



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

### MOTOR ACCIDENT INTERVIEW FORM

NAME : TAY KIAN KENG  
VEHICLE NUMBER : SLN 57 X  
DATE/ TIME OF ACCIDENT : 5.45 PM 06 JUNE 2023  
PLACE OF ACCIDENT : Ubi Road 3  
THIRD PARTY VEHICLE (IF ANY) : GBF 1579 K

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

From Audio House @ ubi to my house @ Tampines.

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?

Head to Rear

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

NO

  
NAME: TAY KIAN KENG

I AFFIRMED THE ABOVE INFORMATION IS GIVEN TO MY BEST KNOWLEDGE

## UNDERTAKING

I, Tey Kian Keng, (NRIC No. S80722292), hereby confirm that the Singapore Accident Statement lodged by me on 7 Jun 2023 at 2.25 pm hours pertaining to the accident involving motor car Reg. No: SLN 57 X, in which I was the driver are true and accurate to the best of my knowledge, information and belief.

I, HKS Engineering & Trading Pte, (NRIC No. 200716324M), am the owner of motor car Reg. No: SLN 57 X and the policyholder of policy no. 7220047160.

We acknowledge that the insurer, AIG Asia Pacific Insurance Pte. Ltd. is not liable under the contract of insurance if there is (a) a breach of policy terms and conditions and/or (b) cover under the policy is excluded due to the operation of an exclusion(s) under the policy terms and conditions.

In the event that an unrelated/unreported third party property or injury claim arises or evidence emerges that:

- a) there is a breach of policy terms and conditions; and/or
- b) Cover under the policy is excluded due to the operation of an exclusion(s) under the policy terms and conditions,

we irrevocably jointly and severally undertake to absolve my insurer from all liability under the contract of insurance and we further jointly and severally undertake to re-pay any and all sums paid by my insurers pursuant to the contract of insurance upon my /our receipt of a written demand from the insurers.


Signature

Name of Policyholder

NRIC No.

Date

: \_\_\_\_\_  
: \_\_\_\_\_  
: \_\_\_\_\_  
: \_\_\_\_\_



Signature

Name of Driver

NRIC No.

Date

: \_\_\_\_\_  
: TET KIAN KENG  
: S80722292  
: 7 June 2023