

Sketch Plan #2



**SINGAPORE
POLICE FORCE**



T/20190610/2181

1 of 4

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

Report No: T/20190610/2181

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/08/2019 18:02		Vide Report No.:		Station Diary No. 99	
Name of Informant: HIEW YOKE KONG, MELVIN		Address: APT BLK 764 WOODLANDS CIRCLE #12-558 SINGAPORE 731754			
ID Type / ID No.: NRIC NO / S80365781		Contact No.: Home/Office:		Mobile: 96153492	
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 38	Date of Birth: 16/11/1980	Type of Informant: Rider		
Race: Chinese		Language:		Institution / School Name:	
Occupation: kitchen chef		Driving Licence Information: Class: 2B, 2A		Date of Expiry:	

Type of Accident:	Injury Attended by Police:	Drink Drive: No	Date/Time of Accident: 09/08/2019 11:45	Type of Location: Straight Road
Location: Along Road 1 CENTRAL EXPRESSWAY				
CIE/AKE:		Road Surface: Dry	Road Speed Limit:	
Weather: Clear		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear		Anyone conveyed by ambulance: Yes		

Vehicle 1:	Motorcycle	SUZUKI	GSX400 M	Blue	Seriously Damaged	0
Vehicle 2:						
Insurance:	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.		MC/00607758	20/04/2019	19/04/2020	

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T7201906102181

2 of 4

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7879999

Report No: T7201906102181

CONTINUATION OF REPORT

Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Name	HIEW YOKE KONG, MELVIN	ID No.	S80365791
Related Vehicle	FBE3642C (Motorcycle)	Contact No.	95153492
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B, 2A Date of Expiry: NIL
Date Treatment	09/08/2019	Date Discharge	09/08/2019
No. of Days granted Medical Leave	05	Degree of Injury	NIL
Name	LEE HOW CHUEN	ID No.	S9009083F
Related Vehicle	NIL	Contact No.	NIL
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
Name	MELISSA SECK LING LING	ID No.	S8706877C
Related Vehicle	NIL	Contact No.	92785766
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

Event Details:

On 08 June 2019 at about 1:14pm, I was riding on the 2nd lane of 4 lanes along CTE. Out of sudden, a motorcyclist from the most right lane swerved into my lane which caused me to jam brake. However, I could not stop in time thus collided onto its rear. Due to the impact, I fell off my motorcycle and hit onto a taxi on the 3rd lane. Subsequently, another motorcycle collided onto my motorcycle's rear. I was stucked between the blue car and the taxi. The taxi have to shift a little so that I was free from being trapped between my motorcycle, traffic Police and ambulance was at scene. I was being conveyed to Tan Tock Seng Hospital. I was given 05 days of medical certificate. I do not have any in vehicle camcorder on my motorcycle.

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20190810/2181

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No. 1800-7679998

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Report No. T/20190810/2181

CONTINUATION OF REPORT

Sketch Plan #5



**SINGAPORE
POLICE FORCE**



1720190810/2181

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

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Report No: 1720190810/2181

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 This Report

CHIEF SUFFRINTENDANT

Signature Of Informant

Signature Of Informant

Signature Of Informant

Signature Of Informant

Signature Of Informant

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