

Police Station Of Origin: Clementi N.P.C

20 Clementi Avenue 5 SINGAPORE 129858 Tel No: 1800-8729999

Any Pedestrian Involved: No No. of Pedestrians Injured: NIL Report No. T/20190818/2125

REPORT OF A TR	AFFIC ACCIDENT	i				
Date/Time Rep 18/08/2019 23:	ort Made: 34		Report No. 190804/009			Station Diary No.: 170
Informant's Pa	irticulars		4 Welling 7	MR FOR THE		
Name of Inform VIMALEASSVA	ant:	Addr		<u> Primings (Free)</u>	<u> 西島 (2018)</u> 	<u> 200章 警 建筑 医自动操作系统</u>
THANGAMANI	MAN 5/O	APT	BLK 698A J	URÓNG V	VEST CENTR	AL 3 #02-45
ID Type / ID No		Gont	SAPORE 64 [,] act [.] No.:	1698	<u></u>	· · · · · · · · · · · · · · · · · · ·
NRIC NO / \$85	35241E		e/Office:	. 1.	Mobile: 8	7527007
Nationality: SINGAPORE C	TIZEN	Emai			Rioblie, o	1021901
Sex: Age	: Date of Birth:	Type	of Informant		<u>.</u>	<u> </u>
Male 33	13/09/1985	Rider	.	•	4	
Race: Indian		Langu			Institution	/ School Name:
		Englis				, Tanton Itanio,
Occupation: Private security of	officer	Drivin	g Licence In	formation:	•	
1 Triale Security (JIIICEI	Class		7.4	Date of Ex	piry:
General Informat	ion of the Accident	有人被服 为		engar a		
Type of	Injury	, ',	Drink	Date/Ti	me of	Type of Location:
Accident:	Conveyed By Ambu	lance	Drive:	Accider	it:	Bend
Location:	<u> </u>	-	LNo	04/08/2	019 13:05	
Along Road 1		,			•	
PAN ISLAND EX	PRESSWAY		•	. ,		
Weather:		· .	, -,	· \		
Clear	• • • • • • • • • • • • • • • • • • • •		Surface:		Roa	d Speed Limit:
Traffic Flow:		Dry.	On of the L	<u> </u>	<u> </u>	
One Way		Not Co	Control:			fic Volume:
Type of Collision:		1101 00	rid Oned	<u>·····</u>		lerate
Between Moving V	ehicles - Head To Sid	de	•		Any	one conveyed by :
				•	No	ulance.
Programme and the second						· · · · · · · · · · · · · · · · · · ·
Details of Vehicle	New A Control of the Control of Land Control of the	AND THE				
Vehicle No Type	Make	推[M	odel	Color	Condition	No of Passenger
SCX9289M Car	,	,		S Herry Control (1947)	*** * ** ******************************	0
				<u>: </u>		, ,
Details of Person		n Wellen	· · · · · · · · · · · · · · · · · · · ·	21°45 % 100		
Ama Daille (1901)	HANDINGO	对例例为可能	遭到時期 三世里的	1000		

Use of Pedestrian Crossing: NA





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CONTINUATION OF REPORT

2 of 3 Report No. T/20190818/2125

Name	VIMALEASSVARAN S/O THAN	GAMANI ID No.	S8535241E
			5.0002712
Related Vehicle	NIL	Contact	No. 87527907
Hospital/Clinic	NIL	Class of	Class: NIL
		Driving	Date of Expiry: NIL
		Licence	
		Expiry [)ate
Date Treatment	NIL		VIL The state of t
No. of Days grant	ted Medical Leave NIL		JIL

Brief Details.

On 04/08/2019 at about 1304hrs, I was travelling along PIE towards Tuas. I was travelling on the 3rd lane of the expressway.

While I rode past Dunearn Road exit, a Mercedes Benz bearing registration plate number SCX9289M was on the 2nd lane and abruptly change to the 3rd lane. I could not stop in time and hit onto the left side of the car. My right foot hit on to the left passenger door of the vehicle. I had a swell on my right foot.

