

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

MOTOR ACCIDENT INTERVIEW FORM

NAME	: Kong TianLock : SMM 8720E
VEHICLE NUMBER	: <mm 8720e<="" td=""></mm>
DATE/ TIME OF ACCIDENT	: 09/04/2021 0830hr
PLACE OF ACCIDENT	: At carparle Bloch 339 (behind)
THIRD PARTY VEHICLE (IF ANY)	: Arpmokis Are
**************************************	ND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?
Intended destinet	from my home. ion carpale brock 339 (behind)
DID YOU DRINK ANY ALCOHOLIC DRINKS	BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC R TEST ON YOU? IF YES, WHAT WAS THE RESULTS?
	extensiveness of the damages to all vehicles involved? Car slid into the drain. Front of car
were you or your passenger/s injur for investigation? Nobody was ly	ed? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE
alle	
NAME: Kong Tian Loc	le be
1 AFFIRMED THE ABOVE INFORMATION IS	

UNDERTAKING

at <u>0870</u> hours per	Accident Statement lodged by me on 0904 202 retaining to the accident involving motor car Reg. No: h I was the driver are true and accurate to the best of my belief.
I acknowledge that my insura a breach of policy terms and	rers are not liable under the contract of insurance if there is disconditions.
there is evidence emerges irrevocably undertake to a insurance and I undertake	ted/unreported third party property or injury claim arises or that there is a breach of policy terms and conditions, I bsolve my insurer from all liability under the contract of to re-pay any sums paid by my insurers pursuant to the receipt of written demand by my insurers.
Signature Name of Insured / Driver Nric No. Date	: Kong Tian Lock : S1331850F : 09/04/2021
Signature Name of Policyholder Nric No. Date	Kong Tian Lock 51331BCOF