



**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: **BMS2023/05/PD0666/DS (TP)**

Your Ref: **CC4/AIS23002984/RPA3**

09/06/2023

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 SND9511X AND SLW6510S ON 18/03/2023**

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	- \$13,565.92	B. LTA Search	- \$2.00
C. Excess	-	D. Loss of Use	-
E. Rental	- \$814.77(\$90.53X9days)	F. Others	-
G. Medical Claims	-	<b>Total Claim</b>	<b>- \$14,382.69</b>
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](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	
Allianz Insurance Singapore Pte Ltd 12 Marina View #14-01 Asia Square Tower 2 Singapore 018961		S1000040 / ALLIANZ	M/S Lumens Pte. Ltd	
		Document No. 38071251	22 Sin Ming Lane #01-74 Midview City Singapore 573969	
		Document Date 25/05/2023	Mobile: 83221830	

Year	Model	Variant	Reg. Date	Reg. No.	Kilometers	Wip No.	Order No. / Remarks
2021	ZWE211R	GEXVBZ Q1	10/02/2022	SND9511X	1	20741	72/DS/SND9511X
Chassis No.	Engine No.	Terms	SA / Counter	Vehicle In	Collected On		
MR2BZ3BE200008862	2ZRY798396	60	Thomas Pang W T	21/03/2023	10.54	25/05/2023	8.29

L	Cd	Job/Parts Description	Qty	Unit Price	Disc %	Amount
13	3	S52161-0K040	PIECE, RR BUMPER	10.00	4.90	49.00
14	4	S81920-02360	REFLECTOR ASSY, REFL	1.00	46.90	46.90
15	5	S58307-02520	PANEL SUB-ASSY, BODY	1.00	740.20	740.20
16	6	S64401-02F60	PANEL SUB-ASSY, LUGG	1.00	1027.10	1027.10
17	7	S64461-02310	WEATHERSTRIP, LUGGAG	1.00	248.70	248.70
18	8	T90467-08186 C3	CLIP	2.00	3.00	6.00
19	9	S64771-02530 C0	COVER, SPARE WHEEL	1.00	534.30	534.30
20	0	S75403-02090	EMBLEM SUB-ASSY, LUG	1.00	74.90	74.90
21	1	S75442-02520	PLATE, LUGGAGE COMPT	1.00	49.10	49.10
22	2	S75442-02530	PLATE, LUGGAGE COMPT	1.00	54.80	54.80
23	3	T75443-12B90	PLATE, LUGGAGE COMPT	1.00	54.80	54.80
24	4	S81498-02070	COVER, RR COMBINATIO	1.00	41.90	41.90

For & on behalf of	Customer's Signature	Charge Summary	Total
Borneo Motors (Singapore) Pte Ltd			12,561.04
	Please acknowledge receipt of vehicle	Parts	3,748.40
		Labour	8,812.64
		Sublet	0.00
		Lubrication/Fluid	0.00
		Others	0.00
			GST 8.00%
			Less
			Amount Due
			1,004.88
			0.00
			13,565.92

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

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	Document No. 38071251	
	Document Date 25/05/2023	

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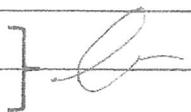
Chassis No.	Engine No.	Terms	SA / Counter	Vehicle In	Collected On
MR2BZ3BE200008862	2ZRY798396	60	Thomas Pang W T	21/03/2023 10.54	25/05/2023 8.29

L	Cd	Job/Parts Description	Qty	Unit Price	Disc %	Amount
1	Z	BP-SUNDRY TP INS:ALLIANZ INSURANCE TP VEH:SLW6510S DATE OF ACC:18.03.2023 BY:LKK-RASUL @ 24.03.2023 08 WORKING DAYS				50.00
2	Z	BP-SLANT SUPPLY SEALANT (NETT)				200.00
3	B	BP-LAB2 DRILL HOLE AND INSTALL REVERSE SENSOR	*			198.00
4	B	BP-LAB2 CHECK WIRING AND CONDUCT WATER TEST	*			134.64
5	B	BP-LAB2 REMOVE AND TRANSFER BOOTLID COMPONENTS ONTO NEW BOOTLID. R/I REVERSE CAMERA TO FAC REPAIR.	*			594.00
6	B	BP-LAB2 REMOVE INTERIOR UPHOLSTERY TO FAC REPAIR	*			792.00
7	B	BP-ECU2 TO RESET ECU AND REPROGRAMME		BP60		198.00
8	B	BP-MECH2 TO CONDUCT ADJUSTMENT ON BLIND SPOT SENS OR		BP60		198.00
9	B	BP-LAB2 REPLACE ACC DAMAGED PARTS				3168.00
10	B	BP-RES2 RESPRAY ACC AFFECTED AREAS				3280.00
11	1	SPC507-47006 00 BACK SENSOR PRIMER PRIUS PLUS	1.00	180.90		180.90
12	2	S52159-0Z961 COVER, RR BUMPER L/C	1.00	639.80		639.80

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

GRABCAR COVER PAGE

Company:	Lumens Auto. Pte Ltd.
Name of Driver:	Tan Chee Wee (Chen Zhiwei) ] 
Driver's I/C No:	S7218831D
Driver's Age:	50
License Plate:	SND9511X
Car Model and Make:	Toyota Altis Hybrid
Contract Start & End Date:	18/02/2022 to 17/02/2024
Facilitation Fee:	\$ 90.53
Starting Date of Deduction:	19/02/2022
Date of Collection	18/02/2022
Remarks:	Start daily instalment plan at \$90.53/day wef 19/02/2022

Please call 6714 6614 and approve this document if received by:

   
Attended By: Shirley Lee

Iu: 1220754857

FOR INTERNAL USE ONLY  
**CONTRACT SUMMARY**

C22-02-102  
22-02-0032

Name of Driver	Tan Chee Wee (Chen Zhiwei)
Age	50
Driving Experience	27.00
Rental Rate	\$84.53 + \$6.00 RPP CDW
Contract Duration	18/02/2022 to 17/02/2024 26.04 Months (729.00 Days)
Vehicle Owner	Lumens Auto Pte. Ltd
Vehicle Make, Model and License Plate	Toyota Altis Hybrid SND9511X
COE Expiry	09/02/2032
Deposit Amount	800.00
Maximum Deposit	800.00
Vocational License Status	TDVL
Used or New Car	New Car
Outstanding Rental	

# 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	20/03/2023 11:56 (SGT)
Reported by	Driver
Date of Accident	18/03/2023 18:15 (SGT)
Exact Location of Accident	Sengkang E Way, Singapore
Additional Location Information	TURNING RIGHT TO SENKANG EAST DRIVING (T-JUNCTION)
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SND9511X

### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	LUMENS PTE LTD
Company Reg No	2XXXXX961K
Email Address	kokhow.tay@lumens.sg
Mobile Phone No	(Phone) +65-98380177
Alternative Phone No	(Office) +65-87781765

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
Variant	ALTIS HYBRID
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	1598

### INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number	22-MN000847-R00

### DRIVER

Name of Driver	TAN CHEE WEE(CHEN ZHIWEI)
NRIC No	SXXXX831D
Date Of Birth	02/06/1972
Occupation	Outdoor

Date Of Driving Pass	08/03/1994
Driving experience	29 YEARS
Gender	Male
Mobile Number	(Phone) +65-98380177
Alt. Phone Number	-
Email Address	kokhow.tay@lumens.sg
Address	156 RIVERVALE CRESCENT #13-152
Address complement	-
Postcode	540156
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	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)	2
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	-

#### PASSENGER 1

Name	FELICIA TOH
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

ON 18/03/2023 AROUND 1815HRS I VEHICLE A BEARING REGISTRATION NUMBER SND9511X WAS DRIVING ALONG SENGKANG EAST WAY TURNING RIGHT TO SENGKANG EAST DRIVE , AT YELLOW BOX I SLOW DOWN AND STOP BECAUSE THERE WAS A CYCLIST WAS PASSING BY , BUT SUDDENLY THERE WAS THIS VEHICLE B BEARING REGISTRATION NUMBER SLW6510S FAILED TO BRAKE IN TIME AND REAR ENDED VEHICLE A. NOBODY WAS INJURED DURING THE ACCIDENT, I ALSO WANT TO MENTION I HAVE 1 FEMALE PASSENGER ON BOARD.

#### 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	SLW6510S
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Vehicle Manufacturer .....	Infiniti
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private hire
Name of Driver .....	POH HOCK HENG(FU FUXING)
NRIC No .....	SXXXX836A
Contact Number .....	(Phone) +65-84128648
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 willful 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 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.



**FLASH ACCIDENT REPORTING OFFICER**  
FRO VICKY



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

19032023 - 0100



Describe Circumstances of the Accident

ON 18/03/2023 AROUND 1815HRS I VEHICLE A BEARING REGISTRATION NUMBER SND9511X WAS DRIVING ALONG SENGKANG EAST WAY TURNING RIGHT TO SENGKANG EAST DRIVE , AT YELLOW BOX I SLOW DOWN AND STOP BECAUSE THERE WAS A CYCLIST WAS PASSING BY , BUT SUDDENLY THERE WAS THIS VEHICLE B BEARING REGISTRATION NUMBER SLW6510S FAILED TO BRAKE IN TIME AND REAR ENDED VEHICLE A. NOBODY WAS INJURED DURING THE ACCIDENT, I ALSO WANT TO MENTION I HAVE 1 FEMALE PASSENGER ON BOARD.

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 19032023 - 0100

FLASH ACCIDENT REPORTING OFFICER  
FRO VICKY



Witnessed by Reporting Centre Personnel

# Tokio Marine Insurance Singapore Ltd.

(Company Reg. No.: 192300014M) (GST Reg. No.: M2-000023-4)

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com



**TOKIO MARINE**  
INSURANCE GROUP

A member of the  
Tokio Marine Group

## Certificate of Insurance

FORM MX1 H

**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, 1959 (MALAYSIA)**

Policy No.: 22-MN000847-R00 ( Private Motor Car)

1. **Index Mark and Registration Number of Vehicle** SND9511X **Chassis No.:** MR2BZ3BE200008862
2. **Name of Policyholder** LUMENS AUTO PTE. LTD.
3. **Effective date of the Commencement of Insurance for the purposes of the Act** 30/09/2022
4. **Date of Expiry of Insurance** 29/09/2023
5. **Persons or Class of Persons entitled to drive\***  
The Policyholder  
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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.
6. **Limitations as to use\***  
Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business.  
Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.  
The Policy does not cover:-  
1) Use for racing, pace-making, reliability trial or speed-testing.  
2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.  
3) Use for the carriage of passengers for hire or reward by any person except for private hire services  
4) Use for hire or reward except for (3) and rental by the Policyholder.
- \* *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.*

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).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

### IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

### ADDITIONAL INFORMATION

<b>Insurance Plan:</b>	Third Party Cover Only	<b>Account:</b> 3042DDZ
<b>Policy Excess:</b>	Excess - All Claims	SGD 3,000
<b>Financial Interest:</b>	DBS BANK LTD	

Tokio Marine Insurance Singapore Ltd.

Authorised Signature

LETTER OF AUTHORITY

ACCIDENT INVOLVING SND9511X and SLW6510S on 18.03.2023  
Own vehicle's number Other vehicle's number Date of accident

along SENGKANG E WAY  
Accident location

BY THE LETTER OF AUTHORITY, I/we, LUMENS ~~AUTO~~ PTE LTD & 2XXXXX961K  
Name of Policy Holder & (IC/Passport/Company Registration) number

of 22 SIN MING LANE #01-74 MIDVIEW CITY SINGAPORE 573969  
Address of Policy Holder

owner of Vehicle Registration No. SND9511X 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.

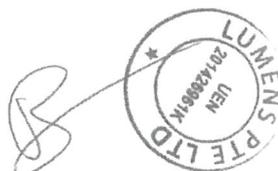
\*I/We hereby declare that all acts, instruments and documents done by virtue of this letter of authority on \*my/our behalf shall be as good valid and effectual to all intents and purposes whatsoever as if the same had been done or executed by \*me/us in \*my/our own proper person(s) and \*I/we hereby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

Signed & Delivered By:



Witness By:

Handwritten signature of the witness.

(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.

SLW6510S

Date of Accident

18/03/2023 

**Reset**

## % RESULT & RECEIPT

TP Insurer Enquiry

Insurance ..... **Allianz Insurance Singapore P...**

Period of Insurance ..... **22/08/2022 - 21/08/2023**

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

Requested Date ..... **22/03/2023 09:47**

### 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**