I then stopped my bike at the road shoulder. A female driver, Chua H/P: 9007 8833, alighted from SCX9289M and assisted me to call for an ambulance. I was attended by medical staffs and was conveyed to Ng Teng Fong Hopsital. I was hospitalized in Ng Teng Fong Hospital from 04/08/2019 and I was discharged on 08/08/2019. I had a fractured toe on my right foot.

I did not have any camera installed on my helmet. I was riding at a speed of about 70 to 80km/hr





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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'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:	Signature Of Informant:
Sgt 2 WONG WAI CHONG	
Signature Of Interpreter: Not applicable	Date/Time: 18/08/2019 23:34
Officer In Charge Of Case: TP / GIT /	Classification Of Case:
SI YEO CHUN JIAN	
	DRE .
Authentication Stamp NP168	TORCE 1

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T/20190828/2164

Police Station Of Origin:

Clementi N.P.C

20 Clementi Avenue 5 SINGAPORE 129858

Tel No: 1800-8729999

1 of 3 Report No. T/20190828/2164

REPORT OF A TRAFFIC ACCIDENT

Date/Time 28/08/201		ade:	Vide Report No.: T/20190818/2125	Station Diary No.: 154			
Informant	s Particu	ars					
Name of Ir		****	Address:				
VIMALEAS	SSVARAN	S/O	APT BLK 698A JURONG WEST CENTRAL 3 #02-45				
THANGAMANI			SINGAPORE 641698				
ID Type / ID No.:			Contact No.:				
NRIC NO / S8535241E		1E	Home/Office:	Mobile: 87527907			
Nationality:			Email:	,			
SINGAPO	RE CITIZE	N .					
Sex:	Age:	Date of Birth:	Type of Informant:				
Male 33 13/09/1985		13/09/1985	Rider				
Race:			Language:	Institution / School Name:			
Indian		•	English				
Occupation:			Driving Licence Information:				
Private security officer		r	Class: 2B	Date of Expiry:			

General Inforn	nation of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 04/08/2019 13:05	Type of Location: Bend	
Location: Along Road 1 PAN ISLAND	EXPRESSWAY				
Weather: Clear	Road Dry	Surface:		Road Speed Limit:	
		affic Control: t Controlled		Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes	

Details of V	ehicle Involved					
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FBP5505U	Motorcycle	YAMAHA	SNIPER	Blue	Slightly	0
00000000			T150		Damaged	
SCX9289M	Car					0

Details of Ve	ehicle Insurance		atras militar da estada a	San
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBP5505U	MSIG INSURANCE (SINGAPORE)	60855440	26/04/2019	25/04/2020
	PTE. LTD.			





T/20190828/2164

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CONTINUATION OF REPORT

2 of 3 Report No. T/20190828/2164

Details of Perso	n Involved						
Any Pedestrian I	nvolved: No						
No. of Pedestrians Injured: NIL Use of			Use of Pe	e of Pedestrian Crossing: NA			
Rider							
Name	VIMALEASSVARAN S/O THANGAMANI			ID No	•	S8535241E	
Related Vehicle	FBP5505U (Motorcycle)			Conta	ict No.	87527907	
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL			Class Drivin Licent Expiry	g	Class: 2B Date of Expiry: NIL	
Date Treatment	04/08/2019 Date Dis			harge	08/08	3/2019	
No. of Days granted Medical Leave 42			Degree of	fInjury	Serio	us	

Brief Details.

I have made an traffic accident report reference to T/20190818/2125. I would like to add the registration number of my motorcycle as it was not indicated in the last report.

That's all.





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CONTINUATION OF REPORT

Sketch Plan

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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: D / Sr Staff Sgt MUHAMMAD KHAIRULDIN BIN SAMIAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 28/08/2019 22:30
Officer In Charge Of Case: TP / GIT / SI YEO CHUN JIAN	Classification Of Case:
Contact No.: 65476213 SINGAPORE SINGAPORE SN 37 Authentication Stamp NP168	

SIGNATURE