

SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Delice report no 7/20190402/
TOUS,

DECLARATION

I/We declare the foregoing particulars are true in every respect,  $^{-1}$ 

TE

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time

Signature Reporting Centre F Name: NRIC/FIN No.:

## Driver's Driving License/ NRIC Pg. 1

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$2640641B



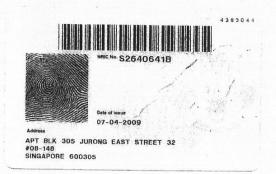
FONG TING KWOK

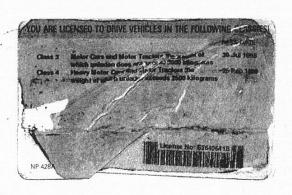
方 定 國 CHINESE

CHINESE
Date of birth Sex
22-06-1955 M
Country of birth
HONG KONG









## POLICE REPORT Pg. 1

Police Station Of Origin: Jurong West NPC Jurong O. vision

Serial No. F 01048

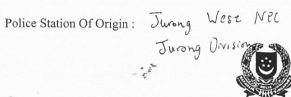
Report No.

IP No.

10 In-charge: TP IO Sharifun

			R	EPORT		FFIC ACC					
Date and Time			•		Vide Report I	No.:	Station D	ary No.:			
2/4/19	2330	lhrs									
Informant's P	articulare	-		-		1000					
Informant's Particulars Name of Informant:				Address:							
Fong Ting Kwok					Aget Blk 305 Jurong East St 32 Postal Code: 600305						
ID Type/No:			Date of	Birth:	Contact No.:- Mobile: 98433102 Driving Licence Information:-						
526406418			22/06		Home: Office: Class: 3,4 Date of Expiry:						
			Sex:	1	Type of Informant: ☑ Driver ☐ Rider ☐ Cyclist ☐ Vehicle Owner ☐ Pedestrian ☐ Passenger ☐ Pillion ☐ Police Officer ☐ Others (specify)				destrian		
Occupation: (st	tate name a	and ad	dress of work	place if you a	re working or	name of school	institution if	you are a student)			
Lorr				•							
General Infor	mation on	the A	ccident		,		***************************************				
		DE	atal D-Injury	al □-Injury 🖾 Non-Injufy			Date of Accident: Typ		pe of Location:		
						01104			☐ Flyover ☐ Roundabout		
Type of Accide	ent:			n-injury, involved:			□ Bridge □ Gradient □ St		aight Road		
		oreign vehicle lit & Run	reign vehicle  Pedestrian / Cyclist & Run Police vehicle				D V institut D Print Property				
Location of Ac	cident (sta	te roa	d name and sp	ecify landmar	k [if anv]. If a	ccident occurred	d at junction.	state all road names	that form the	iunction)	
48 Tah G	uan R	oad	Fast N	Julia Ctor	er (an P	cale Ente	rorise t	lub, rn from	+ 01 #0	1-119	
Type of Collisi			2000 1	14.11 3 101	cy cur i	ark, Little	F. OC.	Jan Iron	Weather		
(i) Between mo		eles			(ii) Moving Vehicle Against : Clear						
☐ Head on ☐ Head to Rea ☐ Head to Side ☐ Others (spec	r □ Side	Swip	Ä.	rection)	□ Road Di	Vehicle □ Pede ivider/Kerb □ C	Others (specify	mal 🗆 Lamp Post	☐ Raining ☐ Others	(specify):	
Traffic Flow:			ffic Control:		Volume:				ive:		
				y ☐ Moderate ☐ Wet ☑ Dry t ☐ No traffic ☐ Others (specify):		Limit: Yes No					
		Aanual Contro Incontrolled			ne Li Others	s (specify):	km/h	Anyone conveyed by ambulance : Yes No			
Details Of Veh	icle(s) &	Drive	r(s) Involved				THE ALTER CONTROL OF THE ALTER				
/Colour		Damage (serious, slight or no	nage Name & ID ous, of Driver age)		Contact No	Degree of Injury & Days Giver M/Leave	Name of Insurance Co.	Insurance Cert. No.	Validity Period o insurance		
YK53236	White No		No damage	Fong Ting Kw S2690641	ok 3,4	98433102	_	_	_	_	
JSQ8225	Black		No damage	Ng Khai Yo	ng Unknown	8 19 9 9 149		_		_	
				×: .	1	in the second		4			
						-21					
Details of Othe					ian, Pillion, et Contact No.						
Name ID No.			Related Vehicle		Degree of Injury	Days Warded	Days given Medical Leave	Hospital/	Clinic		
								7			
							1		1		

## POLICE REPORT Pg. 2



Report No. 7/20190403/2005 IP No. IO In-charge: TP IO Sharitah

•	CONTINUATION	OF REPORT
Information on Pedestrian(s) Involved		
Any Pedestrian Involved: Yes (No		
No. of Pedestrians Injured: Whether Pede	estrian Crossing Was Used : lot Used D Not Available	Pedestrian Degree of Injury: □ Killed □ Seriously Injured □ Slightly Injured □ Not Injured
Information on Evewitness		
Any eyewitness available: Yes /(No) Eye	witness'-Particulars Available contact number to the Investi	e: Yes (No (if Yes to both, please provide the eyewitness' particulars igation Officer)
Brief Details. This report shall be signed by	the informant.	•
On 01/04/2019 at 1320 hrs, I	was driving my	lorry YK5323G in the multi-storey
Carpark of Enterprise Hub	, 48 Toh Guan Rd	Bast. There was foreign black motorcycle
JJQ8225 parked inversort	of a shop Fol	1-119. There were a lot of rehirles and
the road was narrow.	There were goods	s in front of an adjacent shop and
		was avoiding the goods, I turned right
as a receit The	touched the	car box of the motorcycle and it fell
		orry appeared not to have any damages.
No one was injured. No	government prop	erty was camaged.
	¥	
·		
72.3	- 5-	
Instructions 1. Number each vehicle and show direction of travel by arrow.		Sketch Plan
1 2	-	
2. Number each pedestrian and show direction by arrow.		
Use solid line to show path of vehicle before accident	goo	ids 2
1 dotted line		
after accident.	and the second	#01-119
<ol> <li>Show distance and direction to landmarks, identify by name.</li> </ol>		#01-11-1
<ol><li>Include road signs and any other important physical features.</li></ol>	s. Taken	
IMPORTANT: Please attach a copy of you now, please fax a copy to the Traffic Police	ar vehicle's Insurance Cert	ifficate to this report. If you don't have the certificate with you
Rank/Name/Signature Of Officer Recording SC/Sgt Lai Yuen Sheng		Signature Of Informant:
Name/Signature Of Interpreter:		Date:
Investigation Officer In-Charge Of Case:	SN 126	
TP IO Sharifah	AA, 11	Classification Of Case:
Authentication Stamp Signature:	100	
NPIGS COMINGADORE Police F	orce 2 of 2	