







VISIT PASS Immigration Regulations

Name ZHAO WEI



09-01-1982 M

Date of Expiry 02-02-2019

G2944684P 27-02-2017











Accident Photo



Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00 Singapore 048580 Tel (65) 6224 0010 Fax (65) 6224 0030 Operating Hours: Monday to Friday, 09:00 – 17:00 UEN: S66SS0020G / GST Reg. No.: M400017735

 $\underline{\textbf{IMPORTANT NOTE:}} \quad \text{Please submit the completed Addendum form to the } \underline{\textbf{same}} \quad \text{Authorised Reporting Centre with whom you submitted the Original Report.}$

	ADDENDUM
(A)	PARTICULARS OF PERSON MAKING THE AMENDMENTS:
	Original Report No: MCD 61800 4699- Vehicle Registration No: 1 6304 4
	Original Report No: MCD 6/for 9699-0 Vehicle Registration No: 4M 6304 4 Name(as shown in NRIC): BILLS Holdings Of NRIC/FIN/Passport No: 51/28/41/I
	(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
	Address :Singapore()
	Contact (Tel) :Mobile No.:9 o 363 P98
	Email Address :
	Date of Accident: 08/11/18
	Place of Accident: 53, derapour North Aug 4
	Insurance Company:
(B)	ADDITIONALINFORMATION / AMENDMENTS:
	I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:
	Velvele No = you 6044 error.
	Cornect While No: YM 6304 U
	SPARK
	LOYANG
	Policyholder / Driver's Signature Reporting Centre Personnel's Signature
	Date: Name: NRIC/FINNO.: NRIC/FINNO.:
	Wiley Herro

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6 Raffles Quay #18-00 Singapore 048580 Tel (65) 6224 0010 Fax (65) 6224 0030 Operating Hours : Monday to Friday, 09:00 – 17:00 UEN: S66SS00206 / GST Reg. No.: M400017735

<u>IMPORTANT NOTE:</u> Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

	ADDENDUM
(A)	
	Original Report No: MCD 6/foo 4699-5 Vehicle Registration No: 4M 63044 Name(as shown in NRIC): BIL'S Holdings BARIC/FIN/Passport No: 51/28/41/2
	Name(as shown in NRIC): BIL'S Holdings Of NRIC/FIN/Passport No: 5 1/ 28/41/7
	(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
	Address :Singapore()
	Contact (Tel) :Mobile No.:9 o 363 898
	Email Address :
	Date of Accident : 08/01/18 Time of Accident: 1100 Hm
	Date of Accident: Date of Accid
	Insurance Company:
(B)	ADDITIONALINFORMATION / AMENDMENTS:
(B)	I have made a report on the above mentioned accident and would like to include additional information or
	make the following amendments:
	Velvele No = Ym 6044 error.
	Velvele No = Ym 6044 error. Correct Velvêle No : Ym 63044
	SPARK
	LOYANG
	Their grant
	Policyholder / Driver's Signature Date: Reporting Centre Personnel's Signature Name: Name: NEIC/FINNO:
	NRIC/FINNO.: