



Police Station Of Origin: Changkat NPP 109 Tampines Street 11 #01-261 SINGAPORE 521109 Tel No: 1800-7819999

1 of 4 Report No. T/20190827/2115

REPORT OF A TRAFFIC ACCIDENT

| Date/Time Report Made: 27/08/2019 16:16 | | | Vide Report No.: | Station Diary No.: 24 | | |
|---|--|----------|--|----------------------------|--|--|
| diemed | | lens """ | | | | |
| Name of Ir ONG CHIN | | • | Address: APT BLK 519 BEDOK NORTH AVENUE 1 #03-406 SINGAPORE 460519 | | | |
| ID Type / ID No.: NRIC NO / S1464515B | | | Contact No.: Home/Office: | ontact No.: | | |
| Nationality: SINGAPORE CITIZEN | | | Email: | | | |
| Sex: Age: Date of Birth: Male 58 13/06/1961 | | | Type of Informant: Driver | | | |
| Race: Chinese | | | Language: | Institution / School Name: | | |
| Occupation: Taxi driver | | | Driving Licence Information: Class: Date of Expiry: | | | |

| | akoroldingar-Jidem | | | | |
|--|--------------------|-----------------------|---|-------------------------------|--|
| Type of Accident: | Injury Others | Drink Drive: No | Date/Time of Accident: 27/08/2019 13:30 | Type of Location: | |
| Location: Junction of Road 1 and Road 2 LORONG CHUAN CARDIFF GROVE | | | | | |
| Weather: Road | | Road Surface: | F | Road Speed Limit: | |
| Traffic Flow: | | Traffic Control: | Т | Traffic Volume: | |
| Type of Collision: Between Moving Vehicles - Head To Side | | | а | Anyone conveyed by ambulance: | |

| TATE AND THE RESPONSIBLE OF THE | | | Medal | Calor | Cionidition | No of Ressenger |
|---------------------------------|-----|---------|--|-------|-------------|-----------------|
| SHD6827B | Car | HYUNDAI | I40 1.7 CRDI F/L AT ABS AIRBAG 4DR | | | 1 |
| SJN6386E | · | HYUNDAI | I30 (FD) 1.6L AUTO ABS AIRBAG 2WD 5DR | Grey | | 4 |



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CONTINUATION OF REPORT

| Any Pedestrian In | A STATE OF THE PARTY OF THE PAR | | | | Section of the sectio | | | |
|--|--|---------------------------------------|------------|---|--|-----------------------------------|--|--|
| <u> </u> | | | | | Use of Pedestrian Crossing: NA | | | |
| Araign e costa da la Ara | | , 10 2 4 10 | | | | | | |
| Name | Leong Choon Lan | | | ID No | | S1693389I | | |
| Related Vehicle | SHD6827B (Car) | | | Contact No. | | 91098225 | | |
| Hospital/Clinic | Y M CHAN CLINIC & SURGERY | | | Class of Driving Licence & Expiry Date | | Class: NIL Date of Expiry: NIL | | |
| Date Treatment | 27/08/2019 | | Date Discl | harge | NIL | | | |
| No. of Days grant | ted Medical Leave | 03 | Degree of | | | | | |
| Driver . | | | | | | | | |
| Name | ONG CHIN SIONG | | | ID No | | S1464515B | | |
| Related Vehicle | SHD6827B (Car) | | | Contact No. | | 81381040 | | |
| Hospital/Clinic | Y M CHAN CLINIC & SURGERY | | | Class of Driving Licence & Expiry Date | | Class: NIL Date of Expiry: NIL | | |
| Date Treatment | 27/08/2019 | | Date Disc | harge | NIL | | | |
| No. of Days grant | ed Medical Leave | 03 | Degree of | | NIL | | | |
| Driver | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | | | |
| Name | Ong Fong Chew | | | ID No | | S1836395Z | | |
| Related Vehicle | SJN6386E | | | Contact No. | | 97472365 | | |
| Hospital/Clinic | NIL . | | | Class Drivin Licend Expiry | g | Class: NIL Date of Expiry: NIL | | |
| Date Treatment | NIL | | Date Disch | narge | NIL | | | |
| No. of Days granted Medical Leave NIL Degree of Injury NIL | | | | | | | | |

Brief Details.

On 27/8/2019 at about 1.30pm, I was driving in my taxi (SHD6827B) with my wife along Lorong Chuan. We were driving on the left-most lane, past Cardiff Grove, when a car turning out from Cardiff Grove collided with my taxi. The front of the other car (SJN636E) had collided with the passenger side of my taxi.

At the time, the driver, Mr Ong Fong Chew had about 4 passengers with him at the time. After the collision, I then exchanged particulars with him and carried on with our journey. No parties required immediate medical assistance.





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Due to the collision, my wife and I were experiencing pain on our backs, neck, legs and shoulders. My wife was experiencing numbness on her left side, while I had numbness on the right side. We had gone to a doctor at Y M Clinic and Surgery and were given 3 days medical leave for our injuries.

There is a dashboard camera installed in my taxi which had recorded footage of the collision. The footage is kept by comfort delgro taxi.





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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 Repo | ort: Signature Of Informant: |
|--|------------------------------|
| G / Sgt 3 MUHAMMAD HARIZ SIM JIA JUN MUHAMMAD HAFIZ SIM | BIN |
| Signature Of Interpreter: | Date/Time: |
| Not applicable | 27/08/2019 16:16 |
| Officer In Charge Of Case: TP / AEIT / SSI 2 JUREMAH BINTE AHMAD | Classification Of Case: |
| | NGAPORE LICE FORCE |
| Authentication Stamp NP168 | |
| | SIGNATURE |