POLICE REPORT Pg. 1





1 of 3

Police Station Of Origin: Ang Mo Kio North N.P.C

51 Ang Mo Kio Avenue 9 SINGAPORE

569784

Tel No: 1800-4849999

Report No. T/20171220/2020

REPORT OF			Lift L. Danert No.:		Station Diary No.:		
Date/Time Report Made:			Vide Report No.:	7	14		
20/12/2017	7 08:02		A CANODISM COMPANY OF THE STREET		Signification of the second second second		
Informatio	sianiou	าอ	man de salación de la companya de l		The state of the s		
Name of Informant: DAVID SREEKANTH S/O			Address: APT BLK 124 KIM TIAN PLACE #02-193 SINGAPORE 160124				
ALAGAPPAN					A Marie		
ID Type / ID No.: NRIC NO / S6843180H			Contact No.: Home/Office:	Mobile: 98060189			
Nationality:			Email:				
SINGAPORE CITIZEN		N					
Sex: Male	Age:	Date of Birth: 09/10/1968	Type of Informant: Driver				
Race:			Language: English	Institution / School Name:			
Indian Occupation: Taxi driver			Driving Licence Information: Class:	Date of E	xpiry:		

Seneral Inform Type of Accident:	Injury Others		Drink Drive: No	Date/Time of Accident: 19/12/2017 16:3	0	Type of Location: Straight Road	
	EXPRESSWAY						
Towards changi airport Weather:		Road	Road Surface: Wet			ad Speed Limit:	
Clear Traffic Flow: One Way	raffic Flow: Traffic		c Control: Controlled		Hea	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Any ami No	yone conveyed by bulance:		

an all the same of		livion.	Tivaciel	ୀତାରଠା	Condition	MO OF PERSONAL
vehide No.	11/199	Make	Model		The second secon	1
SHF654L	Car				9	
						0
SLK7913U	Car					

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Report No. T/20171220/2020

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CONTINUATION OF REPORT

On 19/12/2017 at about 1545hrs I picked up a passenger from Bendemeer road to Tampines Mall. I was traveling along PIE in my taxi (SHF654L) towards tampines , suddenly the vehicle in front of me jammed braked . I then swiftly applied my brakes and swayed to the left to prevent the collision. At this moment the vehicle (SLK7913U) banged onto the back of my vehicle from the rear. Due to the impact my vehicle moved forward and banged onto the front vehicle.

The passenger in my vehicle was thrown sideways as there were more cars pilling up from the rear (

I did not mange to get the front vehicle number plate but have the particulars . banged).

Damage to my car:

1) front portion fully dented

2) front lights smashed

3) both right side doors unable to open.

4) rear portion fully dented

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CONTINUATION OF REPORT

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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: F / CHO JUN XIONG	Signature Of Informant:
Signature Of Interpreter:	Date/Time:
Not applicable	20/12/2017 08:02
	Classification Of Case:
Officer In Charge Of Case:	Classification of oaso.
TP / AEIT / SI ANG YIFING, STEPHANIE SN 085	
Contact 10 65 76414 SN 085	
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