



UNDERTAKING

I, Della Lim Zi Mei, (NRIC No. S9506775A), hereby confirm that the Singapore Accident Statement lodged by me on 19 June 2021 at 1320 hrs hours pertaining to the accident involving motor car Reg. No: SLV4898S, 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 : Della Lim Zi Mei
Nric No. : S9506775A
Date : 21 June 2021

Signature : 
Name of Policyholder : Lim Kar Heng Dennis
Nric No. : S1527083G
Date : 21 June 2021



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

MOTOR ACCIDENT INTERVIEW FORM

NAME : Della Lim Zi Mei
VEHICLE NUMBER : SLV4898S
DATE/ TIME OF ACCIDENT : 19 June 2021/ 1320hrs
PLACE OF ACCIDENT : Irrawaddy Road
THIRD PARTY VEHICLE (IF ANY) : No

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

Journey started from Novena and intended destination to home in Choa Chu Kang

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?

My own vehicle damage in the bonnet and front bumper.

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

No injury to my passenger and I. Traffic police report is made.

NAME: Della Lim Zi Mei

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE