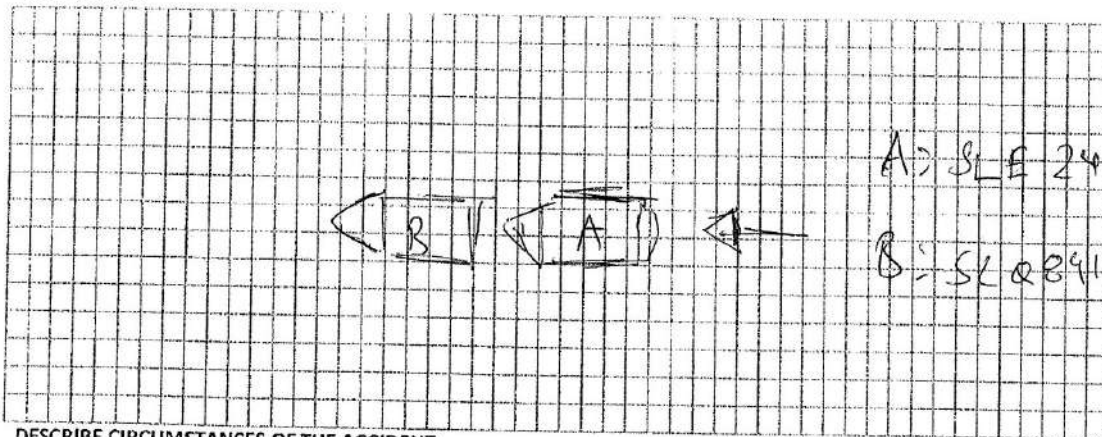


SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was approaching the traffic light junction as I did not manage to stop the vehicle in full stop and hit the front car behind.

Important:

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.

- | | |
|-------------------------------------|----------------------------------|
| ☒ | - Reporting Only |
| ☐ | - Claim OD |
| ☐ | - Claim TP |
| ☐ | - Claim OD/ TP at other workshop |

DECLARATION

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


 Policyholder's signature
 Date & Time 7/12/2020
 12 27


 Driver's Signature
 (If driver not the policyholder)
 Date & Time 7/12/2020
 12 27


 Reporting Centre Personnel's Signature
 Name:
 Nric/Fin No.













