



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

Our Ref: BMS2023/05/PD0376/DS (MY)

Your Ref: ALLIANZ-PC2410G

02/05/2023

BY HAND (INS COPY)

M/S.ALLIANZ GLOBAL CORPORATE AND SPECIALTY AG-SINGAPORE BRANCH C/O LKK AUTO CONSULTANTS

Attn : Officer In-Charge

Dept : Motor Claims

RE : ACCIDENT INVOLVING SNB5789Z AND PC2410G ON 13/01/2023

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 - \$6,680.02	B. LTA Search - \$2.00
C. Excess -	D. Loss of Use -
E. Rental - \$587.65(\$83.95x7days)	F. Others - \$350.00(Loss of Income)
G. Medical Claims -	Total Claim - \$7,619.67
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 |
| (✓) 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
Allianz Insurance Singapore Pte Ltd 12 Marina View #14-01 Asia Square Tower 2 Singapore 018961	S1000040 / ALLIANZ	M/S Grab Rentals Pte Ltd
	Document No. 38070445	3 Media Close #01-03/06 Singapore 138498
	Document Date 06/04/2023	Work: 65703925

Year	Model	Variant	Reg. Date	Reg. No.	Kilometers	Wip No.	Order No. / Remarks
2021	NHP170R	MWXNB H1	30/08/2021	SNB5789Z	119984	19633	75/DS/SNB5789Z
Chassis No.	Engine No.	Terms	SA / Counter	Vehicle In	Collected On		
JTDZZ9H380L000780	1NZ9305301	60	Ng Mei Yen	16/01/2023	14.34	06/04/2023	17.23

L	Cd	Job/Parts Description	Qty	Unit Price	Disc %	Amount
1	Z	BP-GRAB-DS SUNDRIES - FLASH ARRIVE: DD/MM/YY 0000HR TP VEH NO.:PC2410G ACC DATE:13/01/23 DRIVE IN:13/01/23 DATE-IN: DATE SURVEY:16/01/23 NO OF REPAIR DAYS:4 DAY BY:RASUL LKK				50.00
2	B	BP-LAB2 CHECK WIRING AND CONDUCT LEAK TEST	*			198.00
3	B	BP-ECU2 TO RESET ECU AND REPROGRAMME	BP60			198.00
4	B	BP-LAB2 REPL ACC AFF AREA	*			1584.00
		STRAIGHTEN AND PANEL BEAT ACC AFF AREA				
5	B	BP-RES2 RESPRAY ACC AFF AREA	*			1312.00
6	1	T52119-5A967 COVER, FR BUMPER	1.00	381.60		381.60
7	2	S52161-0K040 PIECE, RR BUMPER	10.00	4.90		49.00
8	3	T52611-52350 ABSORBER, FR BUMPER	1.00	96.10		96.10
9	4	S53812-0D220 PANEL, FR FENDER, LH	1.00	696.90		696.90
10	5	T53876-52330 LINER, FR FENDER, LH	1.00	207.30		207.30
11	6	T81170-52M90 UNIT ASSY, HEADLAMP,	1.00	1222.10		1222.10
12	7	T81482-52400 COVER, FOG LAMP, LH	1.00	132.30		132.30
13	8	T52144-52230 BRACKET, FR BUMPER	1.00	57.90		57.90

For & on behalf of	Customer's Signature	Charge Summary	Total
Borneo Motors (Singapore) Pte Ltd			6,185.20
	Please acknowledge receipt of vehicle		GST 8.00% 494.82
		Parts 2,843.20	
		Labour 3,342.00	
		Sublet 0.00	
		Lubrication/Fluid 0.00	Less 0.00
		Others 0.00	Amount Due 6,680.02

Company Copy



Renter Details

Name Quek Wei Chen
NRIC
Driver's License
Address
Date of Birth
Telephone Number
Mobile Number

Vehicle Description

Vehicle Number SNB5789Z
Make & Model Toyota Sienta

Rental Period

Rental Agreement 134087
Rental Agreement Start Date 1 Sep 2022
Minimum Rental Period End Date 31 Aug 2023
Minimum Rental Period (days) 364

