



Date of Expiry:

Report No. T/20180312/2158

Police Station Of Origin: Eunos NPP 629 Bedok Reservoir Road #01-1620 SINGAPORE 470629 Tel No: 1800-4439999

REPORT OF A TRAFFIC ACCIDENT

Occupation:

School principal

12/03/2018 21:48			Vide Report No.: G/20180312/0181	Station Diary No.: 60		
Informant	s Particu	lars				
Name of Informant: PANG CHOON HOW			Address: APT BLK 604 BEDOK RESERVOIR ROAD #05-590 SINGAPORE 470604			
ID Type / ID No.: NRIC NO / S7612950I			Contact No.: Home/Office:	Mobile: 93697270		
Nationality: SINGAPORE CITIZEN			Email:			
Sex: Male	Age: 41	Date of Birth: 13/05/1976	Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		

Driving Licence Information:

Class: 3

Type of Accident:	Injury Special Vehicle	Drink Drive: No	Date/Time of Accident: 12/03/2018 18:3	Type of Location: Straight Road	
Location: Along Road 1 Traveling Toward Road 2 SIMEI AVENUE ALONG SIMEI AVENUE TOWARDS PIE (TUAS) Weather: Road Surface: Road Speed Limit:					
Clear Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume:	
Type of Collision Between Movin	on: ng Vehicles - Head To R	Rear		Anyone conveyed by ambulance: Yes	

Details of V	ehicle Involved					
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJK1195M	Car	NISSAN	SYLPHY 1.5 4AT	Blue	Slightly Damaged	2
SKP325Z	AMBULANCE	RENAULT	MASTER 2.3 DCI 150 AT ABS D/AB	White	Slightly Damaged	2
			6DR TURBO			





Police Station Of Origin: Eunos NPP 629 Bedok Reservoir Road #01-1620 SINGAPORE 470629 Tel No: 1800-4439999 2 of 4 Report No. T/20180312/2158

CONTINUATION OF REPORT

					110000000000000000000000000000000000000	
Details of Perso						
Any Pedestrian II						
No. of Pedestrian	is injurea: NIL		Use of Pedestrian Crossing: NA			
Passenger	PANG CHAI PING			ID No		S7412510G
Name	PANG CHAI PING	,		ID No.		3/4120100
Related Vehicle	SJK1.195M (Car)			Contact No.		96554024
Hospital/Clinic	CHANGI GENERAL HOSPITAL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	12/03/2018		Date Disc	harge 12/03		3/2018
	ted Medical Leave	03	Degree of			
Driver			y.			
Name	PANG CHOON HOW			ID No.		S7612950I
Related Vehicle	SJK1195M (Car)			Contact No.		93697270
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disc	harge	NIL		
No. of Days grant	NIL	Degree of Injury NIL				
Driver						
Name	MUHAMMAD SAIFUL BIN ABDUL RAZAK			ID No.		S9133663D
Related Vehicle	SKP325Z (AMBULANCE)			Contact No.		81825247
Hospital/Clinic	NIL .			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment NIL			Date Discharge NIL			
No. of Days granted Medical Leave NIL Degree of Injury NIL						

Brief Details.

On the 12/03/2018 at about 1835hrs, I was driving my vehicle, SJK1195M, along Simei Ave on the slip road towards PIE (Tuas), while traveling on the slip road, I slowed down my vehicle as I was about to filter into PIE, all of a sudden, vehicle SKP325Z, collided onto me at the rear of my vehicle. It was a ambulance. We got down of our vehicles and the paramedics made a check on us. My mother and sister were in the vehicle throughout the whole incident. My mother did not feel any discomfort at that point of time whereas my sister, Pang Chai Ping, felt a slight pain of the back of her head. Paramedics did a check and informed that there was a bump in the back of her head and asked if she would want to be conveyed by ambulance. She agreed and went to Changi General Hospital and given 3 days of MC.





Police Station Of Origin: Eunos NPP 629 Bedok Reservoir Road #01-1620 SINGAPORE 470629 Tel No: 1800-4439999 3 of 4 Report No. T/20180312/2158

CONTINUATION OF REPORT

Subsequently, Traffic Police came and took over the scene. After which, they informed me to lodge a report which is why I am doing so.





Police Station Of Origin: Eunos NPP 629 Bedok Reservoir Road #01-1620 SINGAPORE 470629 Tel No: 1800-4439999 4 of 4 Report No. T/20180312/2158

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:	Signature Of Informant:			
G/ ·				
Sgt 2 KOH WEN RUI	Some .			
The state of the s				
Signature Of Interpreter:	Date/Time:			
Not applicable	12/03/2018 21:48			
Officer In Charge Of Case:	Classification Of Case:			
TP / AEIT /				
STDZUL HAIRIE BIN RAMLI				
Contact No. 165476220				
Authentication Stamp				
NP168				
and the state of t				
CALCALA TV. LOVE				
SIGNATURE				
The state of the s				