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Report No. T/20190830/2176

Police Station Of Origin: Eunos NPP 629 Bedok Reservoir Road #01-1620 SINGAPORE 470629

Tel No: 1800-4439999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/08/2019 19:22			Vide Report No.:	Station Diary No. 35		
Informa	nt's Partic	ulars				
Name of Informant: TEE WEN JIE			Address: APT BLK 596 ANG MO KIO ST 53 #17-341 SINGAPORE 560596			
ID Type / ID No.: FIN NO / G2269114M			Contact No.: Home/Office:			
Nationality: MALAYSIAN		SK	Email:			
Sex: Male	Age:	Date of Birth: 14/11/1994	Type of Informant:			
Race: Chinese			Language: Chinese	Institution / School Name:		
Occupation: Food/Drink stall assistant			Driving Licence Information: Class: Date of Expiry:			

General Infor	mation of the Acciden	t	TO SERVICE SERVICE			
Type of Accident:	Non-Injury Foreign Vehicle		Drink Drive: No	Date/Time of Accident: 30/08/2019 16:40	Type of Location: Straight Road	
	I EXPRESSWAY TOWARDS TUAS BEF	ORE CLI	EMENTI EX			
Weather:			Surface:		Road Speed Limit:	
Traffic Flow: Traff		11.000000000000000000000000000000000000	ic Control: Controlled		Traffic Volume: Heavy	
Type of Collis Between Mov	ion: ing Vehicles - Head To	Rear			Anyone conveyed by ambulance:	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
MCP8100	Car	S 23	- 60		Slightly	0
SH6619J	Car	a a			Slightly Damaged	1
SHA988A	Car				Slightly Damaged	0





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CONTINUATION OF REPORT

Details of Perso				The said	To Pale	
Any Pedestrian I					7	
No. of Pedestriar	Use of Per	destriar	Cross	sing: NA		
Driver						
Name	TEE WEN JIE			ID No.		G2269114M
Related Vehicle	MCP8100 (Car)			Contact No.		91227266
Hospital/Clinic	EASTERN MEDICAL	×	Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	30/08/2019	46	Date Disc			3/2019
No. of Days gran	ted Medical Leave	02	Degree of			
Driver		TAX DE			N. Carlo	STATE OF THE STATE
Name	TAY HOCK HUA		8	ID No.		S1237137C
Related Vehicle	SH6619J (Car)			Contact No.		ŅIL
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of			
	HO OUTNO LEGIS			NAME:		为那性以来,是非常 是
Name	HO CHENG LEONG		ID No.		S0124337C	
Related Vehicle	SHA988A (Car)			Contact No.		NIL
Hospital/Clinic	NIL			Class Driving Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL Date Disc			-	NIL	
The same of the sa	ted Medical Leave	NIL	Degree of			

Brief Details.

On the above-mentioned date, time and place, whilst driving along the rightmost lane of the 3 lane road, traffic was very heavy and vehicles were all slow moving. The vehicle infront of me, SH6619J, came to a stop and I followed suit. Both our vehicles were stationary when suddenly, I felt an impact to the rear of my vehicle. The impact caused my vehicle to surge forward, colliding into the vehicle infront of me. All drivers got out of our vehicles and took photos of the damages, as well as exchanged particulars. We then left the scene.

I do not have any in-car camera within my vehicle.





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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:	ř.
Staff Sgt SHAWN YUEN CHI WENG	Su	
Signature Of Interpreter: Not applicable	Date/Time: 30/08/2019 19:22	
Officer In Charge Of Case: TP / AEIT /	Classification Of Case:	
Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED MOHD SAID Contact No.: 65476172	At.	
Authentication Stamp	1	¥.