

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

MOTOR ACCIDENT INTERVIEW FORM

| NAME | : | PRADEEP .TIWAR! |
|----------------------------------|---------------------------------------|-------------------------------------------------------------------------------------------------|
| VEHICLE NUMBER | : | SMX 3397 E |
| DATE/ TIME OF ACCIDENT | | 22 NOV 2021 12:50 |
| PLACE OF ACCIDENT | : | NAFA BENCOLLEN |
| THIRD PARTY VEHICLE (IF ANY) | : | WALL |
| ********* | **** | ********** |
| WHERE DID YOU START YOUR JOURNE | Y AND WHERE | WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT? |
| | | |
| From Home To NAFA A | ARTS SCHOOL | d |
| | | |
| | | |
| DID YOU DRINK ANY ALCOHOLIC DRIN | NKS BEFORE Y | OU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC YOU? IF YES, WHAT WAS THE RESULTS? |
| No | | |
| | · · · · · · · · · · · · · · · · · · · | |
| | | |
| | | TO ALL VEHICLES INVOLVED? |
| | THE EXTENSIV | ENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED? |
| Self Accident | | |
| . | | |
| | | |
| | | |
| FOR INVESTIGATION? | IURED? IF INJU | JRED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE |
| No | | |
| | | |
| | | |
| Dales (2) | | |
| Pradep (P) | ·········· | |
| ALABAE. | | |

NAME:

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE

UNDERTAKING

| I PRADEEP TI | ₩ <u>/</u> (K), (NRIC No), nereby | | | |
|----------------------------------------------------------------------------------|-----------------------------------------------------------------|--|--|--|
| confirm that the Singapore | Accident Statement lodged by me on 22 NOV 2021 | | | |
| at 13:45 hours pertaining to the accident involving motor car Reg. No: | | | | |
| SMX3397F, in which | n I was the driver are true and accurate to the best of my | | | |
| knowledge, information and | belief. | | | |
| | | | | |
| I acknowledge that my insur | rers are not liable under the contract of insurance if there is | | | |
| a breach of policy terms and | | | | |
| | | | | |
| in the event that an unrelat | red/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 a | bsolve 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 | : Di | | | |
| _ | | | | |
| Name of Insured / Driver | PRADEEP TIWARI | | | |
| Nric No. | : | | | |
| Date | : 22 NOV 2021 | | | |
| | 22 140. | | | |
| | | | | |
| Signature | : P1 | | | |
| Name of Policyholder | : PRADEEP TIWARI | | | |
| | PRADEEP TIWAR! | | | |
| Nric No. | | | | |
| Date | 22 NOV 2021 | | | |
| | | | | |