

UNDERTAKING

I, CHUA LAY CHOO, (NRIC No. S7042443F), hereby confirm that the Singapore Accident Statement lodged by me on 25/03/2021 at 15:39hrs hours pertaining to the accident involving motor car Reg. No: SKH4618U, 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

:

CHUA LAY CHOO

Nric No.

:

S7042443F

Date

:

Signature

:



Name of Policyholder

:

CHUA LAY CHOO

Nric No.

:

S7042443F

Date

:



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

MOTOR ACCIDENT INTERVIEW FORM

NAME : CHUA LAY CHOO
VEHICLE NUMBER : SKH46184
DATE/ TIME OF ACCIDENT : 24/3/2021 @ 1700hrs
PLACE OF ACCIDENT : Tampines South Flyover
THIRD PARTY VEHICLE (IF ANY) : - NA -

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

Tampines Hub to Jurong JEM

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 & Rear

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

No


NAME: CHUA LAY CHOO

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE