

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

		ADDE	NDON	1	
P/	PARTICULARS OF PERSON MAKING THE AMENDMENTS:				
Oı	riginal Report No :		\	ehicle Registration No: _	SLH3440J
Na	ame(as shownin NRIC):	HOLMES CHRISTOPHER ROBE	ERT_N	IRIC/FIN/Passport No:_	
(*	Vehicle Driver / Veh	nicle Owner) (*) Please delete	as appr	opriate	
Ac	ddress :				Singapore(
Co	ontact (Tel) :			Nobile No. :	
En	mail Address :				
Da	ate of Accident :	/03/2019	т	ime of Accident :	
Pla		CANADIAN INT SCHOOL (LAKESID			
ln:		: AIG ASIA PACIFIC INSURANCE PTE. LTD.			
_	" THE ACCIDEN	T DATE SHOULD BE/0	3/2019	THAT'S ALL! "	
_					
_					
, Pc	olicyholder / Driver's	s Signature		Reporting Centre Perso	nnel's Signature
Da	ate:			Name: NRIC/FIN No.: Date:	