

# NATIONAL Assessment Centre Services

Form 1 (Jan 2019)

NA1905252

Date In: 15/07/2019 80.15	Job description	Date & Time Completed	Done by
Ref No: NA/CT/190124994	SAS e-filing		
Veh No: SLR 16419	E-mail (within 4hrs. AIC 2hrs)		
D.O.A: 13/07/2019 12:00	I-Motor Claim Form		
OD: TP Reporting Only	I-Motor W/O (Within OD 2hrs. TP 4hrs)		
	I-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / MNC Assign Wksp / QW: ( )

Tel: ( )

Fax: ( )

TP Particulars:

Veh No: YL4998K

INC ( ) / Non-INC ( )

Owner / Driver: ( )

Tel: ( )

Policy No: ( )

Period: ( )

Cover Type: ( )

Confirmed by: ( )

Date: ( )

Time: ( )

Insured/Driver Liability: ( ) % (Note-Est. Status (WO): N: 0-20%; P: 21-79%; F: 80-100%)

Year of Registration: ( ) Warranty: YES ( ) / NO ( )

Excess: (\$ ) Loading: \$1,000 ( ) / \$2,000 ( )

General Remarks:

( ) Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairs.

( ) Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co: ( )

Remarks: (INC hotline: 6788 6616)

Date & Time Completed

Done by

1) Apply for Transport Allowance ( ) / Courtesy Car ( )

2) QC Check / Post Repair Inspection ( )

3) Upload Resurvey Photo [Repair Cost > \$3000] ( )

Injury: ( )

Date/Time

Actions

NA1905252

Claimant's Particulars:

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:

Car 1:

Car 2/3:

1 / 1

## Invoice Preparation Checklist

1) AR: Accident Reporting (\$30)

2) DA: Damage Assessment (\$100) INC (\$80)

3) TP: Towing Fee \$40/\$45

4) PT: Follow-Through Survey \$120

5) RT: Follow-Through Survey (Resurvey) \$30

For claiming against INC Only (wef 10 Jan 2019)

6) TR: Its Inspection \$75

7) NI: Idnu DA + SMRT Survey \$160

8) NTUC Additional Services:

(2) 1) \*N3: Courtesy Car / Tpt Allowance \$5

\*N6: Repair Co-ordination \$10

\*N7: Post Repair Inspection \$25

\*N8: DV / Collect Excess Coordination \$5

TP (N11): TP (Non INC) against INC \$20

TP (N11): TP (Non INC) against INC \$20

8) N12: Idnu Mobile \$30

Invoice dated

Pen Charged

1 - 1000000000

Fee Charged

07-MAY-2019 16:39



## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

### ACCIDENT STATEMENT

Date Of Report	15/07/2019 20:15
Date Of Accident	13/07/2019 12:00
Exact Location Of Accident	PIE TOWARDS TUAS
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR1641G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	AMY SNG BEE HUA
NRIC No	S6905251G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96661321
Alternative Phone No	OFFICE-96661321

### Vehicle Particulars

Manufacturer	MAZDA
Model	3-1.5 SEDAN (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN1750551801
Cover Note Number	

### Driver

Name of Driver	AMY SNG BEE HUA
NRIC No	S6905251G
Date Of Birth	17/02/1969
Occupation	OUTDOOR
Date Of Driving Pass	10/02/1990
Driving Experience	29 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96661321
Fax Number	
Contact Number	OFFICE-96661321
Email Address	NOEMAIL

Address	BLK 435 YISHUN AVENUE 6 #10-2098
Postcode	760435
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT T/20190717/7011

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YL4998K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	AXA INSURANCE PTE LTD

Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF INJURED PERSON 1

Name AMY SNG BEE HUA

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? SLR1641G

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode



## SKETCH PLAN

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

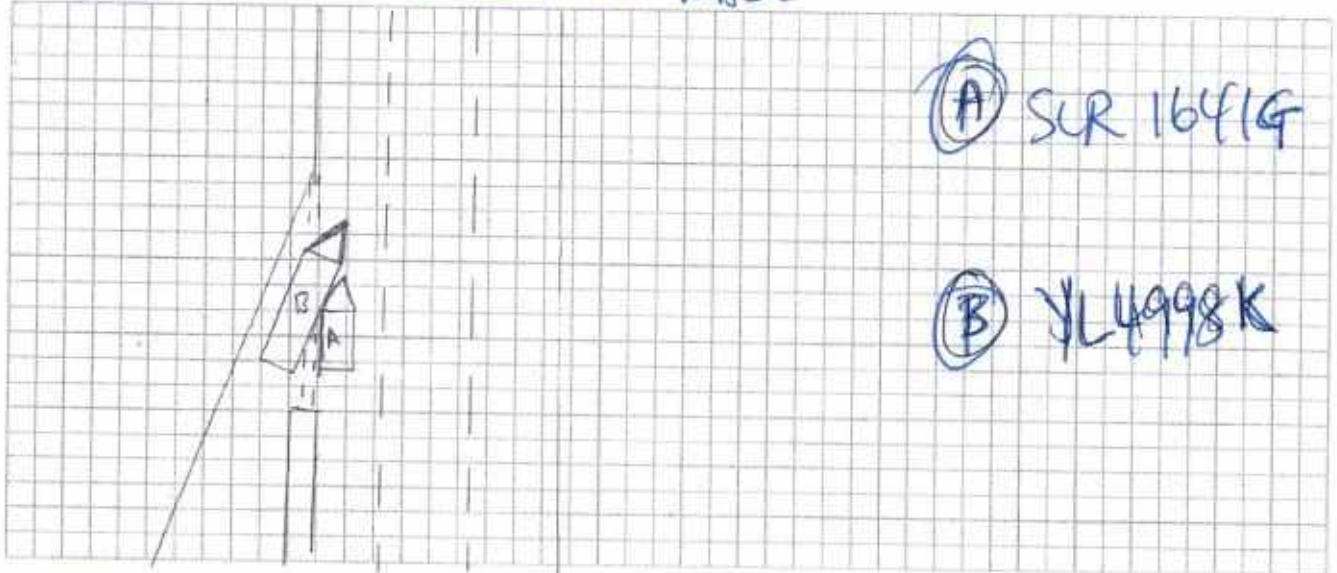
Policyholder's Signature  
Date & Time:

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

SKETCH PLAN

PIE TOWARDS MAS.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

13 JUL 2019 (A) KPE ENTRANCE TO PIE. I WAS DRIVING ALONG PIE WHEN VEHICLE B EXIT FROM THE SLIP WAY AND COLLIDED INTO MY VEHICLE.

POLICE REPORT 7/2019 0717/7011

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature  
Date & Time:

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:





# SINGAPORE POLICE FORCE



T/20190717/7011

1 of 3

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20190717/7011

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 17/07/2019 13:53		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: AMY SNG BEE HUA			Address: APT BLK 435 YISHUN AVENUE 6 #10-2098 SINGAPORE 760435		
ID Type / ID No.: NRIC NO / S6905251G			Contact No.: Home/Office:		Mobile: 96661321
Nationality: SINGAPORE CITIZEN			Email: amysngbh@gmail.com		
Sex: Female	Age: 50	Date of Birth: 17/02/1969	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Hotel operations/Lodging services manager			Driving Licence Information: Class:		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 13/07/2019 12:00	Type of Location: Straight Road
Location:  PAN ISLAND EXPRESSWAY				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLR1641G	Car	MAZDA	MAZDA3 SEDAN 1.5 AT EU6	Red		0
YL4998K	Lorry					0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLR1641G	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSN17505518 01	02/08/2018	01/08/2019



**SINGAPORE  
POLICE FORCE**



T/20190717/7011

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

2 of 3

Report No. T/20190717/7011

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	AMY SNG BEE HUA	ID No.	S6905251G
Related Vehicle	SLR1641G (Car)	Contact No.	96661321
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	14/07/2019	Date Discharge	14/07/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight

**Brief Details.**

On 13th July 2019 at about 12:00hrs, I was driving along PIE towards Tuas near KPE entrance. A truck, YL4998K, enter from the slip road and cut into my lane and collided onto left side of my vehicle. We alighted, exchanged particulars and left the scene.

I went to Onecare Clinic Yishun as I was not feeling well and was given 3 days mc.



# SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 13 Jul 2019 TIME: 1200HRS (hh:mm) 24 hrs Format

LOCATION PIE TWOI TUAR

VEHICLE NUMBER SLR 1641G

INSURED NAME Amy Sng BeeHua

NRIC / FIN S 69052516

CONTACT: 96661321

MAKE Mazda 3 Sedan MODEL 1.5 AT EU 6

Are you claiming under your own insurance policy for repair to your vehicle?

( ) Yes, If No, Pls Select : ( ☒ ) Third Party ( ) Reporting Only

INSURANCE COMPANY

TYPE OF POLICY ( ) COMPREHENSIVE ( ) THIRD PARTY ( ) TPFT

POLICY NUMBER :

NAME DRIVER : ( ☒ ) SAME AS INSURED

NRIC / FIN

CONTACT:

DATE OF BIRTH: 17.02.1969

DRIVING PASS DATE: 10.02.1990

OCCUPATION : ( ) INDOOR ( ☒ ) OUTDOOR

GENDER : ( ) MALE ( ☒ ) FEMALE

EMAIL ADDRESS: ( ) NO EMAIL

ADDRESS OF DRIVER: 435 Fishun Ave 6 #10-2098 S(760435)

Number Of Passenger Include Driver: 1 DRIVER.

Was driver an employee of the Insured's Company? ( ) YES ( ☒ ) NO

If No, Relationship Of The Driver With The Insured

( ☒ ) Owner ( ) Spouse ( ) Friend ( ) Relative ( ) Children ( ) Sibling ( ) Others

Does The Driver Own Any Other Vehicle? : ( ) YES ( ☒ ) NO

If Yes, Vehicle Registration Number Of Driver's Own Vehicle:

Insurance Company Of Driver's Own Vehicle

Weather Conditions: ( ☒ ) Clear ( ) Raining ( ) Drizzling ( ) Others

Road Surface : ( ☒ ) Dry ( ) Wet ( ) Others

Was Any Foreign Vehicle Involved In This Accident? ( ) YES ( ☒ ) NO

Was Anybody Injured In The Accident? ( ☒ ) YES ( ) NO

If YES, Injured details :

Convey By Ambulance: ( ) YES ( ☒ ) NO

Was There Any Video Capture By Car Camera? ( ) YES ( ☒ ) NO

Was There Accident Reported To The Police? ( ) YES ( ☒ ) NO If Yes Attach Police Report

Police Report Number (if any)

Details Of 3rd Party	Name / NRIC	No. of Paxs (incl'driver)	Contact
Veh B YL 4998K	AKA	( ) / Not Sure ( )	
Veh C		( ) / Not Sure ( )	
Veh D		( ) / Not Sure ( )	
Veh E		( ) / Not Sure ( )	
Veh F		( ) / Not Sure ( )	
Veh G		( ) / Not Sure ( )	

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S6905251G



Name



AMY SNG BEE HUA

For LKK/NAC Use Only

Race

CHINESE

Date of Birth

17-02-1969

Sex

F

Country of Birth

SINGAPORE



2885596



NRIC No: S6905251G



For LKK/NAC Use Only

Blood Group Date of issue

A+ - 10-09-1996

APT BLK 435 YISHUN AVENUE 6 #10-2098  
SINGAPORE 760435  
NRIC No: S6905251G

Date: 11/08/2010

No: 6588621



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S 6905251 G

Name:

AMY SNG BEE HUA

For LKK/NAC Use Only

Birth Date: 17 Feb 1969

Issue Date: 03 Aug 2018



002831119E

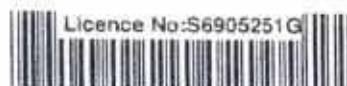
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3 Motor cars with unladen weight  $\leq$  3000kg with  $\leq$  7 passengers, exclusive of driver; and other motor vehicles with unladen weight  $\leq$  2500kg 10 Feb 1990

