



UNDERTAKING

I, Chong Mingyang, (NRIC No. S8322527J), hereby confirm that the Singapore Accident Statement lodged by me on 08/10/2020 at 1015 hours pertaining to the accident involving motor car Reg. No: SME 3816M, 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 : Chong Mingyang
Nric No. : S8322527J
Date : 08/10/2020

Signature : 
Name of Policyholder : Chong Mingyang
Nric No. : S8322527J
Date : 08/10/2020



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

MOTOR ACCIDENT INTERVIEW FORM

NAME : Chong Mingyang
VEHICLE NUMBER : SME 3816 M
DATE/ TIME OF ACCIDENT : 07/10/2020 1315 Hrs
PLACE OF ACCIDENT : Narena Square Carpark Lvl 5A
THIRD PARTY VEHICLE (IF ANY) :

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

Started from the carpark and intended to go 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?

Front right of the car hit a pillar. There is a dent and scratches on the bumper, and crack to the right headlight

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

No

Chong Mingyang

NAME:

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE