

## 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

**IMPORTANT NOTE:** Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre

with whom you submitted the Original Report.

			ADDENDUM	
(A)	PARTICULARS OF PERSON MAKING THE AMENDMENTS:			
	Original Report No :		Vehicle Registration No:SLU6862L	
	Name(as shownin NRIC):		NRIC/FIN/Passport No:	
	(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate		ase delete as appropriate	
	Address	:	Singapore(	
	Contact (Tel)	:	Mobile No. :	
	Email Address	ē		
	Date of Accident	£	Time of Accident :	
	Place of Accident	:		

## (B) ADDITIONALINFORMATION / AMENDMENTS:

Insurance Company: \_\_

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

AFTER THE IMPACT, MY VEHICLE SWERVE AND MY FRONT BUMPER HIT ONTO THE SIDE KERB.

Policyholder / Driver's Signature Date:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

Date: