



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

MOTOR ACCIDENT INTERVIEW FORM

NAME : Lai Weixiong
VEHICLE NUMBER : SLS 8512 U
DATE/ TIME OF ACCIDENT : 29 Nov 2022 9am.
PLACE OF ACCIDENT : Residence Carpark.
THIRD PARTY VEHICLE (IF ANY) : _____

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

Residence Carpark; destination children childcare

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?

Door Scratched against pillar.

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

No.

NAME:

Lai Weixiong

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE