



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

MOTOR ACCIDENT INTERVIEW FORM

NAME : Lee Yee Ping
VEHICLE NUMBER : SMR 6727
DATE/ TIME OF ACCIDENT : 16 09 20 16 - 30 AM.
PLACE OF ACCIDENT : J MONG SUAN RD S779211
THIRD PARTY VEHICLE (IF ANY) : XD 7337H

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

CAR WAS STATIONARY AND PARKED WHEN HIT BY TRUCK.

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?

MY VEHICLE WAS HIT ON THE FRONT RIGHT AND SIDE.

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

NO

x
NAME:

Lee Yee Ping

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE