| SKETCH PLAN  |   |   |
|--|---|---|
|  | A - Se  | 1a 9463P  |
|  |   | Q 2507Z   |
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| DESCRIBE CIRCUMSTAN  | ICES OF THE ACCIDENT  |   |
| 1 11200 Ca   | my line (middle), exi   | itim ECP into   |
| -  |   | /   |
|  | ad. A white Volkew  |   |
|  | lane even I had   |   |
|  | space to use his  |   |
|  | Wm, he's coming int   | o my lane.  |
| He knoc  | ked into my car   | left front  |
| with de  |   | 1 1   |
|  | 200   3   |   |
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|  |   | 1 [ ]   |
| You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a Fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurance. |   | Reporting Only  |
|  |   | I CI - I - D D  |
|  |   | Claim TP  |
|  | the day of occurance.   | Claim OD / TP at other workshop   |
| DECLARATION  |   |   |
| /We declare the foregoing p  | particulars are true in every respect.                                    | ^   |
| 4. 1-1-  |   | ()  |
| Malifan  | <u> </u>  | - gets  |
| Policyholder's Signature<br>Date & Time:   | Driver's Signature<br>(If driver is not the policyholder)<br>Date & Time: | Reporting Centre Personnel's Signature<br>Name: Rokesworms. Provid<br>NRIC/FIN No.: |































