

MIDNIGHT INTERVIEW FORM



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

MOTOR ACCIDENT INTERVIEW FORM

NAME : SEOW YIM PENG, DONA
VEHICLE NUMBER : STX1308L
DATE/ TIME OF ACCIDENT : 10.25pm
PLACE OF ACCIDENT : River Valley Road / Mount Kiam Road
THIRD PARTY VEHICLE (IF ANY) : SLJ8462C Junction

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

Christiansburg, going to Commonwealth.

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT WAS THE RESULTS?

No.

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

Front to front collision.

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

Yes. SGH & Mount Alvernia.
Went to traffic police to file report within 24 hours.



NAME: SEOW YIM PENG, DONA

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE