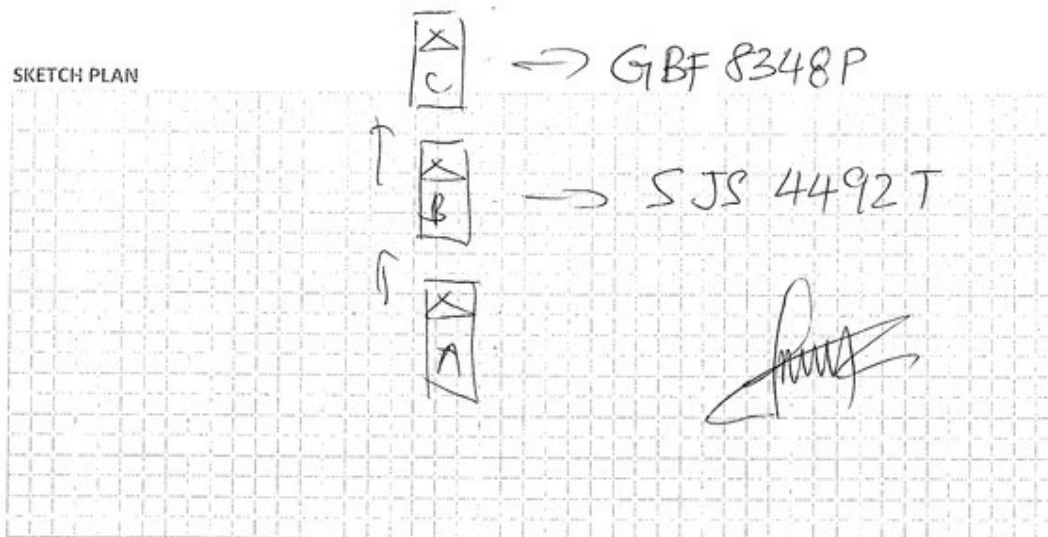


SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

front veh c suddenly stop, I cannot stop entirely
 & hit Veh B, push Veh B forward to Veh C.

[Signature]

DECLARATION

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

[Signature]
 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.:

Identification Card

Accident Photo



Accident Photo



Accident Photo



Accident Photo

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

