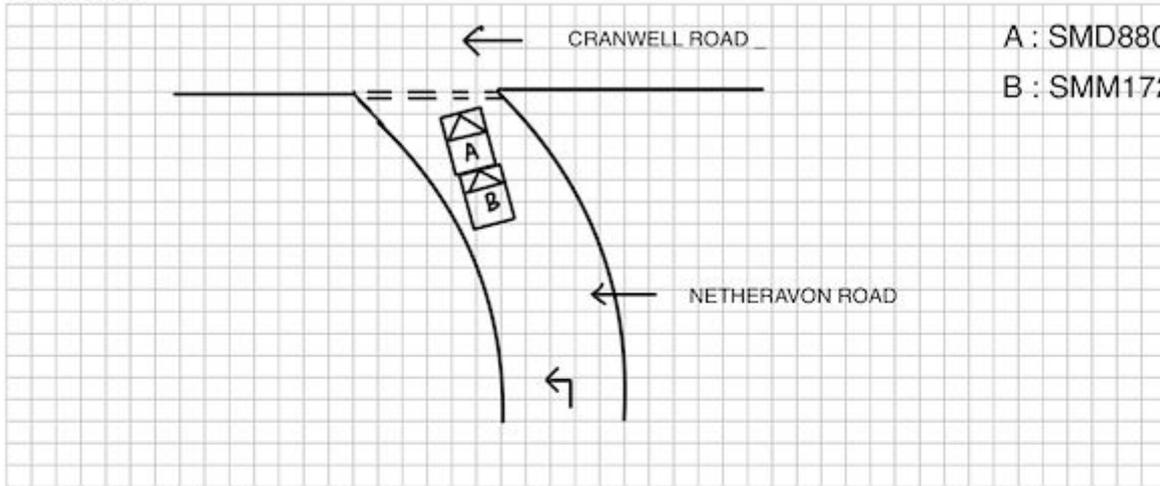


SKETCH PLAN



A : SMD8805S

B : SMM1721Z

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO GEARS _____

(The rest of the form is crossed out with a diagonal line.)

DECLARATION

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

Policyholder's Signature
Date & Time: 04/05/2022
19:30

GIARMC SketchPlanForm_V3

Reporting Centre Personnel's Signature
Name: Louis Lim
NRIC/FIN No.: S994220

2









