

GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 – 17:00
UEN: S66SS0020G / GST Reg. No.: M400017735

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

ADDENDUM

)	PARTICULARS OF PERS	ON MAKING THE AMENDM	IENTS:	
	Original Report No :_	SS1Y21820004	Vehicle Registration No:	SKC8000B
			NRIC/FIN/PassportNo:	
	(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate			
	Address :_	2 JALAN MUTIARA #0	8-02	Singapore(249183)
	Contact (Tel) :		Mobile No. :9734 019 ²	1
	Email Address : _	szinnxx@gmail.com		
	Date of Accident : _	31/07/2021	Time of Accident :11:	30 AM
	Place of Accident :	RIVER VALLEY ROAD X		
	Insurance Company:	AIG Asia Pacific Insura	nce Pte Ltd	
)	ADDITIONALINFORMATION / AMENDMENTS:			
	Ammend my birth da	te in my original report ir	om "18/08/1995" to "08/08/19	995
	Policyholder / Driver's S Date:	ignature	Reporting Centre Person Name: NRIC/FIN No.: Date:	onnel's Signature

GIARMC addendumform_V3