



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20240718/7089

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/07/2024 18:00			Vide Report No.:	Station Diary No.:		
Informant's F	Particulars					
Name of Informant: CHAN KWANG KEOH			Address: 48 TELOK BLANGAH DRIVE #03-107 SINGAPORE 100048			
ID Type / ID No.: NRIC NO / S0106532G			Contact No.: Home/Office: Mo			
Nationality: SINGAPORE CITIZEN			Email: kkchan2272@yahoo.com.sg			
Sex: Age: Date of Birth: Male 70 23/05/1954			Type of Informant: Driver			
Race: Chinese			Language: English			
Occupation: Van driver			Driving Licence Information: Class: Date	te of Expi	ry:	

General Information of the Accident							
Type of Accident:	Injury Others		Drink Drive: No	Date/Time of Accident: 18/07/2024 12:30		Type of Location: Straight Road	
Location:							
JURONG WEST STREET 93							
Weather:		Road Surface:					
Clear		Dry					
Traffic Flow:		Traffic Control:			Traffic Volume:		
One Way Not		Not Controlled			Heavy		
Type of Collision: Between Moving Vehicles - Head To Rear						ne conveyed by ılance:	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GV1607U	Motor van					0
SLF7140J	Motor car					0
SMR6641L	Motor car					0

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA		





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CONTINUATION OF REPORT

Driver						
Name	CHAN KWANG KEOH			ID No.		S0106532G
Related Vehicle	GV1607U (Motor van)			Contact No.		96623675
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	nt NIL			harge NIL		
No. of Days granted Medical Leave (MC) 03			Degree of I	of Injury Slight		

Brief Details.

I was traveling along Pioneer Road North towards AYE. Before Boon Lay Way, the vehicle in front of me slowed down and came to a stop. I followed suit. Suddenly I felt and impact from the rear. I alighted and realized that I was involved in a 3 vehicle chain collision.

1st: GV1607U 2nd: SMR6641L 3rd: SLF7140J

I am suffering from neck, back and body ache. I visited Clementi Family & Aesthetic Clinic and received 3 days MC.





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CONTINUATION OF REPORT

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 18/07/2024 18:00
Officer In Charge Of Case: TP / AEIT / BOON YEN KIAN Contact No.: 65472079	Classification Of Case: