## **UNDERTAKING**

at <u>1500</u> hours per	Accident Statement lodged by me on 18/12 14/12/20 taining to the accident involving motor car Reg. No: I was the driver are true and accurate to the best of my 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	: Pufr
Name of Insured / Driver	: Ya Zana Rana
Nric No.	: (97) [394c
Date	: 14/12/2000
Signature	: No.00
Name of Policyholder	· Meor
Nric No.	Les Teet Lesw
Date	57133407D 14/1/2020