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Report No. T/20190411/2074

Police Station Of Origin: Choa Chu Kang N.P.C 20 Choa Chu Kang Street 52 #01-02 SINGAPORE 689286

SINGAPORE 689286 Tel No: 1800-7659999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/04/2019 13:40		ide:	Vide Report No.:	Station Diary No.: 90	
Informant'	s Particul	ars			
Name of In FO CHIA K			Address:		
ID Type / II			Contact No.: Home/Office:	Mobile: 98927696	
FIN NO / G2025097L Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 29	Date of Birth: 23/02/1990	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation:			Driving Licence Information:	Date of Expiry: 30/06/2019	

General Inform	nation of the Accident	le e le experience			
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 11/04/2019 11:30)	Type of Location: Carpark
Location: Along Road 1 WEST COAST Blk 516 WEST	ROAD COAST ROAD CARPA	RK			
Weather:	V	Road Surface:		Road	d Speed Limit:
Traffic Flow: Dual Carriage	Way	Traffic Control: Not Controlled			fic Volume: Fraffic
Type of Collision		car door			one conveyed by ulance:

Details of V	ehicle Invo	lved				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBC6081L	Lorry	ISUZU	NHR85AUE4	White	No	0
	,		AC		Damage	
WSB7228	Car				Slightly	1
					Damaged	

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





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CONTINUATION OF REPORT

Driver		- 河野県 山川				
Name	LEE CHEE LOON			ID No.		G2853646T
Related Vehicle	GBC6081L (Lorry)			Contact No.		96113304
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL		Date Discharge NIL			
No. of Days gran	ted Medical Leave	NIL	Degree of Injury NIL			
Driver			inging-in)-		1000	The state of the state of
Name	FO CHIA KEONG			ID No		G2025097L
Related Vehicle	WSB7228 (Car)		Contact No.		98927696	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: 2B,3 Date of Expiry: 30/06/2019
Date Treatment NIL			Date Discharge NIL			
No. of Days gran	ted Medical Leave	NIL	Degree of Injury NIL			

Brief Details.

On 11/04/2019 at about 1130hrs, I was driving my vehicle bearing plate number WSB7228 in Blk 516 West Coast Road - Open space Carpark. There was a vehicle bearing plate number GBC6081L suddenly made a reversed out of the lot and hit onto the left rear door of my vehicle. I am lodging this report for insurance claim.





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CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle	e's Insurance Certificate to this report. If you don't have
the certificate with you now, please fax a copy to	55474885 stating the report number as reference.

Signature Of Officer Recording The Report:	Signature Of Informant:
Signature Of Interpreter: Softapplicable re Polica Force	Date/Time: 11/04/2019 13:40
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp	

