



SINGAPORE POLICE FORCE



T/20200418/2009

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

1 of 3

Report No. T/20200418/2009

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/04/2020 10:25		Vide Report No.: J/20200401/0051		Station Diary No.:	
Informant's Particulars					
Name of Informant: TAN TECK GUAN			Address: APT BLK 442 ANG MO KIO AVENUE 10 #07-1187 SINGAPORE 560442		
ID Type / ID No.: NRIC NO / S8825195D			Contact No.: Home/Office: Mobile: 82225625		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 31	Date of Birth: 15/07/1988	Type of Informant: Rider		
Race: Chinese			Language:		Institution / School Name:
Occupation: OTHERS			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 01/04/2020 06:40	Type of Location:
Location: Along Road 1 GUL ROAD 55 GUL ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBJ6076R	Motorcycle	YAMAHA	FZ 16	Black	Seriously Damaged	0
SHD8542J	Car				Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBJ6076R	NTUC Income Insurance Co-Operative Limited	5066893860-05	31/07/2019	30/07/2020



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CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	TAN TECK GUAN	ID No.	S8825195D
Related Vehicle	FBJ6076R (Motorcycle)	Contact No.	82225625
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	01/04/2020	Date Discharge	17/04/2020
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
Driver			
Name	Unknown Driver	ID No.	NIL
Related Vehicle	SHD8542J (Car)	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

Brief Details.

ON THE ABOVE MENTIONED DATE, TIME AND LOCATION. I WAS RIDING MY BIKE GOING STRAIGHT ON A SINGLE LANE OF A TWO WAY ROAD DIVIDED BY A SINGLE CONTINUOUS WHITE LINE. I NOTICED THE SAID TAXI WAS STATIONARY AHEAD OF ME, WITHOUT ANY HAZARD LIGHTS. BEFORE I OVERTAKE THE SAID TAXI, SUDDENLY THE TAXI MADE A SHARP RIGHT TURN WITHOUT ANY SIGNAL LIGHT AND CAUSED ME TO COLLIDE ONTO THE TAXI THEN I FELL ONTO THE GROUND.

THATS ALL
IO ESMOND



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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 DANIAL BIN KHAIRILAMRI

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
SI YEO CHUN JIAN
Contact No.: 65476213

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
18/04/2020 10:25

Classification Of Case:

