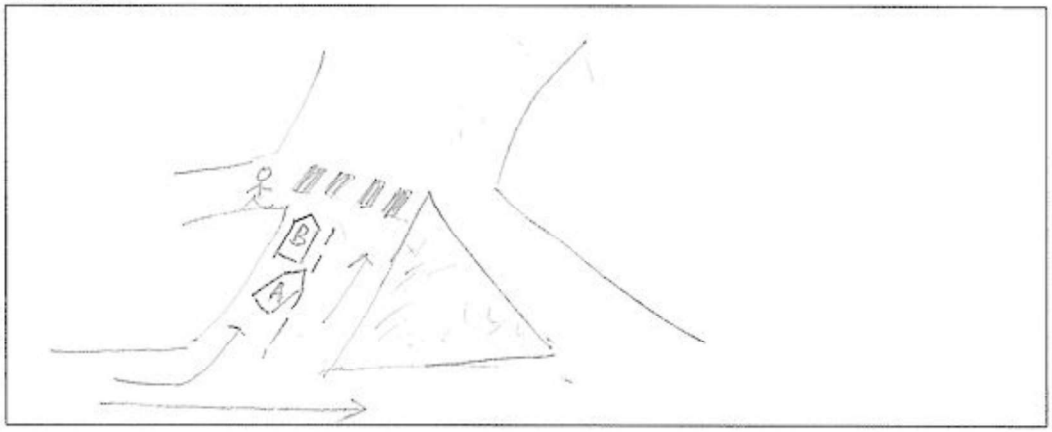
Date of accident: 07 Nov Time: 0730 am. Location: Slip Rd to TPE

My Vehicle A: SMF 3982K Vehicle B: GBH 8059M Vehicle C:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle B stopped @ pedestrain crossing. I stopped behind him. Then he moved a bit in front and I move and about to frter when he suddenly jammed brake, causing me to jam brake and my left side of vehicle bumped into his rear right side.

☐ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☑ Reporting Only

Remarks : Please forward a copy of my efile accident report to :
My workshop :
Email address :
& myself :
Email address :

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

DECLARATION

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

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Zilaj
Ah Lim Motor Comp

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

IMAGES

IMAGES #2

IMAGES #3

IMAGES #4

IMAGES #5

IMAGES #6

IMAGES #7

IMAGES #8

IMAGES #9

IMAGES #10

IMAGES #11

IMAGES #12