

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

Our Ref: BMS2022/06/PD0575 DS(RY)

Your Ref: CC4/LPC22003580/ga3

22 Jun 2022

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 SMV6753B AND GBF5447G ON 18 Apr 2022**

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 - \$12,978.97	B. LTA Search - \$2.00
C. Excess -	D. Loss of Use - \$700.00(\$100x7days)
E. Loss of Rental -	F. Others -
G. Medical Claims - -Undertake By Claimant <input type="checkbox"/>	<b>Total Claim - \$13,680.97</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 | (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](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  
17 UBI ROAD 4  
SINGAPORE 408611, 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 / ICLP11	Ms Teh Poh Hoon 409A Northshore Drive #03-246 Singapore 821409  Mobile: 96556606	
		Document No. 39012692		
		Document Date 02/06/2022		

Year	Model	Variant	Reg. Date	Reg. No.	Kilometers	Wip No.	Order No. / Remarks
2019	ACR50R	GFXSK E1	15/10/2020	SMV6753B	16270	21743	69DS/SMV6753B

Chassis No.	Engine No.	Terms	SA / Counter	Vehicle In	Collected On
JTEGD56M607173969	2AZ1B14921	60	Raymond Seah L M	04/05/2022 12.22	10/05/2022 10.55

L	Cd	Job/Parts Description	Qty	Unit Price	Disc %	Amount
25	3	T90541-10042 CUSHION	2.00	8.00		16.00
26	4	T75441-28730 PLATE, LUGGAGE COMPT	1.00	46.80		46.80
27	5	T75441-28720 PLATE, BACK DOOR	1.00	60.70		60.70
28	6	T90975-02064 EMBLEM, SYMBOL	1.00	72.20		72.20

For & on behalf of	Customer's Signature	Charge Summary	Total
Borneo Motors (Singapore) Pte Ltd	Please acknowledge receipt of vehicle  	Parts 6,582.30	12,129.88
		Labour 4,784.40	GST 7.00% 849.09
		Sublet 763.18	Less 0.00
		Lubrication/Fluid 0.00	
		Others 0.00	Amount Due 12,978.97

Company Copy



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L	Cd	Job/Parts Description	Qty	Unit Price	Disc %	Amount
9	B	BP-LAB2 R/I REAR CARPET, TRIMMING, REAR SEATS AND OTHER ATTACHMENT TO FACILITATE REPAIRS.	*			360.00
10	B	BP-LAB2 TO REPLACE REAR ACCIDENT DAMAGE PARTS. STRAIGHTEN/REALIGN ALL OTHER AFFECTED AREAS.	*			1440.00
11	B	BP-RES2 TO SPRAY PAINT ON REAR ACCIDENT AFFECTED AREAS.	*			1770.00
12	S	PSP PER PANE LABOUR FOR PLATINUM SHINEPRO & SHINE PER PANEL APPLICATION	0619			183.18
13	1	T81581-28300 LENS & BODY, RR	1.00	784.90		784.90
14	2	T81591-28300 LENS & BODY, RR	1.00	784.90		784.90
15	3	T76801-28460 GARNISH SUB-ASSY,	1.00	357.50		357.50
16	4	T52159-28959 COVER, RR BUMPER	1.00	632.00		632.00
17	5	S52161-0K040 PIECE, RR BUMPER	4.00	4.30		17.20
18	6	T52156-28050 SUPPORT, RR BUMPER	1.00	61.20		61.20
19	7	T52156-28060 SUPPORT, RR BUMPER	1.00	42.90		42.90
20	8	T68105-28680 GLASS SUB-ASSY, BACK	1.00	1368.60		1368.60
21	9	T21000-20 SIKA 182010 SIKA TACK GO! (BLA	2.00	108.00		216.00
22	0	T21000-22 SIKA 207. G+P ADHESIVE PRIMER	1.00	200.00		200.00
23	1	T67005-28D10 PANEL SUB-ASSY, BACK	1.00	1858.00		1858.00
24	2	T81920-13022 REFLECTOR ASSY,	1.00	63.40		63.40

For & on behalf of	Customer's Signature	Charge Summary	Total
Borneo Motors (Singapore) Pte Ltd	Please acknowledge receipt of vehicle	Parts Labour Sublet Lubrication/Fluid Others	
			Less
			Amount Due

