

T/20170926/2034

3 of 3

Report No. T/20170926/2034

Continuation of CSF For NP168

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.

| | |
|---------------------------|---------------------------------------|
| Case Sensitivity | No |
| Officer-In-Charge of Case | TP / GIT / NORHIDAWATI BINTE AHMAD |
| Classification of Case | 1) INJURY / ATTENDED BY POLICE |



SINGAPORE
POLICE FORCE

Signature: _____

duf



**SINGAPORE
POLICE FORCE**



T/20170924/2023

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20170924/2023

REPORT OF A TRAFFIC ACCIDENT

| | | | | | |
|--|------------|-------------------------------------|--|--------------------|----------------------------|
| Date/Time Report Made: 24/09/2017 10:13 | | Vide Report No.: E/20170924/0023 | | Station Diary No.: | |
| Informant's Particulars | | | | | |
| Name of Informant: Seo Chee Hwa | | | Address: | | |
| ID Type / ID No.: NRIC NO / S8243039C | | | Contact No.: Home/Office: | | Mobile: |
| Nationality: SINGAPORE CITIZEN | | | Email: | | |
| Sex: Male | Age: 34 | Date of Birth: 19/12/1982 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: | | Institution / School Name: |
| Occupation: UBER DRIVER | | | Driving Licence Information: Class: | | Date of Expiry: |

General Information of the Accident

| | | | | |
|--|---------------------------|--------------------|--|--------------------------------------|
| Type of Accident: | Injury Attended by Police | Drink Drive: No | Date/Time of Accident: 24/09/2017 01:45 | Type of Location: |
| Location: PAN ISLAND EXPRESSWAY Before Thomson Flyover (NEAR OLD POLICE ACADEMY) | | | | |
| Weather: | | Road Surface: | | Road Speed Limit: |
| Traffic Flow: | | Traffic Control: | | Traffic Volume: |
| Type of Collision: | | | | Anyone conveyed by ambulance: Yes |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------|------|-------|-------|------------------|-----------------|
| SHB7671L | taxi | | | | Slightly Damaged | 2 |
| SLF5881S | Car | | | | Slightly Damaged | 0 |



**SINGAPORE
POLICE FORCE**



T/20170924/2023

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20170924/2023

CONTINUATION OF REPORT

Brief Details.

On the above mention date time and location,

I was traveling home from PIE I was traveling towards Thomson flyover, I was traveling at the first of the expressway. As I was traveling as a safe speed suddenly a taxi dash into my lane and it was too close I had no time to brake and I hit onto the taxi rear bumper. I wasn't badly injured but the ambulance were at the location scene to check on the passenger of the taxi who is pregnant. She and the taxi driver was conveyed to the different hospital by different ambulance due to some back pain.



**SINGAPORE
POLICE FORCE**



T/20170924/2023

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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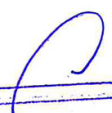
Report No. T/20170924/2023

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.

| | |
|---|---|
| Signature Of Officer Recording The Report: TP / MOHAMMED IZDIHAAR BIN M DAWOODSHA | Signature Of Informant:  |
| Signature Of Interpreter: Not applicable | Date/Time: 24/09/2017 10:13 |
| Officer In Charge Of Case: TP / GIT / Insp NORHIDAWATI BINTE AHMAD Contact No.: 65476310 | Classification Of Case:  SINGAPORE POLICE FORCE |
| Authentication Stamp NP168 | Signature:  |

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet Pg. 1

GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE

IMPORTANT NOTE : Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

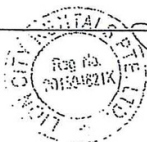
(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MUMG 1727328 Vehicle Registration No : SLF 5881S
Name(as shown in NRIC): LCR
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
NRIC/Passport No : 20150462K
Address : _____
Contact (Tel) : 66944919 (H/P) : _____
(Email) : _____
Date of Accident : 24/09/17 Time of Accident : 01:45
Place of Accident : PIE (Towards Changi Airport).
Insurance Company : ALG

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Addendum → Police Report.
Injury 'Seo Chee Hwa'.
'5days'.



Signature of Vehicle Owner / Driver
Date:

Addendum Sheet Pg. 1

GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE

IMPORTANT NOTE : Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MVM617127328 Vehicle Registration No : SLF 58815
Name(as shown in NRIC): LCR
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
NRIC/Passport No : 20150462K
Address : _____
Contact (Tel) : 66944919 (H/P) : _____
(Email) : _____
Date of Accident : 24/09/17 Time of Accident : 01:45
Place of Accident : PIE (Towards Changi Airport)
Insurance Company : ALG

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Addendum → Police Report

Signature of Vehicle Owner / Driver

Date: