

## 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

<u>IMPORTANT NOTE</u>: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

## ADDENIDLINA

		ADDENDU	JIVI
(A)	PARTICULARS OF P	ERSON MAKING THE AMENDMENTS	:
	Original Report No	: MBM119033435	_Vehicle Registration No: SLA3330E
	Name(as shownin NRIC)	: LOW CHOON FONG	_NRIC/FIN/Passport No:S7866103H
	(*Vehicle Driver / V	ehicle Owner) (*) Please delete as ap	propriate
	Address	: BLK 38 JALAN RUMAH TINGGI #10-25	Singapore( 150038 )
	Contact (Tel)	:	_Mobile No. : 92302887
	Email Address	:	
	Date of Accident	: 11/03/2019	_Time of Accident : 11:15
	Place of Accident	: 960 OLD CHOA CHU KANG ROAD	
	Insurance Company: AIG ASIA PACIFIC INSURANCE PTE. LTD.		
(B)	) ADDITIONALINFORMATION / AMENDMENTS:		
(-7	I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:		
	DATE OF ACCIDENT	SHOULD BE 11.03.2019	
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		* 1.00m	
	Policyholder / Driver Date:	's Signature	Reporting Centre Personnel's Signature Name: NRIC/FINNo.:

Date: