

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

MOTOR ACCIDENT INTERVIEW FORM

NAME	: Lim Boon King
VEHICLE NUMBER	: 24/2/19 SLX 2GRB
DATE/ TIME OF ACCIDENT	: 24/12/19
PLACE OF ACCIDENT	: Car peark next to blk 56/ Chas chu Kang North &
THIRD PARTY VEHICLE (IF ANY)	:
**************************************	**************************************
1 start downey from house	corpark to por my work place.
	FORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC EST ON YOU? IF YES, WHAT WAS THE RESULTS?
WHAT IS THE TYPE OF COLLISION AND THE EX	TENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED? With the pillar at the carpark.
WERE YOU OR YOUR PASSENGER/S INJURED? FOR INVESTIGATION?	? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE
WWW.	
NAME: Lim Boon king	

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE

UNDERTAKING

I, Lim Boon Kiang , (NRIC No. 5000513), hereby confirm that the Singapore Accident Statement lodged by me on 26/12/19 at 1741 hours pertaining to the accident involving motor car Reg. No: 268 B , 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.		
there is evidence emerges to irrevocably undertake to absolute insurance and I undertake to	d/unreported third party property or injury claim arises or that there is a breach of policy terms and conditions, I solve my insurer from all liability under the contract of o re-pay any sums paid by my insurers pursuant to the ceipt of written demand by my insurers.	
Signature	1,6,11, -:	
Name of Insured / Driver		
Name of insured / Driver	Lim Boon Kiang	
Nric No.		
Date	stxxq51]	
Date	26/12/19	
Signature Name of Policyholder	Lim Boan King	
Nric No.	SXXX95IJ	
Date	26/12/19	