



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

MOTOR ACCIDENT INTERVIEW FORM

NAME : CHEONG HUI TING ELIZABETH
VEHICLE NUMBER : SME130 C
DATE/ TIME OF ACCIDENT : 6 DECEMBER 2019, 1943 hrs
PLACE OF ACCIDENT : PAN ISLAND EXPRESSWAY (PIE) TOWARDS CHANGI AIRPORT,
THIRD PARTY VEHICLE (IF ANY) : UNKNOWN MOTOR CYCLE NEAR TAMPINES AVENUE
2 EXIT 3B

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

START JOURNEY: 260A LORONG CHUAN, SINGAPORE 556757

DESTINATION: CHANGI AIRPORT TERMINAL 1, CAR PARK

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, I DID NOT DRINK ANY ALCOHOLIC DRINKS ON THE DAY OF ACCIDENT BEFORE DRIVING.

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

TYPE OF COLLISION: REAR ENDED BY UNKNOWN MOTOR CYCLE ON THE LEFT

DAMAGE TO MY VEHICLE: LEFT REAR BODY, LEFT REAR BUMPER, LEFT BACK TIRE / TIRE RIM
AND REVERSE SENSOR / ELECTRICAL WIRING.

DAMAGE TO THIRD PARTY VEHICLE: UNKNOWN

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

NO.

CHEONG HUI TING ELIZABETH.

NAME:

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE

UNDERTAKING

I, CHEONG HUI TING ELIZABETH, (NRIC No. S8720421 I), hereby confirm that the Singapore Accident Statement lodged by me on 7 DEC 2019 at 0907 hours pertaining to the accident involving motor car Reg. No: SNE 130 C, in which I was the driver are true and accurate to the best of my knowledge, information and belief.

I acknowledge that my insurers are not liable under the contract of insurance if there is a breach of policy terms and conditions.

In the event that an unrelated/unreported third party property or injury claim arises or there is evidence emerges 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.

Signature

:



Name of Insured / Driver

:

CHEONG HUI TING ELIZABETH

Nric No.

:

S8720421 I

Date

:

7 DEC 2019, 10.15 AM

Signature

:

Name of Policyholder

:

Nric No.

:

Date

: