

FORM C

**AGREEMENT ON APPLICANT CREDITOR'S COSTS &  
DISBURSEMENTS  
OF BANKRUPTCY PROCEEDINGS**

To: The Official Assignee, Singapore

**BANKRUPTCY NO.** :  
**NAME OF INSOLVENT PERSON** :

<b>PART I PROPOSAL BY APPLICANT CREDITOR</b>		
<b>SERVICE OF APPLICATION</b> (Personal/Substituted (Posting/Advertisement)	<b>(A) FOR BANKRUPTCY APPLICATIONS MADE ON OR AFTER 01 AUG 2016</b>	<b>(B) FOR BANKRUPTCY APPLICATIONS MADE PRIOR TO 01 AUG 2016</b>
<b>COSTS</b> (Personal Service of Application)*	\$1,200	\$700
(Substituted Service of Application)*	\$1,550	\$750
(Service out of Jurisdiction)*	\$1,900	\$800
<b>DISBURSEMENTS</b> (Please attach a list of disbursements if the amount claimed exceeds \$500.00)	\$	\$
<b>REFUND OF DEPOSIT</b>	\$1,850	\$1,600
<b>TOTAL</b>	\$	\$

\*Delete where applicable

Table 1: Proposal by Applicant Creditor

Dated this                      day of                      20

\_\_\_\_\_  
Name & Signature of Applicant Creditor/Solicitor  
Address of Applicant Creditor /Solicitor  
Tel. No.  
Fax No.  
Ref. No.

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**BANKRUPTCY NO.** :  
**NAME OF INSOLVENT PERSON** :

**PART II PROPOSAL BY OFFICIAL ASSIGNEE**

We agree with your proposal on costs and disbursements in Part I. Payment will be made to you when there are sufficient funds in the bankrupt's estate.

We propose \$\_\_\_\_\_ as disbursements. If you disagree, please proceed to file your Bill of Costs for taxation within the next 14 days.

We disagree with your proposal on costs and disbursements in Part I. Please proceed to file your Bill of Costs for taxation within the next 14 days.

Dated this            day of            20

\_\_\_\_\_  
Name & Signature  
for OFFICIAL ASSIGNEE

**PART III REPLY FROM APPLICANT CREDITOR**

I/We agree with your proposal on costs and disbursements in Part II.

I/We disagree with your proposal on costs and disbursements in Part II. We will file the Bill of Costs for taxation within the next 14 days.

Dated this            day of            20

\_\_\_\_\_  
Name & Signature of Applicant Creditor /Solicitor  
Address of Applicant Creditor /Solicitor  
Tel. No.  
Fax No.  
Ref. No.