



**Borneo Motors**

Co Reg No: 196700086Z

**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](http://www.borneomotors.com.sg)

**Our Ref: BMS2021/03/PD1007/DS(FC)**

**Your Ref: LONPAC-SLR2236L**

**12 Mar 2021**

**BY HAND (INS COPY)**

**M/S. LONPAC INSURANCE BERHAD C/O LKK AUTO CONSULTANTS PTE LTD**

Attn : Officer In-Charge

Dept : Motor Claims

**RE : ACCIDENT INVOLVING SMD497A AND SLR2236L ON 22 Oct 2020**

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 - \$8,686.24	B. LTA Search - \$2.00
C. Excess -	D. Loss of Use - \$500.00 (\$100x5days)
E. Loss of Rental -	F. Others -
G. Medical Claims - -Undertake By Claimant <input type="checkbox"/>	<b>Total Claim - \$9,188.24</b>

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 | (✓) 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](mailto: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
Lonpac Insurance Berhad 100 Beach Road #19-00 Shaw Tower Singapore 189702 Attn: Ms Lily Koh/Mr Chia	S1000007 / ICLPI1	Dr Yeo Song Huat 687D Choa Chu Kang Drive #20-374 Singapore 684687  Mobile: 93550223
	Document No. 38053816	
	Document Date 22/01/2021	

Year	Model	Variant	Reg. Date	Reg. No.	Kilometers	Wip No.	Order No. / Remarks
2018	ASV51R	JETEHT E7	31/07/2018	SMD0497A	39668	58181	65/DS/SMD0497A

Chassis No.	Engine No.	Terms	SA / Counter	Vehicle In	Collected On
MR053DK5100113474	6ARP424020	60	Wong Mun Keat	14/12/2020 10.06	22/01/2021 14.47

L	Cd	Job/Parts Description	Qty	Unit Price	Disc %	Amount
9	B	BP-LAB2 REMOVE ALL NECESSARY DAMAGED PARTS TO REPLACE, REPAIR, STRAIGHTEN REAR BUMPER, REAR BOOT, TAIL-LAMP PANEL AND AFFECTED PORTION OF CAR. BP31				2160.00
10	B	BP-RES2 SPRAY PAINT ON DAMAGED AFFECTED PORTION OF CAR. *				1770.00
11	1	S52159-0X902 COVER, RR BUMPER L/C	1.00	657.60		657.60
12	2	S52023-06081 REINFORCEMENT,RR	1.00	399.50		399.50
13	3	S52575-06131 RETAINER,RR BUMPER R	1.00	110.50		110.50
14	4	S52576-06131 RETAINER,RR BUMPER L	1.00	110.50		110.50
15	5	T90975-02063 EMBLEM,LUGGAGE22	1.00	50.70		50.70
16	6	S75442-06230 PALTE,LUGGAGE	1.00	45.70		45.70
17	7	S75443-06810 PLATE,LUGGAGE	1.00	35.60		35.60
18	8	S75443-06B70 PLATE, LUGGAGE COMPT	1.00	41.00		41.00
19	9	S64401-06820 PANEL,LUGGAGE DR	1.00	1143.70		1143.70

For & on behalf of	Customer's Signature	Charge Summary	Total
Borneo Motors (Singapore) Pte Ltd	Please acknowledge receipt of vehicle	Parts 2,594.80 Labour 5,160.00 Sublet 363.18 Lubrication/Fluid 0.00 Others 0.00	8,117.98 GST 7.00% 568.26 Less 0.00 Amount Due 8,686.24

Company Copy



# 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

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Chassis No.		Engine No.	Terms	SA / Counter	Vehicle In		Collected On
MR053DK5100113474		6ARP424020	60	Wong Mun Keat	14/12/2020	10.06	22/01/2021 14.47
L	Cd	Job/Parts Description	Qty	Unit Price	Disc %	Amount	
1	Z	BP-SUNDRY SUNDRIES T/P INS. : LONPAC INS. T/P VEH. : SLR2236L ACC DATE : 22.10.20 BY : TAUFIK (LKK)	*				50.00
2	Z	BP-SLANT SUPPLY SEALANT (NETT)	*				100.00
3	B	BP-LAB2 CHK REAR WIRING SYSTEM AND CONDUCT WATER TEST.	BP31				180.00
4	S	BP-SUBLET RESET AND REPROGRAMME ECU.	0742				180.00
5	B	BP-LAB2 DRILL HOLE TO INSTALL REVERSE SENSOR.	BP31				180.00
6	B	BP-LAB2 REMOVE REAR BOOT COMPONENTS TO TRANSFER ONTO NEW BOOT.	BP31				360.00
7	B	BP-LAB2 REMOVE REAR BOOT INTERIOR TO ASSIST REPAIR.	BP31				360.00
8	S	PSP PER PANE LABOUR FOR PLATINUM SHINEPRO & SHINE PER PANEL APPLICATION ON REAR BUMPER AND REAR BOOT	0619				183.18
For & on behalf of Borneo Motors (Singapore) Pte Ltd			Customer's Signature		Charge Summary		Total
			Please acknowledge receipt of vehicle		Parts Labour Sublet Lubrication/Fluid Others		Less
							Amount Due

Company 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 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	23/10/2020 16:12
Date Of Accident	22/10/2020 19:10
Exact Location Of Accident	ALONG WHITLEY RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMD497A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	YEO SONG HUAT
NRIC No	SXXXX017C
Email Address	SHIANGYEO@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-96536018
Alternative Phone No	OFFICE-96536018

### Vehicle Particulars

Manufacturer	TOYOTA
Model	CAMRY 2.0 AUTO

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? NO

If No, Please state action to be taken THIRD PARTY

Vehicle Category PRIVATE CAR

### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA543682/1
Cover Note Number	31/07/2020-30/07/2021

### Driver

Name of Driver	YEO YU KHENG
NRIC No	SXXXX091F
Date Of Birth	20/03/1998
Occupation	INDOOR
Date Of Driving Pass	13/11/2018
Driving Experience	1 YEAR AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-85110974
Fax Number	
Contact Number	
EMail Address	YEOYUKHENG@GMAIL.COM

Address	BLK 687D CHOA CHU KANG DRIVE #20-374
Postcode	684687
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### 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 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)	1

#### 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

REFER TO THE SKETCH PLAN

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLR2236L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ELLESHA
NRIC/Passport Number	
Contact Number	91384556
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

# Accident Sketch Plan Pg. 2

## SKETCH PLAN

A - SMD 497A  
B - SLR 2236C

Whitley Rd

A B

AET Tonglin Ck

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Car in front emergency break. I emergency break. Car behind did not break & hit my car.

### Important:

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.

<input type="checkbox"/>	- Reporting Only
<input type="checkbox"/>	- Claim OD
<input type="checkbox"/>	- Claim TP
<input checked="" type="checkbox"/>	- Claim OD/ TP at other workshop

### DECLARATION

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

Policyholder's signature

Date & Time

23/10/2020  
2:18pm

Driver's Signature

(if driver not the policyholder)

Date & Time 23/10/2020

2:18pm

Reporting Centre Personnel's Signature

Name:

Nric/Fin No.

SKETCH PLAN

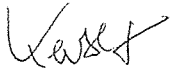
IMPORTANT NOTICE

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:

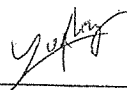
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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


23/10/2020  
2:15 pm

GIA REC SketchPlanForm\_V3

  
Driver's Signature

(If driver is not the policyholder)

Date & Time: 23/10/2020  
2:15 pm

  
Reporting Centre Personnel's Signature

Name: P. Subramaniam . Arun  
NRIC/FIN No.:



redefining / insurance

AXA Insurance Pte Ltd  
1800 330 4388 (Within Singapore)  
(65) 6880 4388 (International)  
(65) 6880 4740  
customer.care@axa.com.sg  
www.axa.com.sg

date  
10/06/2020

policy number  
VA1 / GA543682

account number  
19173

## Certificate of Insurance

Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) Motor Vehicles (Third Party Risks and Compensation) Rules, 1960 Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third Party Risks) Rules, 1969 (Malaysia)

### Policy details

Policyholder name	YEO SONG HUAT	Certificate number	GA543682 / 1
Cover	Comprehensive	Chassis number	MR053DKS100113474
Plan name	Toyota Prestige Max	Engine number	GARF424020
NCD applicable	20%		
Vehicle registration number	SMD497A		
Period of insurance	from 31/07/2020 to 30/07/2021 (both dates inclusive)		
Finance loan company	Nil		

### Authorized Drivers

- (a) The Policyholder  
(b) Any Named Driver as stated in the Policy  
(c) Any person who is driving on the Policyholder's order or with their permission  
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

### Limitation as to use\*

- Use of the motor vehicle is connected to the Policyholder's business
- Use for the carriage of passengers (besides commercial hire or reward) in connection with the Policyholder's business
- Use for social, domestic, and personal purposes

The Policy does not cover:

- Use for commercial hire or reward, or for racing, pace-making, reliability trial, or speed testing
- Use while drawing a trailer except for the towing of a disabled person's mechanically propelled vehicle

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia); are not to be included under these headings.

EXCESS	Basic Own Damage Excess	SGD 500.00
	Windscreen Excess	Not Applicable

### Young/inexperienced driver excess

An additional excess of \$2500 (to be added to any excess imposed under the Policy) whilst the Insured MotorCar is being driven by any driver aged below 23 years old and/or has been issued a valid driving license to drive in Singapore for the relevant class of vehicle for less than one year

Young and/or inexperienced driver shall mean any person who

- Is less than 23 years old and/or
- Has been issued with a valid driving license to drive in Singapore for the relevant class of vehicle for less than 1 year

### Additional clauses & endorsements to your policy

Nil

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

AXA Insurance Pte Ltd

AXA Insurance Pte Ltd (199903512M)  
8 Shenton Way, #24-01, AXA Tower  
Singapore 068811  
Customer Centre, #B1-01



## LETTER OF AUTHORITY

ACCIDENT INVOLVING SMD497A and SLR2236L on 22.10.20  
Own vehicle's number Other vehicle's number Date of accident

along Whitley Road  
Accident location

BY THE LETTER OF AUTHORITY, I/we, Yeo Song Huat  
Name of Policy Holder & (IC/Passport/Company Registration) number

of 687D Choa Chu Kang Drive #20-374 (S) 684687  
Address of Policy Holder

owner of Vehicle Registration No. SMD497A 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 18 of the month Dec Year 20 20

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:



Francis Cher  
Motor Claims Assessor  
Borneo Motors (S) Pte Ltd

**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-20-142899

Date of Request: 18/11/2020

Your Ref No: Online Purchase

Borneo Motors (S) Pte Ltd  
33 Leng Kee Road  
Singapore 159096

Dear Sir/Madam,

Enquiry Date 18/11/2020  
Enquiry By Chng Khay Yin  
TP Vehicle No. SLR2236L  
Accident Date 22/10/2020

**Enquiry Result**

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
SLR2236L	Lonpac Insurance Bhd	17/02/2020-16/02/2021	+65 62507388

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-20-142899

Date of Request: 18/11/2020

Your Ref No: Online Purchase

Borneo Motors (S) Pte Ltd  
33 Leng Kee Road  
Singapore 159096

Dear Sir/Madam,

Enquiry Date 18/11/2020  
Enquiry By Chng Khay Yin  
TP Vehicle No. SLR2236L  
Accident Date 22/10/2020

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.

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For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque