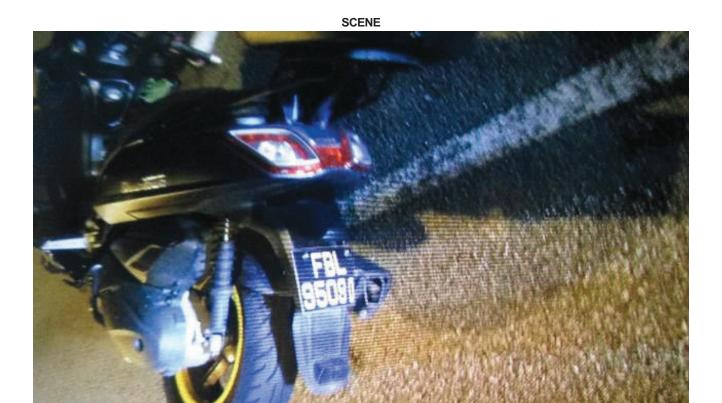
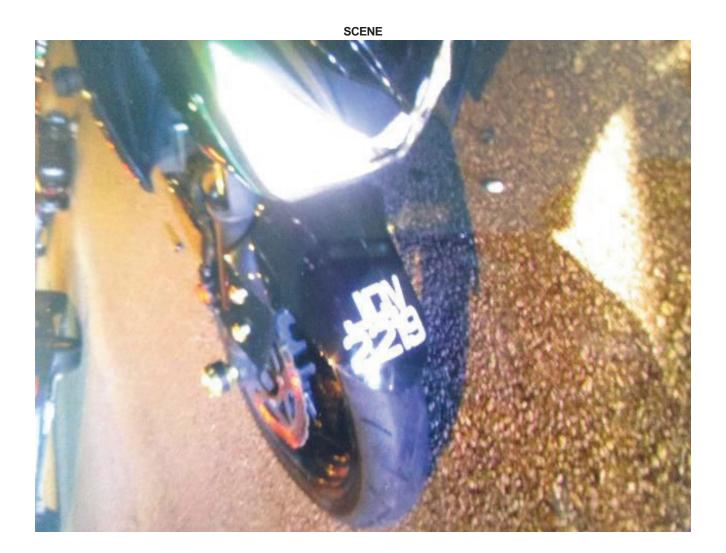
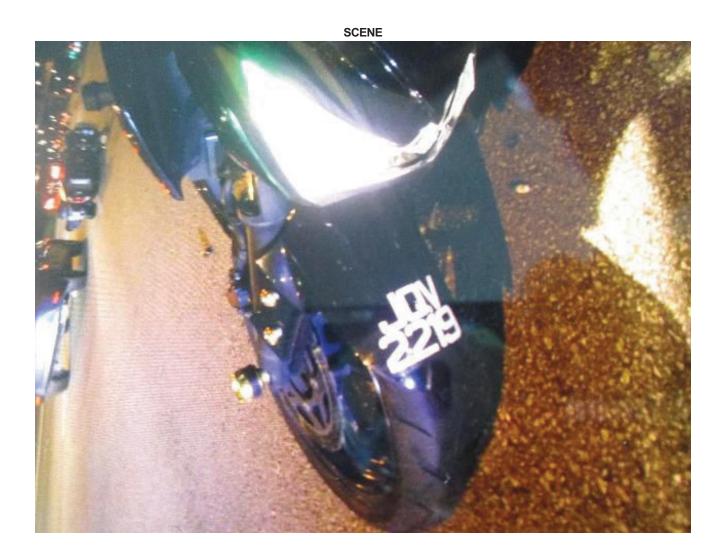
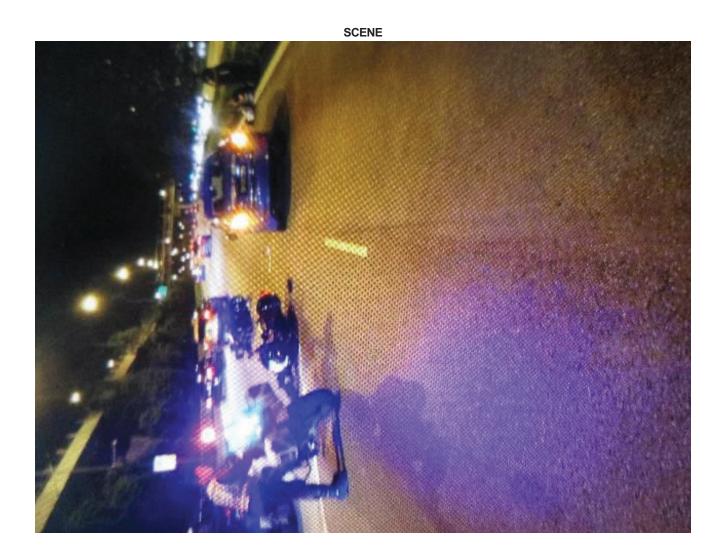
Accident Photo

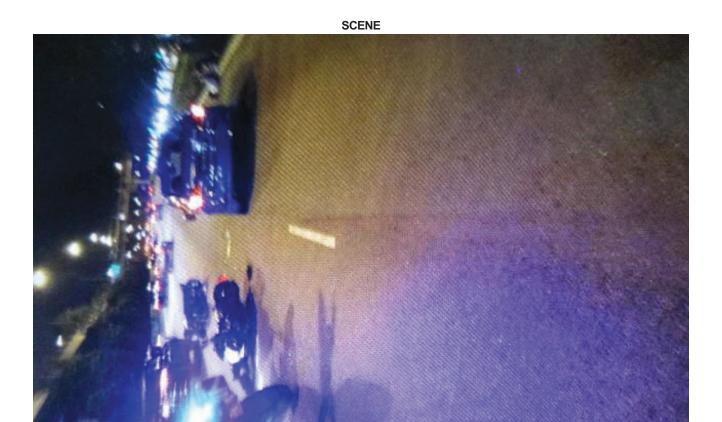














Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION 6 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

 $\underline{\textbf{IMPORTANT NOTE}}: \hspace{0.2cm} \textbf{Please submit the completed Addendum form to the } \underline{\textbf{same}} \hspace{0.2cm} \textbf{Authorised Reporting Centre}$ with whom you submitted the Original Report.

	,,,,,	•
	ADDEN	MUD
) PARTICULARS OF PI	ERSON MAKING THE AMENDMEI	NTS:
Original Report No	:	Vehicle Registration No: SH9622D
Name(as shownin NRIC)	: TAN CHIN LEONG	NRIC/FIN/PassportNo :
(*Vehicle Driver/Ve	ehicle Owner) (*) Please delete as	sappropriate
Address	:	Singapore(
Contact (Tel)	:	Mobile No. :
Email Address	;	
Date of Accident	:_16/03/2018	Time of Accident : 23:00
	: CTE(SLE) AFT BRADDE	
Insurance Company	: India International Insura	nce Pte Ltd
	MATION / AMENDMENTS:	
ENCLOSE	D AMEND POLICE REPOI	RT
-	104-000	
		\ .
		- V
Policyholder / Driver's Date:	s Signature	Reporting Centre Personnel's Signature Name: JANET

NRIC/FINNo.: Date: 24.03.2018

GIARMC addendumform_V3