

# NATIONAL Assessment Centre Services

(wef 1 Jan'05) **NA 1901317**

Date In: <b>19/1/14/02</b>	Job description	Date & Time Completed	Done by
Ref No: <b>NA 1901317/24</b>	SAS e-filing		
Veh No: <b>572048 D</b>	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: <b>8/2/14-18:45</b>	i-Motor Claim Form		
OD: <b>TP</b> Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (	Tel: (	Fax: (
TP Particulars:	Veh No: <b>574 6876 P</b>	INC ( ) / Non-INC ( )
Owner / Driver: (	Tel: (	
Policy No: (	Period: (	Cover Type: (
Confirmed by: (	Date: (	Time: (
Insured/Driver Liability: (	%) [Note-Est. Status (WO): N: 0-20%; P: 21-79% P: 80-100%]	
Year of Registration: (	Warranty: YES ( ) / NO ( )	
Excess: (\$	Loading: \$1,000 ( ) / \$2,000 ( )	

**General Remarks:-**

( ) Walk-In Customer : Customer's information strictly Confidential & Strictly NO refer of repaler.

( ) Total Loss Case : to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ) ; Invoice: YES ( ) / NO ( ) ; Towing Co: ( )

Remarks: (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

**Injury :** \_\_\_\_\_

Date/Time	Actions

<b>NA 1901317</b>	<b>Invoice Preparation Checklist</b>	<b>Amr (\$)</b>	<b>Amr (\$)</b>
<b>Claimant's Particulars :-</b>	1) AR: Accident Reporting (\$30);	1st Bill	Add Bill
<b>Driver/Owner:</b>	2) DA: Damage Assessment (\$100); INC (\$80)		
<b>Contact No:</b>	3) TF: Towing Fee \$40/\$45		
<b>Damaged Portion:</b>	4) FT: Follow-Through Survey \$120		
<b>QC Checked by (Engr-In-Charge):</b>	5) FT: Follow-Through Survey (Resurvey) \$30		
<b>Auditors' Comments :-</b>	For claiming against INC Only (wef 10 Jan 2005)		
<b>Dat. 1:</b>	6) TR: Re-inspection \$75		
<b>Dat. 2 / 3:</b>	7) N1: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	<b>Q1:</b>		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (N-in INC) against INC \$20		
	9) N12: Idne Mobile 30		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	



## 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	19/02/2019 14:02
Date Of Accident	18/02/2019 18:45
Exact Location Of Accident	RIVER VALLEY RD TWDS NATHAN RD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJJ2048D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ABDUL RAHIM BIN ALI
NRIC No	S0225630D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93361709
Alternative Phone No	OFFICE-93361709
<b>Vehicle Particulars</b>	
Manufacturer	HONDA
Model	EDIX 2.0 A
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
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 HIRE
<b>Insurance Company</b>	
Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MS001531
Cover Note Number	
<b>Driver</b>	
Name of Driver	MUHAMMAD FIRDAUS BIN SELAMAT
NRIC No	S8209030D
Date Of Birth	21/03/1982
Occupation	OUTDOOR
Date Of Driving Pass	09/10/2007
Driving Experience	11 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90121643
Fax Number	
Contact Number	OFFICE-90121643
EEmail Address	NOEMAIL

Address	BLK 864 WOODLANDS STREET 83 #10-200
Postcode	730864
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?	YES
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)	2
Passenger 1	NAME: : - GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	HOUGANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 60 HOUGANG AVE 9 , POSTCODE: 538775 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4890999 - FAX NO: 63128989
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20190219/2056.

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJH6876P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ASRI
NRIC/Passport Number	
Contact Number	81274127

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

**DETAILS OF INJURED PERSON 1**

Name

MUHAMMAD FIRDAUS BIN SELAMAT

Approximate Age

Injuries Sustain

BODY

Injured person in which vehicle?

SJJ2048D

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode



## 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.:

River valley fd.

A: SJJ 2048 D  
B: SJL 6876 P.

refers to police report - 7/20190219/2056.

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

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



# ACCIDENT STATEMENT

ACCIDENT DATE: ( 18/2/11 ) (DD/MM/YYYY), TIME: ( 18:45 ) (HH:MM)

LOCATION: Ever Valley Rd. feds northern rd

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJ12018D  
 b) INSURANCE COMPANY: TH  
 c) POLICY NUMBER: MS001531  
 d) POLICY TYPE: ( COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT )  
 e) MAKE & MODEL: \_\_\_\_\_  
 f) TYPE: ( SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS )  
 g) VEHICLE CATEGORY: ( PRIVATE / COMMERCIAL / MOTORCYCLE )  
 h) PURPOSE OF USING AT ACCIDENT TIME: commercial use  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) (NO)  
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- A) NAME: Abdul Rahim Bin Ali (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S02256302 CONTACT: 93361709  
 c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

## DRIVER

- a) NAME: Muhammad firdaus Bin Selamat (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S8090202 CONTACT: 90121643  
 c) ADDRESS: Blk 834 Woodlands Street 83 #12-22 (738801)

\*d) DATE OF BIRTH: ( 21/2/1982 ) (DD/MM/YYYY)

e) OCCUPATION: ( INDOOR / OUTDOOR )

f) YEARS OF DRIVING EXPERIENCE: 2/10/2007

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO) (NO)  
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: children

5. a) WEATHER CONDITION: ( CLEAR / RAINING / OTHERS )  
 b) ROAD SURFACE: ( DRY / WET / OTHERS )  
 6. WAS ANYBODY INJURED (YES / NO)  
 7. a) REPORTED TO POLICE (YES / NO)  
 IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

## 8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SJH6876P MODEL: \_\_\_\_\_  
 b) DRIVER'S NAME: ASIA  
 c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 81274177

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
 e) DRIVER'S NAME: \_\_\_\_\_  
 f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

\* No of passenger  
 (Including driver)  
(2)  
 1 female.

\* No of passenger  
 (Including driver)  
(1)

\* No of passenger  
 (Including driver)  
( )

Email =

fax =

video =





# SINGAPORE POLICE FORCE



T/20190219/2056

1 of 3

Police Station Of Origin:  
Hougang N.P.C  
60 Hougang Avenue 9 SINGAPORE 538775  
Tel No: 1800-4890999

Report No. T/20190219/2056

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 19/02/2019 12:37		Vide Report No.:		Station Diary No.: 63	
<b>Informant's Particulars</b>					
Name of Informant: MUHAMMAD FIRDAUS BIN SELAMAT			Address: APT BLK 864 WOODLANDS STREET 83 #10-200 SINGAPORE 730864		
ID Type / ID No.: NRIC NO / S8209030D			Contact No.: Home/Office: Mobile: 90121643		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 36	Date of Birth: 21/03/1982	Type of Informant: Driver		
Race: Indonesian			Language: English		Institution / School Name:
Occupation: GOJEK DRIVER			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/02/2019 18:45	Type of Location: Straight Road
Location: Along Road 1 RIVER VALLEY ROAD  Along River Valley Road towards Nathan Road				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJH6876P	Car	TOYOTA	WISH	Silver	Slightly Damaged	0
SJJ2048D	Car	HONDA	EDIX	White	Slightly Damaged	1

**Details of Person Involved**

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





**SINGAPORE  
POLICE FORCE**



T/20190219/2056

Police Station Of Origin:  
Hougang N.P.C  
60 Hougang Avenue 9 SINGAPORE 538775  
Tel No: 1800-4890999

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Report No. T/20190219/2056

**CONTINUATION OF REPORT**

Driver			
Name	MUHAMMAD FIRDAUS BIN SELAMAT	ID No.	S8209030D
Related Vehicle	SJJ2048D (Car)	Contact No.	90121643
Hospital/Clinic	ACCESS MEDICAL TOA PAYOH	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	18/02/2019	Date Discharge	18/02/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight

**Brief Details.**

On the 18/02/2019 at about 1845hrs I was driving my GOJEK vehicle SJJ2048D along River Valley Road. I had a passenger at the rear seat. As I was nearing Nathan Road, I slowed down as the vehicle in front signaled right. However a vehicle at my rear suddenly hit me on my rear of my vehicle.

I stopped my vehicle and made a check. The rear vehicle front part had hit on my rear part of my vehicle. Due to the impact my left knee had hit the front dash board area and my head hit onto the steering wheel. I did not require immediate medical attention as there was no bleeding. The other male malay driver was not injured. We exchanged our contact numbers and shortly left the scene. As I felt slight pain uneasiness due to the accident, I went to the Clinic to see a doctor and was given 3 days of MC. My car is installed with a CCTV, however the incident was not recorded.





**SINGAPORE  
POLICE FORCE**



T/20190219/2056

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Report No. T/20190219/2056

Police Station Of Origin:  
Hougang N.P.C  
60 Hougang Avenue 9 SINGAPORE 538775  
Tel No: 1800-4890999

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

F /

Staff Sgt TEO HENG HENG, ROBIN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

19/02/2019 12:37

Officer In Charge Of Case:

TP / AEIT /

Sr Staff Sgt MOHAMAD ZULFAZDLI BIN

ABDULLAH

Contact No.: 65476204

Authentication Stamp

NP188

Classification Of Case:



Signature:

SN 085

Singapore Police Force



REPUBLIC OF SINGAPORE. DRIVING LICENCE

Portrait photo of Muhammad Firdaus Bin Selamat

Licence Number: **S8209030D**

Name: **MUHAMMAD FIRDAUS BIN SELAMAT**

Birth Date: **21 Mar 1982**

Issue Date: **27 Jun 2011**

Barcode: 001976758E

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8209030D**

Portrait photo of Muhammad Firdaus Bin Selamat

Name: **MUHAMMAD FIRDAUS BIN SELAMAT**

Race: **INDONESIAN**

Date of birth: **21-03-1982**

Country of birth: **SINGAPORE**

Sex: **M**

Barcode: 4745686

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

	EFFECTIVE DATE
Class 2B Motorcycles <= 200 cc	23 Nov 2000
Class 2A Motorcycles between 201 cc and 400 cc	06 Jul 2003
Class 2 Motorcycles > 400 cc	12 May 2009
Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg	09 Oct 2007

NP 428A

Licence No: **S8209030D**

Barcode

Barcode

4745686

Portrait photo of Muhammad Firdaus Bin Selamat

NRIC No. **S8209030D**

Date of issue: **27-06-2011**

APT BLK 864 WOODLANDS STREET 63 #10-200  
SINGAPORE 730864

NRIC No: **S8209030D**

Date: **11/01/2018**

Tokio Marine Insurance Singapore Ltd.

Company Reg. No.: 192300014M (GST Reg No.: M2-0000023-4)  
20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046  
T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tms@tokiomarine.com.sg W: www.tokiomarine.com

A member of the  
Tokio Marine Group



TOKIO MARINE  
INSURANCE 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.: MS001531 (Private Car)

- |  |   |                         |
|--|---|-------------------------|
| 1. Index Mark and Registration Number of Vehicle                               | SJJ2048D  | Chassis No.: BE31200507 |
| 2. Name of Policyholder  | ABDUL RAHIM BIN ALI   |                         |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 06/02/2019 (00:00:00)   |                         |
| 4. Date of Expiry of Insurance   | 05/02/2020  |                         |
| 5. Persons or Class of Persons entitled to drive*                              | Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business.<br>Use for social domestic and pleasure purpose and business purposes of the Policyholder or of any person to whom the vehicle is hired.<br>The Policy does not cover:-<br>1) Use for racing, pace-making, reliability trial or speed-testing.<br>2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. |                         |

\* 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\*

\* 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		Account No: 2417DDA
Insurance Plan:	Third Party Fire & Theft	
Limit for total loss or theft:	Prevailing Market Value	
Policy Excess:	Excess-Third Party (Sect II) SGD 2,000.00	
Financial Interest:	TECK WEI CREDIT PTE LTD	
Additional Terms:	1. Vehicle is licensed for private hire by LTA and can be used for private hire limousine services. 2. Only named drivers with private hire licences can use car for private hire. 3. YID excess of SGD 1,500 applied on Section 1 & Section 2 separately. 4. Notwithstanding anything to the contrary in the policy, MC19 Waiver of Excess is NOT applicable. 5. Private Hire Usage Vehicle Endorsement is applicable. 6. Approved workshop plan only	

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature