UNDERTAKING

| 1, <u>Geraldene</u> | , (NRIC No. 36672846), hereby |
|-------------------------------|--|
| confirm that the Singapore A | Accident Statement lodged by me on 28 69 2020 |
| _ | taining to the accident involving motor car Reg. No: |
| SMD 81033, in which | I was the driver are true and accurate to the best of my |
| knowledge, information and | |
| I acknowledge that my insur | ers are not liable under the contract of insurance if there is |
| a breach of policy terms and | conditions. |
| In the event that an unrelate | ed/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 at | osolve 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 re | eceipt of written demand by my insurers. |
| | |
| | |
| Signature | : |
| Name of Insured / Driver | : Geraldene Ron |
| Nric No. | |
| Date | \$8623846B |
| | 28 09 2020 |
| | |
| Signature | : |
| Name of Policyholder | : CHUA DONG YANG |
| Nric No. | : S8724 165I |
| Date | : 28/9/20 |
| | 2011/20 |



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

MOTOR ACCIDENT INTERVIEW FORM

| NAME | : Geraldone lan | |
|--|--|--|
| VEHICLE NUMBER | : Smp 8103 J | |
| DATE/ TIME OF ACCIDENT | : 26/09/2020 | |
| PLACE OF ACCIDENT | : BIK 489 Choa Chu Kang Ave S Carpark | |
| THIRD PARTY VEHICLE (IF ANY) | : NA | |
| ************************************** | ************************************** | |
| From 489 Choa Chu Kara | Ave S carpark & was going to | |
| | kang | |
| | | |
| | FORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC EST ON YOU? IF YES, WHAT WAS THE RESULTS? | |
| NO | | |
| | | |
| | | |
| WHAT IS THE TYPE OF COLLISION AND THE EX | TENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED? | |
| Hit on the pillar or | & car parke but no other vehicles | |
| has involved | | |
| | | |
| | | |
| | | |
| WERE YOU OR YOUR PASSENGER/S INJURED? FOR INVESTIGATION? | IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE | |
| Only myself an the sh | nowlder got brisce but did not go to | |
| | e was no investigation | |
| 28/09/20 | | |
| NAME: Geraldene Koh | | |
| I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE | | |