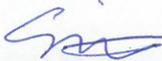


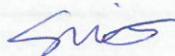
UNDERTAKING

ON ACCIDENT INTERVIEW, SHI YAN, (NRIC No. S8380538B), hereby confirm that the Singapore Accident Statement lodged by me on 12/01/2022 at 9:00 AM hours pertaining to the accident involving motor car Reg. No. SUR 2559T, 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 : SHI YAN
Nric No. : S8380538B
Date : 12/01/2022

Signature : 
Name of Policyholder : SHI YAN
Nric No. : S8380538B
Date : 12/01/2022



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

MOTOR ACCIDENT INTERVIEW FORM

NAME

SHI YAN

VEHICLE NUMBER

SMR2559T

DATE/ TIME OF ACCIDENT

23/11/2021 16:00pm

PLACE OF ACCIDENT

41 Chai Chee Street Carpark

THIRD PARTY VEHICLE (IF ANY)

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

41 Chai Chee Street Carpark

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?

park & found damaged

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

No

NAME:

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE