



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

MOTOR ACCIDENT INTERVIEW FORM

NAME : Au Kheng Sheng
VEHICLE NUMBER : SCS 211C
DATE/ TIME OF ACCIDENT : 20 June 20220, 15:30
PLACE OF ACCIDENT : Hanyang Ave 3 towards Enos Link
THIRD PARTY VEHICLE (IF ANY) : -

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

From Hanyang Ave 8 back home

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 -

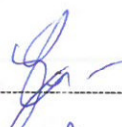
WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

Ran over object on road.

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

No -

NAME:


Au Kheng Sheng


I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE


UNDERTAKING

I, Au Ikeny Sheng, (NRIC No. S76340306), hereby confirm that the Singapore Accident Statement lodged by me on 26/6/2020 at 0800 hours pertaining to the accident involving motor car Reg. No: 9K5211C, 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 : Au Ikeny Sheng
Nric No. : S76340306
Date : 26/6/2020

Signature : 
Name of Policyholder : Au Ikeny Sheng
Nric No. : S76340306
Date : 26/6/2020