

AIG Asia Pacific Insurance Pte. Ltd AIG Building 78 Shenton Way #07-16

MOTOR ACCIDENT INTERVIEW FORM

NAME	: Carolyn Tong Seak Ching
VEHICLE NUMBER	: SIC 7709K
DATE/ TIME OF ACCIDENT	: 23 9 24 @ 5.50 pm
PLACE OF ACCIDENT	: 23 Angulia Park drop-off-poin
THIRD PARTY VEHICLE (IF ANY)	: -

3	(23 toyullia Park) to fetch my et dropped her off before heading ark.
	EFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC TEST ON YOU? IF YES, WHAT WAS THE RESULTS?
what is the type of collision and the e Collision into a co of vehicle damage	extensiveness of the damages to all vehicles involved? Increte block. Front left side d with light leaking.
WERE YOU OR YOUR PASSENGER/S INJURED FOR INVESTIGATION?	D? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE
<i>A</i>	

NAME: Cavolyn Tong Seok Ching
LAFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE

UNDERTAKING

I, Cavolyn Tony Seok Chiry (NRIC No. S76077074, hereby confirm that the Singapore Accident Statement lodged by me on 24 9 24 at 11:20 hours pertaining to the accident involving motor car Reg. No: SLC 7709 Kin which I was the driver are true and		
accurate to the best of my knowledge, information and belief.		
I, Christopher Chory Chi Chuin Reg. No: SLC 7709K and the policyholder of policy no. 2100471730-08		
We acknowledge that the insurer, AIG Asia Pacific Insurance Pte. Ltd. is not liable under the contract of		
Insurance if there is (a) a breach of policy terms and conditions and/or (b) cover under the policy is		
excluded due to the operation of an exclusion(s) under the policy terms and conditions.		
In the event that an unrelated/unreported third party property or injury claim arises or evidence emerges		
that:		
a) there is a breach of policy terms and conditions; and/or		
b) Cover under the policy is excluded due to the operation of an exclusion(s) under the policy terms		
and conditions,		
we irrevocably jointly and severally undertake to absolve my insurer from all liability under the contract		
of insurance and we further jointly and severally undertake to re-pay any and all sums paid by my insurers		
pursuant to the contract of insurance upon my /our receipt of a written demand from the insurers.		
Signature	: Christopher Chong Chi Chuin	
Name of Policyholder	. S74 30550D	
NRIC No.	. 24/9/24	
Date		
Signature	:_ Flory	
Name of Driver	: Carolyn Tong Seok Ching	

NRIC No.

Date