Rental Charges

Package Name toyotasientahybrid_bn_2022offer_12M_83.95_270422_grb
Promotional Rental Rates (without GST) S\$78.46 / daily
GST amount S\$5.49
Promotional Rental Rates (with 7% GST) S\$83.95 / daily
Open Contract Rental Rates Please see note below**
Deposit Collected S\$0.00 (as at 1 Sep 2022)
Package notes toyotasientahybrid_bn_2022offer_12M_83.95_270422_grb

**Note: in the case of re-contracting, the above mentioned Promotional Rental Rates will take effect only from the day after the start date of this Agreement.*

***Promotional Rental Rates applicable till end of Minimum Rental Period, Lessor reserves the right to increase Rental Rates thereafter to a Rate which it deems appropriate, and may do so on more than one occasion. Before any Rental Rate increment is implemented, Lessor will provide the Renter with 10 business days' notice through the relevant communication channels, including (but not limited to) SMS and/or messages through the Grab Driver App.*

Add-Ons (Other Charges) are listed on separate pages

Terms and Conditions

I, the Renter, agree that the Lessor may collect, use & disclose my personal data, as provided in this Schedule &/or pursuant to the Agreement from time to time, including my vehicle location information (through various channels and methods such as through the use of telematics technology), for the following purposes in accordance with the Personal Data Protection Act 2012 & the Lessor's group Privacy Policy (available at www.grab.com/sg/privacy/):

- (a) administration of the vehicle rental under the Agreement;
- (b) to ensure that the rented vehicle is maintained appropriately and serviced in a timely fashion;
- (c) to improve and enhance the products and services of the Grab group;
- (d) to administer the driver-partner relationship between the Grab group and myself;
- (e) for internal tracking, analysis and administrative purposes;
- (f) to communicate with me;
- (g) for the Lessor to comply with its obligations under agreements with the owner/lender in relation to the Vehicle (including disclosure of personal data to the owner/lender);
- (h) for debt recovery purposes in the event that I am in default of my payment obligations (including provision of my personal data to debt recovery agency/ies for inclusion on a negative listing);
- (i) where I have applied for finance-related or insurance services from Grab group or its partners, to process my application and assess my suitability for the service I requested;
- (j) for the Lessor to comply with its obligations under law; and
- (k) to investigate and process any insurance claims relating to the vehicle rented by me.

Schedule

The Renter has read, understood & agrees with all terms & conditions of this Agreement.



Renter's Signature/Stamp

Date:

Signature not required if re-contracted online with email acknowledgement

Authorised Signatory/Stamp

Grab Rentals Pte Ltd

Date:



Additional Driver #1 Details

Name Quek Kim Huat
NRIC
Driver's License
Address
Date of Birth
Telephone Number
Mobile Number

Additional Driver #2 Details

Name
NRIC
Driver's License
Address
Date of Birth
Telephone Number
Mobile Number

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 Submission	13/01/2023 11:55 (SGT)
Reported by	Driver
Date of Accident	13/01/2023 08:00 (SGT)
Exact Location of Accident	Jln. Ahmad Ibrahim, Singapore
Additional Location Information	NEAR TUAS CHECKPOINT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNB5789Z
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	GRAB RENTALS PTE LTD
Company Reg No	2XXXXXX200G
Email Address	gr.sg.accident@grab.com
Mobile Phone No	(Phone) +65-98353395
Alternative Phone No	(Office) +65-66550005

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Sienta
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D21MFL0000447_02

DRIVER

Name of Driver	QUEK WEI CHEN
NRIC No	SXXXX175A
Date Of Birth	22/03/1989
Occupation	Outdoor

Date Of Driving Pass	30/01/2010
Driving experience	13 YEARS
Gender	Male
Mobile Number	(Phone) +65-98353395
Alt. Phone Number	-
Email Address	gr.sg.accident@grab.com
Address	BLK 617 CHOA CHU KANG NORTH 7 #01-443
Address complement	-
Postcode	680617
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Side Swipe
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

ON 13/01/23 AT AROUND 0800HRS I WAS DRIVING VEHICLE A (SNB5789Z) AT JALAN AHMAD IBRAHIM. AS I WAS TURNING TO THE RIGHT IN THE MIDDLE LANE, VEHICLE B(PC2410G) ON MY LEFT WAS ALSO TURNING. AS I SAW THAT HE WAS TOO NEAR TO MY LANE, I GIVE WAY TO HIM WHEN HE SUDDENLY SIDE SWIPED ME. WE STOPPED AND EXCHANGED PARTICULARS AND NO ONE WAS INJURED

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PC2410G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus

Name of Driver	KANNIAPPAN KRISHNA KUMAR
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

1. Please correctly report the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorized 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 center 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 involvedisclosure 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.

Quack

**FLASH ACCIDENT
REPORTING OFFICER**

FRO ZIKRUL

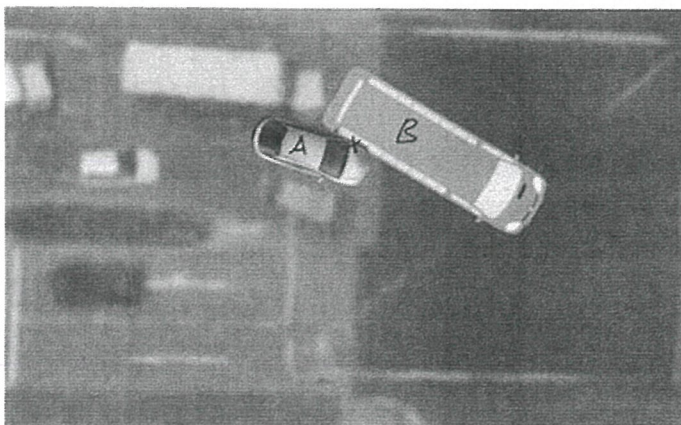


Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time
13/01/23 1005HRS

Witnessed by Reporting Centre Personnel

Sketch Plan



JALAN AHMAD IBRAHIM

A-SNB5789Z
BPC2410G

Describe Circumstances of the Accident

ON 13/01/23 AT AROUND 0800HRS I WAS DRIVING VEHICLE A (SNB5789Z) AT JALAN AHMAD IBRAHIM. AS I WAS TURNING TO THE RIGHT IN THE MIDDLE LANE, VEHICLE B(PC2410G) ON MY LEFT WAS ALSO TURNING. AS I SAW THAT HE WAS TOO NEAR TO MY LANE, I GIVE WAY TO HIM WHEN HE SUDDENLY SIDE SWIPED ME. WE STOPPED AND EXCHANGED PARTICULARS AND NO ONE WAS INJURED

Declaration

We declare the foregoing particulars are true in every respect.

Quetk

FLASH ACCIDENT
REPORTING OFFICER

FRO ZIKRUL



Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time
13/01/23 1005HRS

Witnessed by Reporting Centre Personnel

LETTER OF AUTHORITY

ACCIDENT INVOLVING SNB5789Z and PC24106 on 13/1/23 along
Own vehicle's number Other vehicle's number Date of accident
Jhn Ahmad Ibrahim
Accident location

BY THE LETTER OF AUTHORITY, I/we, **GRAB RENTALS PTE LTD**

Name of Policy Holder & (IC/Passport/Company Registration) number

of **3 MEDIA CLOSE #07-03 SINGAPORE 138498**

Address of Policy Holder

owner of Vehicle Registration No. SNB5789Z hereby appoint **BORNEO MOTORS (SINGAPORE) PTE LTD** (hereinafter refers to **BMS**), a company incorporated in Singapore and having its registered office at **NO 2 PANDAN CRESCENT SINGAPORE 128462** to do all or any of the following:

1. To submit, resolve and make any claims (including the commencement of legal proceedings) 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 BSIMPL0000472 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 favors 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 on 13
of the month Jan Year 20 23.

Signed & Delivered By:

Witness By:

(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.

PC2410G

Date of Accident

13/01/2023 

Reset

% RESULT & RECEIPT

TP Insurer Enquiry

Insurance Allianz Insurance Singapore P...

Period of Insurance 08/10/2022 - 07/10/2023

Requested By Ashlyn Chng (Borneo Motors P...

Requested Date 13/01/2023 09:29

Payment details

Request Amount: **S\$1.85**GST Amount: **S\$0.15**Total Amount Due (GST Inclusive): **S\$2**

General Insurance Association

Records Management Centre

GST Registration No: **M400017735**