SKETCH PLAN

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	- tax		
	& pedertian came		
	(B) from right si		
1 1 4			
	Dead 1		

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to passe	report.	
1		

DECLARATION

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

Policyholder's Signa Date & Time: Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature

Name: NRIC/FIN No.: