


Borneo Motors

Borneo Motors (Singapore) Pte Ltd
 Inchcape Bodycare Centre
 Level 4, Inchcape Centre
 2 Pandan Crescent
 Singapore 128462
 Tel: +65 6631 1855/1500
 Fax: +65 6872 7260
www.borneomotors.com.sg

Our Ref: BMS2024/12/PD1327/DS (TP)

Your Ref: III-SGT8571C

31/12/2024

BY EMAIL (INS COPY)

M/S.INDIA INTERNATIONAL INSURANCE PTE LTD C/O LKK AUTO CONSULTANTS PTE LTD

Attn : Officer In-Charge

Dept : Motor Claims

RE : ACCIDENT INVOLVING SNS5526B AND SGT8571C ON 08/11/2024

Dear Officer,

We refer to the above captioned.

The accident was caused by the negligence of your insured and as a result, our client has incurred the following losses:

A. Repair Cost - \$3,852.86	B. LTA Search - \$27.25
C. Excess -	D. Loss of Use - \$240.00(\$60x4days)
E. Rental -	F. Others -
G. Medical Claims -	Total Claim - \$4,120.11
H. -Undertake By Claimant <input type="checkbox"/>	

We would appreciate if you could revert to us with an offer to settlement within **8 working weeks** as required under NIMA Protocol.

Enclosed are the following documents for your kind perusal:

(✓) Original Tax Invoice	(X) Discharge Voucher
(X) Car Rental Invoice/Agreement	(X) Original Photograph X _____
(✓) GIAS/Police Report/s	(X) Original/Photocopy Survey
(✓) Certificate of Insurance	(✓) LTA Search Fees
(✓) Letter of Authority	(X) Medical Receipt

*Cheque is to be made payable to **BORNEO MOTORS (SINGAPORE) PTE LTD** & mail it to, Inchcape Bodycare Centre Level 4, Inchcape Centre, 2 Pandan Crescent, Singapore 128462, Attn: TPR Department*

Yours faithfully,

TPR Team

Claims Service Department

F:68727260 E: claimstatusenquiry@borneomotors.com.sg

(As this is a computer generated letter, no signature is required.)



Borneo Motors

Inchcape

Co. Reg No. : 196700086Z
GST Reg No. : MR-8500000-9
No. 2 PANDAN CRESCENT
SINGAPORE 128462, Tel no.: 6631 1188




TOYOTA

TAX INVOICE

Account Details	Account No.	Customer Details
India International Insurance P L 64 Cecil Street #06-02 IOB Building Singapore 049711 Attn: Motor Claims Dept	S1000006 / ICIII1	Mdm Ivy Lam Bee Lian (Lan Meilian) 14A Lorong 7 Toa Payoh #25-233 Singapore 311014 Mobile: 97304413
	Document No. 38084976	
	Document Date 30/12/2024	

Year	Model	Variant	Reg. Date	Reg. No.	Kilometers	Wip No.	Order No. / Remarks
2024	ZRE210R	GEXGPZ S3	20/08/2024	SNS5526B	981	34604	72/DS/SNS5526B
Chassis No.	Engine No.	Terms	SA / Counter	Vehicle In	Collected On		
MR2BE3BE800030232	1ZR3A89375	60	Thomas Pang W T	11/12/2024 11.39	30/12/2024 9.29		

L	Cd	Job/Parts Description	Qty	Unit Price	Disc %	Amount
1	Z	BP-SUNDRY-AI TP INS:INDIA INTERNATIONAL INSURANCE TP VEH:SGT8571C DATE OF ACC:08.11.2024 BY:LKK-TAUFIKH @ 11.12.2024 03 WORKING DAYS				50.00
2	B	BP-LAB2 DRILL HOLE AND INSTALL REVERSE SENSOR	BP29			198.00
3	B	BP-LAB2 CHECK WIRING SYSTEM	BP29			134.64
4	B	BP-ECU2 TO RESET ECU AND REPROGRAMME	BP63			198.00
5	B	BP-MECH2 TO CONDUCT ADJUSTMENT ON BLIND SPOT SENS OR	BP63			198.00
6	B	BP-LAB2 REPLACE ACC DAMAGED PARTS	BP29			792.00
7	B	BP-RES2 REPLACE ACC DAMAGED PARTS	BP20			656.00
8	S	PSP PER PANE LABOUR FOR PLATINUM SHINEPRO & SHINE PER PANEL APPLICATION	0619			91.59
9	1	S52159-0Z961 COVER, RR BUMPER L/C	1.00	824.30		824.30
10	2	S52462-02340 PAD, RR BUMPER, RH	2.00	28.00		56.00
11	3	S52161-0K040 PIECE, RR BUMPER	10.00	5.80		58.00
12	4	S81920-02360 REFLECTOR ASSY, REFL	1.00	54.10		54.10
13	5	SPC507-12005 2A BACK SENSOR (1K3, CELESTITE GR	1.00	224.10		224.10

For & on behalf of	Customer's Signature	Charge Summary	Total
Borneo Motors (Singapore) Pte Ltd			3,534.73
	Please acknowledge receipt of vehicle	Parts 1,216.50	GST 9.00% 318.13
		Labour 2,226.64	
		Sublet 91.59	Less 0.00
		Lubrication/Fluid 0.00	
		Others 0.00	
		Amount Due	3,852.86

Customer Copy

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 Actual 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 First Submission	08/11/2024 17:58 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	08/11/2024 13:30 (SGT)
Exact Location of Accident	Sin Ming Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNS5526B
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	IVY LAM BEE LIAN (LAN MEILIAN)
NRIC No	SXXXX215A
Email Address	ivybl@hotmail.com
Mobile Phone No	(Phone) +65-97304413
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
Variant	Altis
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1598
Vehicle Fuel	Petrol
First Registration Date	20/08/2024
Chassis no	MR2BE3BE800030232
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7240139677

DRIVER

Name of Driver	IVY LAM BEE LIAN (LAN MEILIAN)
NRIC No	SXXXX215A
Date Of Birth	04/03/1978
Occupation	Indoor
Driving Pass Date	29/04/2003
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	21 YEARS AND 7 MONTHS
Gender	Female
Mobile Number	(Phone) +65-97304413
Alt. Phone Number	-
Email Address	ivybl@hotmail.com
Address	14A LORONG 7 TOA PAYOH, #25-233
Address complement	-
Postcode	311014
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
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	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO THE ATTACHED STATEMENT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGT8571C
Vehicle Manufacturer	Toyota

Vehicle Model	Corolla
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire
Name of Driver	LOW CHWEE LENG
NRIC No	SXXXX983A
Contact Number	(Phone) +65-93985557
Address	BLK 811 FRENCH ROAD, #04-34
Address complement	-
Postcode	200811
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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)

I understand, acknowledge, agree and consent that:

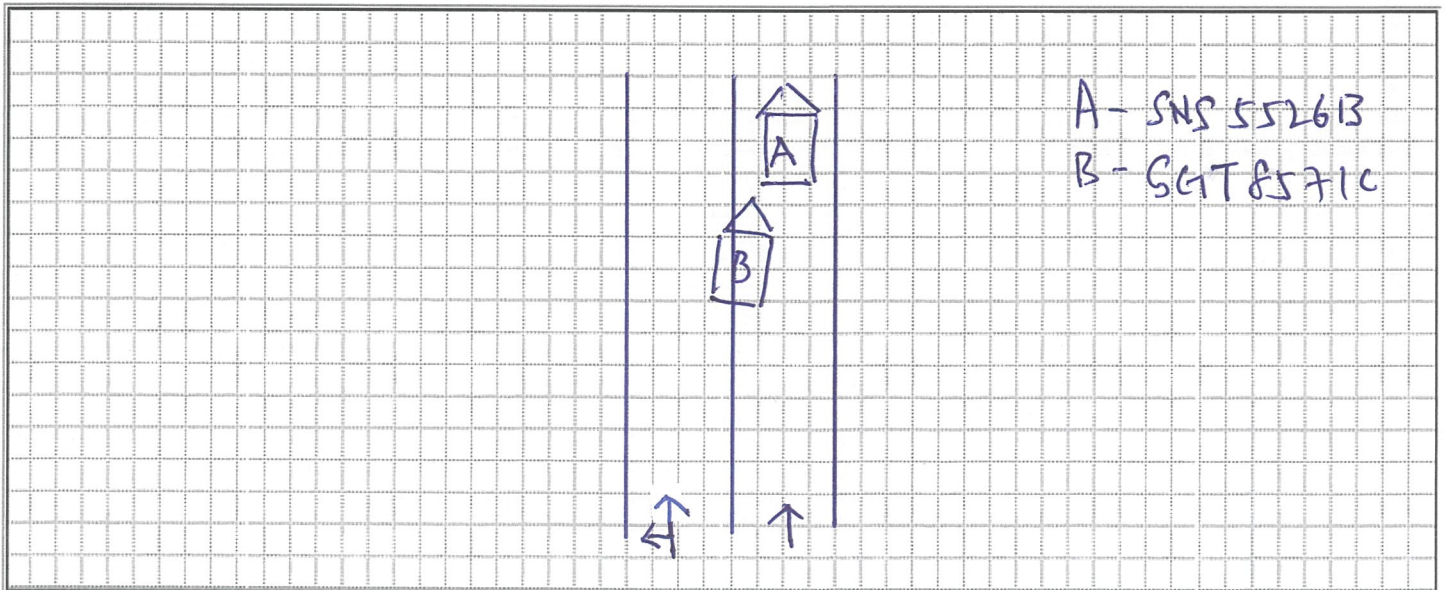
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan



Sin Ming Road.

Describe Circumstance of the Accident

I was driving along Sin Ming Road. A construction worker stopped my car to allow a cement truck to turn out from Jin Ming Quay. After I stopped my car, I heard a loud bang. A car behind collided with my car.

