

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

21th January 2021

Our reference: 2101-11 Your reference: GBC688B

AIG Asia Pacific Insurance Pte Ltd

BY HAND

78 Shenton Way

#08-16

Singapore 079120

Attn: Motor Claims Department

Dear Sir/ Madam,

Claimant: TRAIN HUB FACILITIES PTE LTD

Address

80 TUAS AVENUE 1 S(639525)

We are instructed by the above named to claim damages against your insured/your insured's driver in connection with a road accident on **06 JAN 2021** along **CHOA** CHU KANG RD, SINGAPORE involving our client's vehicle registration number <u>\$LU7523J</u> and vehicle registrations number <u>GBC688B</u> 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	•	\$ 7,490.00

Loss of Use (13Days X \$180) \$ 2,340.00

\$ 7.49 LTA Search Fee

\$ 9,837.49 Total

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) Letter Of Authorisation;
- e) Tax Invoice;
- f) LTA Search Tax Invoice;

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.

SN0921170004 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 07/01/2021 13:58 (SGT) SUBMITTED BY: Celine Fong Wai Li VERSION: 1 (07/01/2021 13:58 (SGT))

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report <u>correctly</u> 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 witholding 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 Submission Date of Accident **Exact Location of Accident** Additional Location Information Country/State of Loss

07/01/2021 13:58 (SGT) 06/01/2021 11:50 (SGT) Choa Chu Kang Rd, Singapore

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SLU7523J

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Company Reg No **Email Address** Mobile Phone No Alternative Phone No

Yes TRAIN HUB FACILITIES PTE LTD 2XXXXX008C one nizam@yahoo.com.sg (Phone) +65-84286663

VEHICLE PARTICULARS

Manufacturer Model

Variant

Exact purpose for which vehicle was being used at time of accident Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category Private hire

Toyota

Wish

No - Claiming third party Private hire

INSURANCE COMPANY

Name of Insurance Company Type of Coverage

Fleet Policy Policy Number

Cover Note Number

NTUC

ThirdParty No

5115478400

DRIVER

Name of Driver NRIC No Date Of Birth Occupation

MOHAMMAD NIZAM BIN JAFFAR SXXXX131I 25/02/1972 Outdoor

Date Of Driving Pass
Driving experience
Gender
Mobile Number

Gender Male
Mobile Number (Phone) +65-94284679
Alt. Phone Number Email Address one nizam@yahoo.com.sg

Email Address
Address
Address complement

Postcode
Is the driver the policyholder?
If No, Relationship of the Driver with the Insured

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged?

No
Was any other material or property damaged?

Yes
Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s)

Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

Was the accident reported to the police?

Police Station Name
Police Station Phone No
Alt. Police Station Phone No
Police Station Address

DETAILS OF POLICE ACTION

Was notice of intended Prosecution given?

If yes, against whom?

Yes

Traffic Police

30/09/2010

#03-84

462188

No

10 YEARS AND 4 MONTHS

BLK 188B BEDOK NORTH STREET 4

(Phone) +65-65470000 (Fax) +65-65474900

10 Ubi Avenue 3 Singapore 408865

No

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT - T/20210106/7047.

ATTACHMENT(S)

Name of Driver NRIC No ===

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

GBC688B

COMMERCIA

COMMERCIA

GBC688B

Commercial vehicle SIM WEE CHUNG SXXXX384B



Contact Number	-
Address	-
Address complement	-
Postcode and a supplementation of the control of th	-
nsurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Name of Driver NRIC No Contact Number Address Address complement Postcode	YN4422U Commercial vehicle MUHAMMAD SYAKIR FIRDHAUS BIN ASNI SXXXX930A (Phone) +65-96727474
Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)	- - - -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MOHAMMAD NIZAM BIN JAFFAR
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	NECK & BACK
Injured person in which vehicle?	SLU7523J
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 Formmust be completed by the Policyholder and/or the Authorised Oriver.
- 3. Information provided must be as truthful and accurate as possible. Any willul 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 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)

Lunderstand, acknowledge, agree and consent that:

- (a) My insurer, my w orkshop 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' law yers/faw 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
- (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/mell 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' law yers/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 sted outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

Driver's Signature (If driver is not the policyholder) / Data

Witnessed by Reg Personne!

Sketch Plan

A: SLU7523 J

B: GBC 688 B

C: YN 44 22 U

	es of the Accident	
	Refer to police report	
	/	
	/	
/_		
		97
-/-		
/		
1		

Declaration

IWe declare the foregoing particulars are true in every respect.

Pošcyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnal





















1 of 3 Report No. T/20210106/7047

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

REPORT OF A TRAFFIC ACCIDENT

Vida Panort No	Station Diary No.:

Date/Time Report Made: 06/01/2021 13:46			Vide Report No.: Station Diary i				
Informa	nt's Partice	ulars					
Name of Informant: MOHAMMAD NIZAM BIN JAFFAR			Address: 188B BEDOK NORTH STRE 462188	EET 4 #03-84 SINGAPORE			
ID Type / ID No.: NRIC NO / S7205131I			Contact No.: Home/Office:	Mobile: 88266710			
National SINGAP	ity: ORE CITIZ	EN	Email: ONE_NIZAM@YAHOO.COM.SG				
Sex: Male	Age:	Date of Birth: 25/02/1972	Type of Informant: Driver				
Race: Malay			Language: Institution / School Nar English				
Occupation: PHV Driver		***	Driving Licence Information: Class: Date of Expiry:				

	mation of the Acci			
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 06/01/2021 11:50	Type of Location: Straight Road
Location:				
CHOA CHU I	(ANG ROAD	Road Surface:		Road Speed Limit:
AACOMIC.		Dry		
Clear		Diy		
Clear Traffic Flow: One Way		Traffic Control: Traffic Light - Work		Traffic Volume: Moderate

Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBC688B	Lorry				Slightly Damaged	0
SLU7523J	Car				Slightly Damaged	0





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20210106/7047

CONTINUATION OF REPORT

Details of V	ehicle Invo	Ived				
Vehicle No.	Type	Make	Model	Color	Conditio	No of
YN4422U	Lorry				Slightly Damaged	0

Details of Perso				AT NAME			
Any Pedestrian I							
No. of Pedestrians Injured: NIL			Use of Pe	Use of Pedestrian Crossing: NA			
Driver					7000		
Name	MOHAMMAD NIZAM BIN JAFFAR		ID No	ο,	S7205131I		
Related Vehicle	SLU7523J (Car)			Cont	act No.	88266710	
Hospital/Clinic	NIL			Class Drivis Licer Expli	ng nce &	Class: NIL Date of Expiry: NIL	
Date	06/01/2021		Date	1	06/01	/2021	
	ted Medical Leave	03	Degree o	of	Sligh	t	

Brief Details

I was traveling along Chua Chu Kang road towards Upper Bukit Timah Road after Jalan Teck Whye Avenue. The traffic light is red and the vehicle infront and myself all stop stationary, suddenly I feel an big impact from the rear, I come down from my car and found a lorry (GBC688B) collided onto my vehicle. I'm involve in a 3 car chain collision accident, the last vehicle was a lorry (YN4422U) which pushed the lorry (GBC688B) towards my Vehicle which is on the front.

I feel pain at my neck and body area, i consult a doctor at Royal Care Medical Family Clinic and was given 3 days MC.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20210106/7047

CONTINUATION OF REPORT

Sketch Plai	1				
	-				
Informant is	not.	able	to	provide	sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 06/01/2021 13:46
Officer In Charge Of Case: TP / TPIB / BOON YEN KIAN Contact No.: 65476172	Classification Of Case:

NP168







T/20210106/7047

1 of 3

Report No. T/20210106/7047

Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

Date/Time 06/01/2021		de:	Vide Report No.:	Station Diary No.:			
Informant'	s Particul	ars					
Name of Informant: MOHAMMAD NIZAM BIN JAFFAR			Address: 188B BEDOK NORTH STREET 4 #03-84 SINGAPORE				
MOLIZIMIND MITAM DITA OVE 1 VICE			462188				
ID Type / ID No.: NRIC NO / S7205131I			Contact No.: Home/Office:	Mobile: 88266710			
Nationality: SINGAPORE CITIZEN			Email: ONE_NIZAM@YAHOO.COM.SG				
Sex: Male	Age: 48	Date of Birth: 25/02/1972	Type of Informant: Driver				
Race: Malay			Language: English	Institution / School Name:			
Occupation: PHV Driver			Driving Licence Information: Class:	Date of Expiry:			

General Informat	ion of the Accide	ent			
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 06/01/2021 11:50	0	Type of Location: Straight Road
Location:					
CHOA CHU KAN	IG ROAD				
Weather:		Road Surface:		Road	d Speed Limit:
Clear		Dry			
Traffic Flow:		Traffic Control:		Traff	fic Volume:
One Way		Traffic Light - Wor	king	Mod	erate
Type of Collision: Between Moving	: Vehicles - Head	To Rear			one conveyed by ulance:

Details of V			1 110-11	A STATE OF THE STA		
Vehicle No.	Туре	Make	Model	Color	Conditio	No of
GBC688B	Lorry				Slightly Damaged	0
SLU7523J	Car				Slightly Damaged	0





2 of 3

Report No. T/20210106/7047

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

CONTINUATION OF REPORT

Details of Ve	ehicle Invol	lved				
Vehicle No.	Туре	Make	Model	Color	Conditio	No of
YN4422U	Lorry				Slightly Damaged	0

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestrian	ns Injured: NIL		Use of Ped	lestriar	Cross	sing: NA
Driver				dien.		
Name	MOHAMMAD NIZAN	I BIN JAFFA	R	ID No		S7205131I
Related Vehicle	SLU7523J (Car)			Contact No. 88		88266710
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date	06/01/2021		Date		06/01	/2021
No. of Days gran	ted Medical Leave	03	Degree of		Slight	

Brief Details.

I was traveling along Chua Chu Kang road towards Upper Bukit Timah Road after Jalan Teck Whye Avenue. The traffic light is red and the vehicle infront and myself all stop stationary, suddenly I feel an big impact from the rear, I come down from my car and found a lorry (GBC688B) collided onto my vehicle. I'm involve in a 3 car chain collision accident, the last vehicle was a lorry (YN4422U) which pushed the lorry (GBC688B) towards my Vehicle which is on the front.

I feel pain at my neck and body area, i consult a doctor at Royal Care Medical Family Clinic and was given 3 days MC.





3 of 3

Report No. T/20210106/7047

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

CONTINUATION OF REPORT

Sketch	Dian
OKERNI	T Idii

Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 06/01/2021 13:46
Officer In Charge Of Case: TP / TPIB / BOON YEN KIAN Contact No.: 65476172	Classification Of Case:

Authentication Stamp

NP168

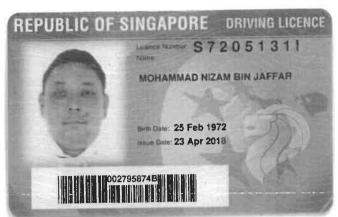
> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars		
Owner ID Type:	Сотрапу	
Owner ID: Vehicle Details	008C	
Vehicle No.:	SLU7523J	
Vehicle to be Exported:	No	
Intended Deregistration Date:	07 Jan 2021	
Vehicle Make:	TOYOTA	
Vehicle Model:	WISH 2.0 AUTO	
Primary Colour:	White	
Manufacturing Year:	2009	
Engine No.:	3ZRA415807	
Chassis No.:	JTDGJ20W205001472	
Maximum Power Output:	106.0 kW (142 bhp)	
Open Market Value:	\$22,003.00	
Original Registration Date:	24 Dec 2009	
First Registration Date:	24 Dec 2009	
Transfer Count:	4	
Actual ARF Paid: Intended PARF Rebate Details	\$22,003.00	
PARF Eligibility:	Forfeited	
PARF Eligibility Expiry Date:		
PARF Rebate Amount: Intended COE Rebate Details	\$0.00	
COE Expiry Date:	23 Dec 2029	
COE Category:	B - Car (1601cc & above)	
COE Period(Years):	10	
PQP Paid:	\$39,313.00	
COE Rebate Amount:	\$35,223.00	
Total Rebate Amount:	\$35,223.00	

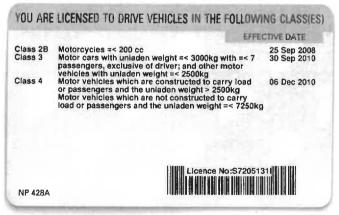
The information contained herein is correct as at 07 Jan 2021











This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type Description Issue Date

12 TAXI VL 04/05/2012
03 BUS VL 03/02/2012
04 BUS ATTENDANT 03/02/2012

LETTER OF AUTHORIZATION

То	AIG & TEAMWORK GARAGE PT	E LTD (Third	party insurance & Workshop)
	TRAIN HUB FACILITIES PTE LT		
Claimant	\$		
Dear Sirs,	ALLUE EAGUITIES DIE LID		SI 117523.I
	N HUB FACILITIES PTE LTD		01070200
	my/our repairer, Teamwork Go		for renair costs and/or rental and/or
act as my/our age	ent and proceed on behalf for me/us with	respect to my/our claim 7523.J	that was damage pursuant to the
	aim") for my/our vehicle no. SLU	occurred	at/along
accident	which	occurred	at atong
CHOA CH	IU KANG RD, SINGAPORE		
	e nos. SLU7523J & GBC688B	, 42 4+ 0 × ×	groupe, not the general of the business
involving venicio	e nos. CLO70200 & CDCCCD		
TANK benefit in	evocably assign absolutely to you that I/v	ve have authorized and	assigned all compensation monies
		due to me/us	to my/our repairer/solicitors
pertaining the	Garage Pte Ltd		ize you to forward and release all
	settlement cheques(s) due to	the settlement	to my/our repairer/solicitors
compensation	Garage Pte Ltd		above said accident whom I/we
	ssigned to collect the said compensation n	-	
aumorized and a	ssigned to confect the said compensation in	ionics.	
I/Wa further ack	mowledge that any settlement the worksh	non may reach on my/o	our behalf is on a without prejudice
	ission of liability basis insofar as the drive		
and without aum	assion of naturny basis mooth as the drive	·.	
I/Wa acknowled	ge that the Discharge Voucher applies onl	v to my/our property d	amage and will not affect any of the
	s claim(s) involved and/or uninsured losse		
	sed as an evidence to prejudice to any p		
	ing of the subject matter in the action.		.,
losses ciaim aris	ing of the subject matter in the detroit.		CACILITIA
Thank you.			3
Illank you.			201618008C) 77
Dated this07	day of 01	(month) 2021 (year)
	ner vehicle (claimant):		
			TELTO
Name of owner	of vehicle (claimant): TRAIN HU	YP.TWMITHTEØ.T	الماريخ الماري
NRIC Number (claimant): 201618008C		



TEAMWORK GARAGE PTE LTD

BLK 53 UBI AVE 1 #01-23/24 PAYA UBI INDUSTRIAL PARK SINGAPORE 408934

(TEL) (65) 6844 2475 (FAX) (65) 6844 2474

(E-MAIL) claims@teamworkgarage.com

UEN No. 201015366H GST Reg No: 201015366H

Bill To:

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

Tax Invoice

Invoice number: TI-8219

Date: 21/01/2021

Terms: C.O.D.

Vehicle number: SLU7523J

Make / Model: TOYOTA WISH

	Make / Model	1010111 11011
Description	1	Amount (S\$)
ACCIDENT INVOLVING SLU7523J / GBC688B ON 03.01.2021 ALONG CHOA CHU KANG RD SINGAPORE		
NCLUSIVE OF SUPPLYING PARTS,LABOUR, PANEL BEATING A	ND SPRAY PAINTING	
UMP SUM BILLING		\$7,000.00
Thank you for your business and have	e a nice day !	
	Subtotal	\$7,000.0
Reference: 2101-11		\$7,000. \$ 490. (
Cheque payment should be issued in favour to TEAMWORK AYNOW UEN: 201015366H	Total Inc GST 7%	\$7,490.0 \$7,490.0
* Please ensure that your vehicle is of good condition upon t		\$1,490.0
	Balance Due	\$7,490.0
. & O. E	Dalatice Due	\$7,430.0



CUSTOMER'S SIGNATURE

> Back to OneMotoring

Land Transport Authority

Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time :

07 Jan 2021 / 11:10:16

Receipt Date/Time: 07 Jan 2021 / 11:10:16

Tax Invoice/Receipt

Receipt No.: ITNET-00000-210107-001107

Previous Receipt No. :

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
NCE PTE. LTD.			
	7.00	0.49	7.49
Sub-Total	7.00	0.49	7.49
E SINGAPORE LTD Sub-Total Total Before Rounding Rounding Difference	7.00 7.00 14.00	0.49 0.49 0.98	7.49 7.49 14.98 0.03 14.95
rotal Amount rayable			
Paid By			
512972XXXXXX5903	eNETS Credit Car	rd	14.95
Total			14.95
Cash Change			0.00
Tendered Amount			14.95
Excess Refundable Amount			0.00
	Sub-Total Total Before Rounding Rounding Difference Total Amount Payable Paid By 512972XXXXXX5903 Total Cash Change Tendered Amount	Before GST (S\$) NCE PTE. LTD. 7.00 Sub-Total 7.00 Sub-Total 7.00 Sub-Total 7.00 Sub-Total 7.00 Total Before Rounding Rounding Difference Total Amount Payable Paid By 512972XXXXXXX5903 Total Cash Change Tendered Amount	Before GST (\$\$)

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.