Vehicle No: SKS9030Z

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\$) |
|----------------------------------|-------------------------------------|---------------|-----|--------------|
| SKS9030Z | Along Marina boulevard towards MCE. | 14.00 | 1 | 13.08 |
| GST Amount | | | | 0.92 |
| 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:

Date:

☐ GIRO ☒ Cash ☐ Cheque

LETTER OF AUTHORIZATION

CLC180

To Alfa Asia Pacific Insurance Pte Ltd (Third party insurance & Workshop)

Claimant Dolphy Yeo

Dear Sirs,

I/We, Dolphy Yeo owner of vehicle no. SJR5212J

hereby authorize my/our repairer, Teamwork Garage Pte Ltd

act as my/our agent and proceed on behalf for me/us with respect to my/our claim for repair costs and/or rental and/or loss of use ("claim") for my/our vehicle no. SJR5212J that was damage pursuant to the accident which occurred at/along

Marina Boulevard toward MCE

involving vehicle nos. SJR5212J and SKS00302

I/We hereby irrevocably assign absolutely to you that I/we have authorized and assigned all compensation monies pertaining the above mentioned accident due to me/us to my/our repairer/solicitors Teamwork Garage Pte Ltd. I/We hereby authorize you to forward and release all compensation settlement cheques(s) due to the settlement to my/our repairer/solicitors Teamwork Garage Pte Ltd pertaining to above said accident whom I/we authorized and assigned to collect the said compensation monies.

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

I/We acknowledge that the Discharge Voucher applies only to my/our property damage and will not affect any of the personal injuries claim(s) involved and/or uninsured losses claim in a later date. Further the settlement terms herein should not be used as an evidence to prejudice to any personal injuries claim(s) involved and/or other uninsured losses claim arising of the subject matter in the action.

Thank you.

Dated this 11 day of May (month) 2020 (year)

Signature of owner vehicle (claimant) [Signature]

Name of owner of vehicle (claimant) Dolphy Yeo

NRIC Number (claimant) S8208444D

SATISFACTION OF REPAIRED VEHICLE

I/We, Dolphin Geo, owner/driver of vehicle No. SSK52123 declare that the repairs of my/our vehicle has been completed and to my/our satisfaction.

I/We agree that I/we hereby irrevocable absolutely accept the settlement amount and the liability from the third party on the repair costs and/or rental and/or loss of use which are final and that the sum of amount are to be released and payment to the workshop for such repairs in respect of the damages caused in the accident.

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

I/We acknowledge that the Discharge Voucher applies only to my/our property damage and will not affect any of the personal injuries claim(s) involved and/or uninsured losses claim in a later date. Further the settlement terms herein should not be used as an evidence to prejudice to any personal injuries claim(s) involved and/or other uninsured losses claim arising of the subject matter in the action.

Dated this 09 day of 03 (month) 20 20 (year)
@ 18 hrs 30 mins

A handwritten signature in black ink, consisting of a stylized 'S' followed by a long horizontal stroke that curves upwards at the end. An arrow points from the signature down to the line for the name and signature.

Name and Signature

Bill To:

AIG ASIA PACIFIC INSURANCE PTE LTD
AIG BUILDING
78 SHENTON WAY
#08-16 SINGAPORE 079120

Tax Invoice

Invoice number : TI-7617

Date : 11-05-20

Terms : C.O.D.

Vehicle number : SJR5212J

Make / Model : MERCEDES CLC180

| Description | Amount (\$\$) |
|--|-----------------------------|
| <p>ACCIDENT INVOLVING SJR5212J / SKS9030Z ON 20/02/2020 @ MARINA BOULEVARD TOWARDS MCE</p> <p>INCLUSIVE OF SUPPLYING PARTS , LABOUR , PANEL BEATING AND SPRAY PAINTING</p> <p>LUMP SUM REPAIR</p> <p>SINGDOLLARS : EIGHT THOUSAND NINE HUNDRED AND EIGHTY-EIGHT DOLLARS ONLY</p> <p><i>Thank you for your business and have a nice day !</i></p> | \$8,400.00 |
| Reference : 2002-47 | |
| * Cheque payment should be issued in favour to TEAMWORK GARAGE PTE LTD | |
| ** Please ensure that your vehicle is of good condition upon the point of collection. | |
| E. & O. E | |
| | Subtotal \$8,400.00 |
| | Add: GST 7% \$588.00 |
| | Total Inc GST 7% \$8,988.00 |
| | Less: Deposit \$0.00 |
| | Balance Due \$8,988.00 |