Declaration

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



Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)



CERTIFICATE OF INSURANCE

TOYOTA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Ivy Lam Bee Lian (Lan Meilian)
Period of Insurance : 20 Aug 2024 To 19 Aug 2026
Engine/Motor No. : 1ZR3A89375
Chassis No. : MR2BE3BE8000232

Vehicle No. : SNS5526B
Policy No. : 7240139677
Endorsement No. :
Issued Date : 13 Aug 2024 15:44

ABOUT THE COVER

Make/Model : TOYOTA COROLLA ALTIS 1.6
Engine Capacity/Tonnage : 1,598.00 CC
Driver Restriction : NA
Sum Insured : Market Value
Off Peak Car : No
First Year of Registration : 2024
Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive* :

- a) The Policyholder
b) Any other person who is driving on the Policyholder's order or with his/her permission.
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of S\$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition
Mileage Condition : Unlimited Mileage

Limitation as to use* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960, Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

EXCESS

Section 1

Fire - \$0 Own Damage - \$600 Theft - \$0 Theft Outside Singapore Cover - \$0 Flood Cover - \$600

Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

Ivy Lam Bee Lian (Lan Meilian) - \$600 (Own Damage), \$600 (Flood Cover)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Toyota Bodycare Centre (For accident repair & accident reporting) Add: 2 Pandan Crescent Singapore 128462 Tel: 6631 1188
2. Toyota Bodycare Centre (For accident repair & accident reporting) Add: 17 Ubi Road 4 Singapore 408611 Tel: 6631 1688

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.sg.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HONG LEONG FINANCE LTD

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960, Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504667225

INCHCAPE AUTO TOYOTA - BSTL047

33 LENG KEE ROAD

SINGAPORE 159102

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

Jing Lin Alvin Loo

LETTER OF AUTHORITY

ACCIDENT INVOLVING SNS 5526B and SGT B571C on 8/11/2024
Own vehicle's number Other vehicle's number Date of accident

along Sin Ming Road
Accident location

BY THE LETTER OF AUTHORITY, I/we, Ivy Lam Bee Lian (Lan Mei Lian) & Soxxx 215
Name of Policy Holder & (IC/Passport/Company Registration) number

of 14A Lorong 7 Toa Payoh #25-213 S(311014)
Address of Policy Holder

owner of Vehicle Registration No. SNS 5526B hereby appoint **BORNEO MOTORS (SINGAPORE) PTE LTD** (hereinafter refers to **BMS**), a company incorporated in Singapore and having its registered office at 33 Leng Kee Road, Singapore 159102, to do all or any of the following:

1. To submit, resolve and make any claims which *I/we may have against the other *party/parties to the Accident and under the insurance *policy/policies taken up by such *party/parties or **alternatively** under Insurance Policy number _____ taken up by *me/us and pay the compulsory excess in respect of the cost of repairs suffered by *me/us arising from the Accident (loss and damage).
2. To collect payment(s) due in respect of any such claim(s) for the loss and damage, such payment to be made by way of Cheque in favour of **BORNEO MOTORS (SINGAPORE) PTE LTD** and give a valid receipt and discharge therefore.
3. For any of the purpose aforesaid, to execute, sign and deliver all documents whatsoever in relation thereto.
4. Generally do all such acts as it shall deem necessary for the purpose of settling such claim.

*I/We hereby declare that all acts, instruments and documents done by virtue of this letter of authority on *my/our behalf shall be as good valid and effectual to all intents and purposes whatsoever as if the same had been done or executed by *me/us in *my/our own proper person(s) and *I/we hereby ratify and confirm, all acts, instruments and documents done or executed by virtue of the authority and powers hereby conferred.

*I/We hereby further declare that the letter of authority hereby conferred shall remain irrevocable.

*I/We further confirm that the acceptance by **BMS** of the settlement amount in respect of such constitute the full discharge of *my/our claim(s) in respect of such loss and damage.

IN WITNESS WHEREOF, *I/we have hereunto to set *my/our hand and sign this _____ of the month _____ Year 20 24.

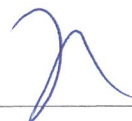
Signed & Delivered By:



(To be sign by the policy holder only)

**Please stamp the company chop for vehicle registered under a company's name

Witness By:



Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 08 Nov 2024 / 18:03:03

Receipt Date/Time : 08 Nov 2024 / 18:02:59

Tax Invoice/Receipt

Receipt No. : ITNET-00000-241108-003919

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 - SGT8571C As at 08 Nov 2024/13:30:00 Insurance Co: INDIA INT'L INS PTE LTD				
1	Insurance Enquiry - SGT8571C			
	Enquiry Fee	25.00	2.25	27.25
	20241108180150093431			
	Sub-Total	25.00	2.25	27.25
	Total Before Rounding	25.00	2.25	27.25
	Rounding Difference			0.00
	Total Amount Payable			27.25
Paid By				
	552592XXXXXX3306	eNETS Credit Card		27.25
	Total			27.25
	Cash Change			0.00
	Tendered Amount			27.25
	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.