



Police Station Of Origin:

Thomson NPP

25 Sin Ming Road #01-180 SINGAPORE

570025

Tel No: 1800-4529999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: Vi 14/09/2018 16:28

Vide Report No.:

Station Diary No.:

Report No. T/20180914/2115

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Informant	's Particu	ılars				
Name of Informant: MOHAMMAD NORSAIFUL BIN ABDUL HAMID			Address:			
ID Type / ID No.: NRIC NO / G2639787T			Contact No.: Home/Office:	Mobile: 92438851		
Nationality: MALAYSIAN			Email:			
Sex: Male	Age: 27	Date of Birth: 01/01/1991	Type of Informant: Driver			
Race: Malay			Language:	Institution / School Name:		
Occupation: DELIVERY MAN			Driving Licence Information: Class: 3	Date of Expiry:		

General Information of the Accident						
Type of Accident:	Injury Others		Drink Drive: No	Date/Time of Accident: 14/09/2018 12:10		Type of Location: X-Junction
Location: Along Road 1 Traveling Toward Road 2 LORONG 7 TOA PAYOH TOA PAYOH EAST. Junction of LORONG 7 TOA PAYOH and TOA PAYOH EAST						
Weather: Clear		Road Surface: Dry			Road Speed Limit:	
Traffic Flow: Two Way	Traffic Control: Traffic Light - Working			Traffic Volume: Moderate		
Type of Collision: Between Moving \	Vehicles - Head To Si			Anyo ambu No	ne conveyed by ulance:	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
PGM6983		0 -				0
SH8778U		HYUNDAI	SONATA NF 2.0 CRDI AT ABS 2WD	Blue		0
			4DR TURBO			





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CONTINUATION OF REPORT

Details of Perso	n Involved						
Any Pedestrian I	nvolved: No						
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA				
Driver		evere el ema	2020020000000000				
Name	MOHAMMAD NORSAIFUL BIN ABDUL HAMID					G2639787T	
Related Vehicle	PGM6983			Contact No.		92438851	
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL			Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL	
Date Treatment	14/09/2018	Date Disch		NIL			
No. of Days granted Medical Leave 07			Degree of	-	NIL		

Brief Details.

On 14/09/2018 at about 1210hrs, I was driving my vehicle(PGM6983) at junction of Lor 7 Toa Payoh and Toa Payoh East.

At the point of time, my vehicle was travelling on the centre lane along Toa Payoh east and stop behind the traffic light with a vehicle (SH8778U). when the traffic light turn green, I started to make my left turn into Lor 7 toa payoh with my left signal on. Suddenly, I felt an impact from the left of my vehicle as such I alighted to make a check and discovered that my vehicle was hit by vehicle (SH8778U).

I would wish to state that the lane that vehicle (SH8778U) proceeding straight at a turn left lane only. which resulting a collision to happen between my vehicle and vehicle (SH8778U).

I would wish to state that there was no police or ambulance attend to the accident. My vehicle does not have in-built camera.

Due to the accident, I felt pain on my neck and lower back as such I went to consult doctor and was given a seven days medical leaves.

I am lodging this report for insurance claim purpose.





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CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

the certificate with you now, please fax a copy	to 65474885 stating the <u>report number</u> as reference.
Signature Of Officer Recording The Report:	Signature Of Informant:
E/	
Sgt 2 TAN CHIN SENG, JASON	
Signature Of Interpreter:	Date/Time:
Not applicable	14/09/2018 16:28
	I who we
Officer In Charge Of Case:	Classification Of Case:
TP / AEIT /	
Sgt 2 SHARIFAH NOR FARIZAN BINTE SYE	SINGAPORE SN 070
MOHD SAID	POLICE FORCE SIN 070
Contact No.: 65476172	
Authentication Stamp NP168	
-	SIGNATURE

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have