



Police Station Of Origin: Ang Mo Kio North N.P.C 51 Ang Mo Kio Avenue 9 SINGAPORE 569784

Tel No: 1800-4849999

1 of 4 Report No. T/20160226/2097

REPORT	OF A	TRAFFIC	ACCIDENT

Date/Time Report Made: 26/02/2016 15:31		Nade:	Vide Report No.:	Station Diary No.: 61	
anienie	Me Patite	ijais			
	f Informant: SOON HEN		Address: APT BLK 706 BEDOK NOR 470706	TH ROAD #09-3426 SINGAPORE	
ID Type / ID No.: NRIC NO / S1476158F			Contact No.: Home/Office: 97835127 Mobile:		
National SINGAF	lity: PORE CITIZ	ŒN.	Email:		
Sex: Male	Age: 54	Date of Birth: 18/10/1961	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation:		₹.	Driving Licence Information: Class: 2B.3.4.5 Date of Expiry:		

		y 2 - 1 (1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -		er a ser en ser en	
Type of Accident:	Injury Conveyed By Ambuland	Drink Drive:	Date/Time of Accident: 26/02/2016 09:20	Type of Location: Straight Road	
Location: Along Road 1 PAN ISLAND Ex	XPRESSWAY before Eunos Exit.				
Weather: Clear	R	Road Surface: Dry		Road Speed Limit:	
Traffic Flow:	1.765	Traffic Control: Not Controlled		Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			51 Ang Mo Kio Ave 9 Singapore 569784	Anyone conveyed by ambulance:	

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SHD9301G	Car	and the self of th			Slightly Damaged	2
SJL3926C	Car				Slightly Damaged	0
SKX4928R	Car				Slightly Damaged	0



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CONTINUATION OF REPORT

Any Pedestrian Involved: No			-			
No. of Pedestrian	s Injured: NIL		Use of Peo	lestrian	Cross	ing: NA
Binya:						
Name	LEOW SOON HENG)		ID No.		S1476158F
D-1-1117-1-1-1-	CLID0204C (C==)	- Angringer		Contact No.		97835127
Related Vehicle	SHD9301G (Car)			Contact NO.		37033127
Hospital/Clinic	SHENTON FAMILY	MEDICAL CI	INIC	Class of		Class: 2B,3,4,5
				Driving		Date of Expiry: NIL
				Licence &		
				Expiry Date		
Date Treatment	26/02/2016		Date Discl			
No. of Days gran	ed Medical Leave	02	Degree of	Injury	Sligh	
Passaron i						
Name	Unknown Passenger		ID No.		NIL	
Related Vehicle	SHD9301G (Car)		Contact No.		90098685	
Hospital/Clinic	NIL			Class of		Class: NIL
	O CONTRACTOR CONTRACTO			Drivin	g	Date of Expiry: NIL
				Licen	e &	15 1/21
				Expiry	Date	
Date Treatment	NIL	AND MARKET TOP TO COMMUNICATION	Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	Injury	Sligh	
Driver						
Name	Zeng Fansheng Rey	nold		ID No		S8843670I
Related Vehicle	SJL3926C (Car)		Contact No.		98739838	
Hospital/Clinic	NIL			Class	of	Class: NIL
i ioopitai oniio				Drivin	17000	Date of Expiry: NIL
				Licen		and the same
				Expin	Date	NO 1984 WAR SHOOT IN CONTROL OF THE TAXABLE PARTY.
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	led Medical Leave	TNIL	Degree of		NIL	



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Name	Unknown Driver		ID No	•	NIL
Related Vehicle	SKX4928R (Car)		Conta	ct No.	96942868
Hospital/Clinic	NIL		Class Drivin Licend Expin	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disc	harge	NIL	
No. of Days granted Medical Leave NIL De		Degree of	Injury	NIL	

Brief Details.

On 26/02/2016 at about 0920hrs, I was driving my taxi SHD9301G along PIE towards Jurong before the Eunos exit. There was two female passengers in my vehicle at that time, one of them carrying a 1 to 2 year old child. As I was driving, the vehicle infront of me SKX4928R slowed down and stopped. I also slowed down my vehicle and stopped. Suddenly, one vehicle SJL3926C hit my car from behind. The huge impact caused my vehicle to move forward and hit the vehicle SKX4928R infront of me.

I quickly made a check on my passengers and realized that one of them had injured her arm during the accident. I alighted to check on the vehicles. The front and rear of my vehicles were damaged. After that, I quickly asked the driver infront to call for ambulance. The traffic police and the ambulance arrived at scene after a while. The traffic police talked to me for a while before I left scene. One of my other passenger, who was not injured, said that she had witnessed the incident.

I went to see a doctor at Shenton Family Medical Clinic (Ang Mo Kio) and got 2 days MC.

I am lodging this report to assist investigation.





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CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

F / Lim Hong Rui	Signature of Informant:
Signature Of Interpreter:	Date/Time:
Not applicable	26/02/2016 15:31
Officer In Charge Of Case:	Classification Of Case:
TP / GIT / MOHD YAZID BIN MOHD YUSOFF	
Contact No.: 65472075	
Authentication State Signature: Singapore Police Force	