

T/20200120/2135

1 of 3 Report No. T/20200120/2135

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT  Date/Time Report Made: 20/01/2020 16:56			Vide Report No.:	Station Diary No.:		
Informant Name of Ir HIEW KIA	nformant:	lars	Address: 7618 JALAN ENGGANG 20 BA JOHOR	ANDAR PUTRA 81000 KULAI		
ID Type / ID No.: FIN NO / G6563062T Nationality: MALAYSIAN			Contact No.: Home/Office: Email:	Mobile: 90307034		
Sex: Male Race:	Age: 30	Date of Birth: 20/09/1989	Type of Informant: Rider Language:	Institution / School Name:		
Chinese Occupation PSA			Driving Licence Information: Class:	Date of Expiry:		

Seneral Information  Type of Accident:	mation of the Accident Injury Conveyed By Ambulance	Drink Drive:	Date/Time of Accident: 16/01/2020 18:20	Type of Location
Location: Along Road 1 YUAN CHING ALONG YUA Weather:	G ROAD N CHING ROAD	ad Surface:		Road Speed Limit:
Traffic Flow:		iffic Control:	Traffic Volume:	
Type of Collision:				Anyone conveyed by ambulance: Yes

	ehicle Involva Type	Make	Model	Color	Condition	No of Passenger
JRJ5764	Motorcycle					0
SHD8596D	Car	HYUNDAI	I40 1.7 CRDI F/L AT ABS AIRBAG	Yellow		0



Report No. T/202001:

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## CONTINUATION OF REPORT

Any Pedestrian I	nvolved: No	Account and the second		sing. NA
No. of Pedestriar	ns Injured: NIL	Use of Pedestrian Crossing: NA		
Rider				
Name	HIEW KIAN ONN		ID No.	G6563062T
Related Vehicle	JRJ5764 (Motorcycle)		Contact No.	90307034
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Di	scharge NIL	
vo. of Days grant	ed Medical Leave NIL		of Injury NIL	

## Brief Details,

ON STATED DATE, TIME AND LOCATION,

I WAS TRAVELLING ALONG YUAN CHING ROAD ON THE SECOND LANE. A TAXI ON THE FIRST LANE SUDDENLY CUT INTO THE SECOND LANE AS HE PROBABLY DID NOT NOTICE THAT THERE WAS TWO MOTORBIKES ON HIS LEFT. THE MOTORCYCLE INFRONT OF ME COLLIDED WITHT THE TAXI WHILE I SKIDDED BECAUSE I HAD ABIT OF DISTANCE FROM THE TAXI AND TRIED TO AVOID HITTING INTO IT. AS A RESULT, I FELT TO THE GROUND. PASSER-BYS CONTACTED THE AMBULANCE AND RENDERED ASSISTANCE TO ME. AFTERWARDS, I WAS





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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: TP/ MUHAMMAD AMIRUL M

Signature Of Interpreter: Not applicable

Officer In Charge Of Case: TP / GIT / Sr Staff Sgt LIM ENG KUAN, CLARENCE Contact No.: 65476195

**Authentication Stamp** NP168

Signature Of Informant:

Date/Time: 20/01/2020 16:56

Classification Of Case:



SINGAPORE POLICE FORCE