

NAME:

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE

AIG Asia Pacific Insurance Pte. Ltd AIG Building 78 Shenton Way

## MOTOR ACCIDENT INTERVIEW FORM

NAME	: LI HONGTAO
VEHICLE NUMBER	: SKN 3039N
DATE/ TIME OF ACCIDENT	: 3 4 2021 21:00 hrs
PLACE OF ACCIDENT	: Reople paroks complex
THIRD PARTY VEHICLE (IF ANY)	:
**************************************	**************************************
DID YOU DRINK ANY ALCOHOLIC DRINKS B POLICE CONDUCT ANY BREATHE-ANALYSER	SEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC TEST ON YOU? IF YES, WHAT WAS THE RESULTS?
what is the type of collision and the e Collided into property	EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?
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WERE YOU OR YOUR PASSENGER/S INJURED FOR INVESTIGATION?	O? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE
813/8	
NAME: LI HONGTAD	

## UNDERTAKING

1, LI HONG	740, (NRIC No. <u>57884007 B</u> ), hereby
confirm that the Singapore	Accident Statement lodged by me on
	ertaining to the accident involving motor car Reg. No:
	ch I was the driver are true and accurate to the best of my
knowledge, information and	
I acknowledge that my insu	urers are not liable under the contract of insurance if there is
a breach of policy terms an	d conditions.
In the event that an unrela	ted/unreported third party property or injury claim arises or
there is evidence emerges	s that there is a breach of policy terms and conditions, I
irrevocably undertake to a	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	: 方面局
Name of Insured / Driver	: LI HONGTAO
Nric No.	5788400713
Date	3/Ap 2021
	7
Signature	: 73/3
Name of Policyholder	
Nric No.	LI HONG TAO 57884007B
Date	: 7-/4-2021
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