

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 same Authorised Reporting Centre with whom you submitted the Original Report.

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./	PARTICULARS OF PERSO	NMAKINGTHEAMEN	IDMENTS:
	Original Report No :		Vehicle Registration No: SBX 7775
			NRIC/FIN/Passport No:
	(*Vehicle Driver / Vehicl	Owner) (*) Please de	elete as appropriate
	Address :		Singapore(
	Contact (Tel) :		Mobile No. :
	Email Address :		
	Date of Accident :	8/3/2019	Time of Accident :
	Place of Accident :		
	Insurance Company:		
	make the following ame		accident and would like to include additional information
	make the following ame	dments:	
	make the following ame	dments:	
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