Sketch Plan Pg. 3





Police Station Of Origin:

Thomson NPP

25 Sin Ming Road #01-180 SINGAPORE

570025

Tel No: 1800-4529999

REPORT OF A TRAFFIC ACCIDENT

		1 of 3
Repor	t No.	T/20180624/2087

Date/Time 24/06/2018	-	ade:	Vide Report No.:	Station Diary No.: 18		
Informant	s Particul	ars		P14670/30 H55 33 12 23 39 36 0 1 3 34 44 6		
Name of Ir	formant:		Address:			
KRISHNAVENI D/O P		-	4 JALAN MINGGU SINGAPORE 577337			
KASIVISV	NATHAN					
ID Type / II	D No.:		Contact No.:			
NRIC NO / S1257245Z		5Z	Home/Office:	Mobile: 97974559		
Nationality:			Email:			
SINGAPORE CITIZEN		N				
Sex:	Age:	Date of Birth:	Type of Informant:			
Female	60	09/12/1957	Driver			
Race:			Language:	Institution / School Name:		
Indian						
Occupation:			Driving Licence Information:			
DIRECTOR			Class: 3	Date of Expiry:		

General Informat	ion of the Accident			
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 23/06/2018 20:00	Type of Location:
Location: Along Road 1 PAN ISLAND EX WHITLEY ROAD				
Weather: Roa		Road Surface:		Road Speed Limit:
Clear		Dry		
Traffic Flow:		Traffic Control:		Traffic Volume:
				Moderate
Type of Collision:			Anyone conveyed by	
Between Moving Vehicles - Head To Rear			ambulance:	
No				No

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJL9507P		MITSUBISHI	LANCER 1.6 GLX CVT SPORTS AIRBAG 2WD 4DR		Slightly Damaged	1
SKE4355T	Car	BMW	X1 SDRIVE18I AT D/AB 2WD 5DR GAS/D SR		Slightly Damaged	0

Sketch Plan Pg. 4



Tel No: 1800-4529999



2 of 3

Report No. T/20180624/2087

Police Station Of Origin: Thomson NPP 25 Sin Ming Road #01-180 SINGAPORE 570025

CONTINUATION OF REPORT

Details of Perso	n Involved				
Any Pedestrian I			A STATE OF THE STA		
No. of Pedestriar	Use of Pe	destrian	Cross	sing: NA	
Driver	· · · · · · · · · · · · · · · · · · ·				THE SERVICE OF THE
Name	Tan Boon Leng Kenneth		ID No.		S1628031C
Related Vehicle	SJL9507P		Contact No.		96363621
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave NIL	Degree of	Injury	NIL	
Driver					
Name	KRISHNAVENI D/O P KASIVISVANATHAN		ID No.		S1257245Z
Related Vehicle	SKE4355T (Car)		Contact No.		97974559
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL
Date Treatment	NIL Date Disc		narge	NIL	
No. of Days grant	ed Medical Leave NIL	Degree of	Injury	NIL	

Brief Details.

On the 23/06/2018 at 2000hrs, I was travelling along PIE towards Bukit Timah. The weather was clear and traffic volume moderate. I was travelling (SKE4355T) along PIE exiting towards Whitley road. Suddenly, I felt a hit from the rear. I stopped my vehicle and came out to make a check. One vehicle (SJL9507P) had collided into my vehicle's rear. I spoke with the driver and decided on insurance claim. The damages to my vehicle is the bumper detached. The damages to the other vehicle is the front portion dented. I do not have an in-car camera installed. I have not gone to see a doctor yet but I felt pain on my neck and back area. I am lodging this report for insurance claim.

Sketch Plan Pg. 5





Police Station Of Origin: Thomson NPP 25 Sin Ming Road #01-180 SINGAPORE 570025 Tel No: 1800-4529999 3 of 3 Report No. T/20180624/2087

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 E / Sgt 1 CASSIDY TAN GIA LOK	Signature Of Informant
Signature Of Interpreter:	Date/Time:
Not applicable	24/06/2018 19:34
Officer In Charge Of Case: TP / AEIT / Sgt 2 YEO KIA HUAT Contact No.: 65476325	Classification Of Case:
Authentication S POLICE FORCE	5N 070
NP168	
SIGNATURE	