

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

MOTOR ACCIDENT INTERVIEW FORM

NAME	:	Qin Xiang
VEHICLE NUMBER	:	SMR 296P
DATE/ TIME OF ACCIDENT	:	12=10pm 02/10/2020
PLACE OF ACCIDENT	:	Decathlon bedok carpark D
THIRD PARTY VEHICLE (IF ANY)	:	SLN 40T
**************************************		**************************************
DID YOU DRINK ANY ALCOHOLIC DRINKS BE POLICE CONDUCT ANY BREATHE-ANALYSER		OU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC YOU? IF YES, WHAT WAS THE RESULTS?
0 11.1 1 1 1		eness of the damages to all vehicles involved? and parked vehicle.
WERE YOU OR YOUR PASSENGER/S INJURED FOR INVESTIGATION?	? IF INJU	JRED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE
Qn		
NAME: QIN XIANG		

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE

<u>UNDERTAKING</u>

confirm that the Singapore at 4pm hours per SMR296P, in which knowledge, information and	rers are not liable under the contract of insurance if there is		
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	: Qin		
Name of Insured / Driver	:QIN XIANG		
Nric No.	S7466910 G		
Date	: 02/10/2020		
Signature	: On		
Name of Policyholder	QIN XIANG		
Nric No.	S7466910G		
Date	: 07/10/104.		