UNDERTAKING

| I, Ye Shu | jun, (NRIC No. <u>\$9074646D.</u>), hereby |
|--|--|
| confirm that the Singapore | Accident Statement lodged by me on |
| at 1130 hours per | taining to the accident involving motor car Reg. No: |
| SKN2408R , in which | I was the driver are true and accurate to the best of my |
| knowledge, information and | belief. |
| | |
| | ers are not liable under the contract of insurance if there is |
| a breach of policy terms and | conditions. |
| | |
| | ed/unreported third party property or injury claim arises or |
| | that there is a breach of policy terms and conditions, I |
| irrevocably undertake to absolve my insurer from all liability under the contract of insurance and I undertake to re-pay any sums paid by my insurers pursuant to the contract of insurance upon receipt of written demand by my insurers. | |
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| ooniaat of modiance aponi | |
| contract of modification upon | |
| Signature | : fryt |
| | : fry1 |
| Signature Name of Insured / Driver | : fort : Ye RuiBin |
| Signature | : fry1 |
| Signature Name of Insured / Driver | : |
| Signature Name of Insured / Driver Nric No. | : fort : Ye RuiBin |
| Signature Name of Insured / Driver Nric No. | : |
| Signature Name of Insured / Driver Nric No. | : |
| Signature Name of Insured / Driver Nric No. Date | |
| Signature Name of Insured / Driver Nric No. Date Signature Name of Policyholder | : |
| Signature Name of Insured / Driver Nric No. Date Signature Name of Policyholder Nric No. | |
| Signature Name of Insured / Driver Nric No. Date Signature Name of Policyholder | |