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NOTE: PLEASE NOTE THAT	YOUR INSURER MAY HAVE	14 DAYS TIME F	FRAME FOR YO	U TO SUBMIT AN	N
OWN DAMAGE CLAIM UNDER	YOUR OWN POLICY. PLEAS	E CHECK YOUR	R POLICY FOR M	IORE INFORMAT	TION
Please state:					
Claim Own Policy (	) Claim Third Party ( ) Cl	laim OD/TP at other	r workshop	( ) Reporting Only	,
DECLARATION					
We declare the foregoing particulars	are true in every respect.			1	
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Policyholder's Signature	Driver's Signature		Reporting Centre Personnel's Signature		
Date & Time: 24 Apr 20	(If driver is not the policyhold Date & Time:	er)	Name: NRIC/FIN No.:		
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