



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

MOTOR ACCIDENT INTERVIEW FORM

NAME : LAM SZE JIA
VEHICLE NUMBER : SMN 5700C
DATE/ TIME OF ACCIDENT : 10 DEC 2021 2250H
PLACE OF ACCIDENT : ECP ALONG TOWARDS CHANGI
THIRD PARTY VEHICLE (IF ANY) : SMH 9095X

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

started journey from OHLJMES basement carpark, going home.

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, did not drink any alcohol.

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

Rear-ended a white Audi who jam-braked in response to another car in front who jam braked.

Damage to the front of my vehicle and back of white Audi.

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

No one was injured.

LAM SZE JIA

js

NAME:


I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE


UNDERTAKING

I, LAM SZE JIA, (NRIC No. S8702946H), hereby confirm that the Singapore Accident Statement lodged by me on 11/12/2021 at 1130 hours pertaining to the accident involving motor car Reg. No: SMN 5700C, 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 : LAM SZE JIA
Nric No. : S8702946H
Date : 14/12/2021

Signature : 
Name of Policyholder : LAM SZE JIA
Nric No. : S8702946H
Date : 14/12/2021