Company Copy



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L	Cd	Job/Parts Description	Qty	Unit Price	Disc %	Amount
1	Z	BP-SUNDRY-AI SUNDRIES TP VEH:GBF5447G ACC DATE:18/04/2022 TP INS:LONPAC NO OF REPAIR DAYS:06 DATE-IN:01/05/2022 DATE SURVEY:04/05/2022 BY:LKK-ADRIAN AUTHORISED ON:20/04/2022 -TP/DS CLAIM				30.00
2	Z	BP-SLANT SUPPLY SEALANT (NETT) FOR REAR TAILGATE				60.00
3	S	BP-SUBLET TO RESET ECU AND REPROGRAMME	0742			180.00
4	S	BP-SUBLET TO SUPPLY AND INSTALL REAR WINDSCREEN 3M SOLAR FILM.	0741			400.00
5	B	BP-WS R/I REAR WINDSCREEN TO FACILITATE REPAIRS.	*			462.00
6	B	BP-LAB2 TO CHECK WIRING AND LIGHTING. TO WATER TEST FOR LEAK.	*			122.40
7	B	BP-LAB2 R/I REAR REVERSE SENSOR TO FACILITATE REPAIRS AND TEST FUNCTION.	*			180.00
8	B	BP-LAB2 TO TRANSFER REAR TAILGATE BOARD, TOP SPOILER,REAR CAMERA,MECHANISM AND OTHER ATTACHMENT TO NEW PANEL.	*			360.00

For & on behalf of	Customer's Signature	Charge Summary	Total
Borneo Motors (Singapore) Pte Ltd	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 Submission	18/04/2022 16:37 (SGT)
Date of Accident	18/04/2022 09:25 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE BEFORE AMK AVE 5 EXIT / BETWEEN TPE
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMV6753B
-----------------------------	----------

### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TEH POH HOON
NRIC No	SXXXX027I
Email Address	TEH.ANDREY@GMAIL.COM
Mobile Phone No	(Phone) +65-96556606
Alternative Phone No	(Home) +65-96556606

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Previa
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?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	2500

### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2070145995-01
Cover Note Number	-

### DRIVER

Name of Driver	TEH POH HOON
NRIC No	SXXXX027I

Date Of Birth	17/09/1965
Occupation	Indoor
Date Of Driving Pass	16/12/1996
Driving experience	25 YEARS AND 4 MONTHS
Gender	Female
Mobile Number	(Phone) +65-96556606
Alt. Phone Number	(Home) +65-96556606
Email Address	TEH.ANDREY@GMAIL.COM
Address	BLK 409A NORTHSHORE DRIVE #03-246
Address complement	-
Postcode	821409
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	AFTER RAIN
Road Surface	Wet

#### 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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	TAN CHYE YOK
Gender	Female

#### 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

PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEMENT.

#### ATTACHMENT(S)

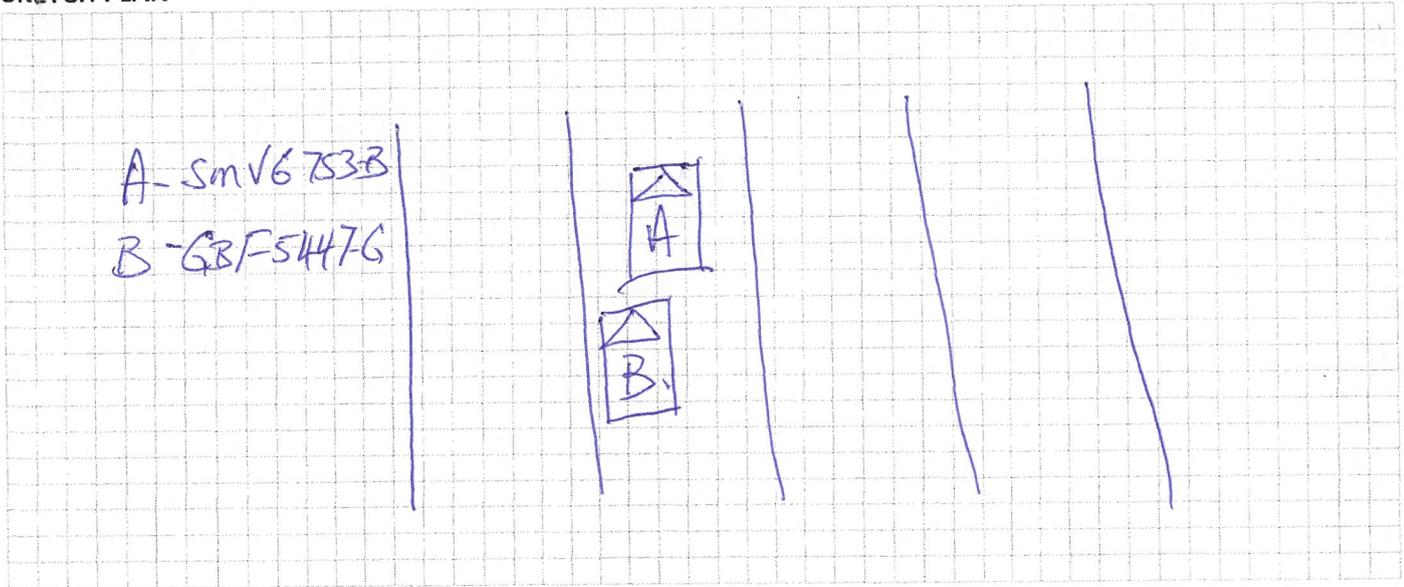
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBF5447G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

Name of Driver .....	AHMED MOHAMMAD SAZZAD
Passport No/FIN .....	GXXXX416U
Contact Number .....	(Phone) +65-91505275
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

We were on the highway from TPE to CTE. Traffic is heavy.  
We basically start and stop all the while.  
I started and then stopped when front stopped.  
Then I heard a bang and we were hit by a lorry from behind.

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:

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

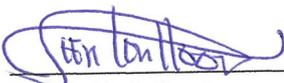
## SKETCH PLAN

### 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:

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



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



# CERTIFICATE OF INSURANCE

## TOYOTA AUTO PROTECTOR PRIVATE VEHICLE

**Name of Policyholder** : Teh Poh Hoon  
**Period of Insurance** : 15 Oct 2021 To 14 Oct 2022  
**Engine No.** : 2AZ1B14921  
**Chassis No.** : JTEGD56M607173969

**Vehicle No.** : SMV6753B  
**Policy No.** : 2070145995-01  
**Endorsement No.** : 000000000413847  
**Issued Date** : 20 Sep 2021

### ABOUT THE COVER

**Make/Model** : TOYOTA PREVIA AERAS  
**Engine Capacity/Tonnage** : 2,362.00 CC  
**Driver Restriction** : NA  
**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 \$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  
**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 (Cap. 189), 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 - \$1000 Theft - \$0 Flood Cover - \$1000

**Section 2**  
Property Damage - \$0

**Windscreen** : \$100

**Named Driver and Excess** (where applicable)

Teh Poh Hoon - \$1000 (Own Damage), \$1000 (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](http://www.aig.sg) or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: Toyota Financial Services Singapore Pte Ltd

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 (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504667246

INCHCAPE AUTO TOYOTA - BSTU009

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.

LETTER OF AUTHORITY

ACCIDENT INVOLVING SMV 6753-B and G2F5447-G on 18.4.2022  
Own vehicle's number Other vehicle's number Date of accident

along CTE BEFORE ANK AVE 5 EXIT / BETWEEN TPE  
Accident location

BY THE LETTER OF AUTHORITY, I/we, TEH POH HOON - SXXXX027-I  
Name of Policy Holder & (IC/Passport/Company Registration) number

of 409-A NORTHSHORE DRIVE #03-246 (S) 821409  
Address of Policy Holder

owner of Vehicle Registration No. SMV 6753-B 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 set \*my/our hand and sign this 10<sup>th</sup> of the month MAY Year 2022.

Signed & Delivered By:

TEH POH HOON

Witness By:

[Signature]



(To be sign by the policy holder only)

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

INSURER ENQUIRY

Find  
insurer

Vehicle reg. no.

GBF5447G

Date of Accident

18/04/2022 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance ..... **Lonpac Insurance Bhd**

Period of Insurance ..... **21/09/2021 - 20/09/2022**

Requested By ..... **Ashlyn Chng (Borneo Motors P...**

Requested Date ..... **19/04/2022 08:56**

**Payment details**

Request Amount: **S\$1.87**

GST Amount: **S\$0.13**

Total Amount Due (GST Inclusive): **S\$2**

**General Insurance Association**

Records Management Centre

GST Registration No: **M400017735**