For LKK/NAC Use Only

NP 428A



Licence No: S6905251G

**CERTIFICATE OF INSURANCE**

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.	DMPCN170551801	Engine No. 18520458956 Chassis No. JMBN22A8H0167243
1. Index Mark and Registration Number of Vehicle	SLR1541G	
2. Name of Policy Holder	MISS AMY ENG SEE HOA	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	2 AUGUST 2018	NAMED DRIVERS EX SECT. 1 .....\$81,000.00 ADDITIONAL EX-OTHER THAN NAMED DRIVERS: EX SECT. 1 - AGE <= 25 .....\$83,000.00 EX SECT. 1 - AGE >= 26 .....\$550.00 * AGE AS AT DATE OF ACCIDENT
4. Date of Expiry of Insurance	1 AUGUST 2019	EX ON WINDSCREEN .....\$9100.00
5. Persons or Classes of Persons entitled to drive *		

(A) THE POLICYHOLDER,

(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS PERMISSION,

PROVIDED THAT THE PERSON DRIVING IS PERMITTED IN ACCORDANCE WITH THE LICENSING OR OTHER LAWS OR REGULATIONS TO DRIVE THE MOTOR VEHICLE OR HAS BEEN SO PERMITTED AND IS NOT DISQUALIFIED BY ORDER OF A COURT OF LAW OR BY REASON OF ANY ENACTMENT OR REGULATION IN THAT BEHALF FROM DRIVING THE MOTOR VEHICLE.

**6. Limitations as to use \***

USE FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS.  
THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD TUITION DRIVING TEST RACING RACE-MAKING, RELIABILITY TRIAL, SPEED-TESTING, THE CARRIAGE OF GOODS OTHER THAN SAMPLES IN CONNECTION WITH ANY TRADE OR BUSINESS OR USE FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

EXCESS WHICHEVER IS APPLICABLE FOR LOSSES OCCURRING OUTSIDE SINGAPORE (CONSTRUCTIVE TOTAL LOSS/THEFT) WILL BE DOUBLED.

ONE TIME WAIVER OF EXCESS FOR THE FIRST \$5000 WILL APPLY TO THE INSURED AND NAMED DRIVERS IN THE EVENT OF OWN DAMAGE CLAIM AT OUR AUTHORISED WORKSHOPS FOR EACH POLICY YEAR.

HIRE PURCHASE CO. : OCBC BANK LTD AS HP OWNER

\* Limitations rendered inoperative by Section 5 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 25 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings

**I/We hereby Certify** that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)  
Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Countersigned By

Authorised Officer

Authorised Signatory



> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Singapore NRIC
Owner ID:	5251G
<b>Vehicle Details</b>	
Vehicle No.:	SLR1641G
Vehicle to be Exported:	No
Intended Deregistration Date:	31 Jul 2019
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA3 SEDAN 1.5 AT EU6
Primary Colour:	Red
Manufacturing Year:	2017
Engine No.:	P520458956
Chassis No.:	JM6BN22A8H0167243
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$15,820.00
Original Registration Date:	02 Aug 2017
First Registration Date:	02 Aug 2017
Transfer Count:	0
Actual ARF Paid:	\$10,820.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	01 Aug 2027
PARF Rebate Amount:	\$8,115.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	01 Aug 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$44,002.00
COE Rebate Amount:	\$35,213.00
<b>Total Rebate Amount:</b>	<b>\$43,328.00</b>

The information contained herein is correct as at 15 Jul 2019

OK

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

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : MNA419092672 Vehicle Registration No: SLR 1641G

Name(as shown in NRIC) : AMY SNG BEE HUA NRIC/FIN/Passport No : S6905251G

(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate

Address : \_\_\_\_\_ Singapore( )

Contact (Tel) : \_\_\_\_\_ Mobile No.: 9666 1321

Email Address : \_\_\_\_\_

Date of Accident : 13.07.2019 Time of Accident : 12:00hrs

Place of Accident : PIE TOWARDS TUAS

Insurance Company: CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

ATTACHED POLICE REPORT NUMBER: T/20190717/7011

\_\_\_\_\_  
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\_\_\_\_\_

AMY SNG BEE HUA  
Policyholder / Driver's Signature  
Date: 18.07.2019

18/07/2019  
Reporting Centre Personnel's Signature  
Name: Robi  
NRIC/FIN No.: U01003  
Date: