

## 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: S66S50020G / 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:

(A)		RSONMAKINGTHEAMEN		
	Original Report No:		Vehicle Registration No:	ET 6289E
	Name(as shown in NRIC):		NRIC/FIN/Passport No:	
	(*Vehicle Driver/Vel	nicle Owner) (*) Please del	ete as appropriate	
	Address :			Singapore( )
			Mobile No.:	
	Email Address :			
	Date of Accident :	25/11/2018	Time of Accident :	
	Place of Accident :			
	Insurance Company:	M/s China Taiping Ins	surance (S) Pte Ltd	
(B)		MATION / AMENDMENTS:		
	make the following a	mendments:	ccident and would like to include add	£
	>			
				·
	A 2	18/2019 x		
	Policyholder / Driver's Date: 2//3/2019	s Signature	Reporting Centre Perso Name: NRIC/FINNo.:	nnel's Signature

Date: