UNDERTAKING

I, Kenji Cho Zhi Wei, , (NRIC No. S981676913), hereby

| | taining to the accident involving motor car Reg. No: | |
|--|--|--|
| SJS 7080 L , 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 | : Vegle | |
| Name of Insured / Driver | : Kenii Cho Zhi Wei | |
| Nric No. | : S9816769B | |
| Date | : 20/04/2020 | |
| Signature | : (myo | |
| Name of Policyholder | : CHO YOONG CHOW | |
| Nric No. | : 516126167 | |
| Date | : 20 APRIL 2020 | |



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

MOTOR ACCIDENT INTERVIEW FORM

| NAME | Keyi Cho Zhi Wei |
|---|--|
| VEHICLE NUMBER | SJS Z080L |
| DATE/ TIME OF ACCIDENT | : 20/04/2020, 1300 Hrs. |
| PLACE OF ACCIDENT | : Bukit Timah Plaza Carpark |
| THIRD PARTY VEHICLE (IF ANY) | |
| | ************************************** |
| pormine to make their | none: |
| | FORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC TEST ON YOU? IF YES, WHAT WAS THE RESULTS? |
| | KTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED? (behind the driver) ssenger day was damaged & dented. There were |
| | |
| WERE YOU OR YOUR PASSENGER/S INJURED FOR INVESTIGATION? | ? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE |
| | |
| Kelse | |
| NAME: Keiji Cho Zhi Wei | |

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE