

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE  
138 Robinson Road #07-09  
The Corporate Office  
Singapore 068906  
Phone: +65 6224 0010 Fax: +65 6224 0030  
Operating Hours: Monday to Friday 9am to 5pm**

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**ADDENDUM**

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS**

Original Report No : \_\_\_\_\_ Vehicle Registration No : \_\_\_\_\_

Name(as shown in NRIC) : \_\_\_\_\_

(\*Vehicle Driver/Vehicle Owner) (\*Please delete as appropriate

NRIC/Passport No : \_\_\_\_\_

Address : \_\_\_\_\_

Contact (Tel) : \_\_\_\_\_ (H/P) : \_\_\_\_\_

(EMail) : \_\_\_\_\_

Date Of Accident : \_\_\_\_\_ Time Of Accident : \_\_\_\_\_

Place Of Accident : \_\_\_\_\_

Insurance Company : \_\_\_\_\_

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**(B) ADDITIONAL INFORMATION / AMENDMENTS**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:-

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**SIGNATURE OF VEHICLE OWNER/DRIVER**

**DATE:**