

1 of 3

Report No. T/20200520/7011

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

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/05/2020 14:35			Vide Report No.:	Station Diary No.:	
Informa	nt's Particu	llars		NAC DESCRIPTION OF THE PROPERTY OF THE PROPERT	
Name of Informant: H MOHAMED ASHRAF			Address: APT BLK 556 ANG MO KIO AVENUE 10 #09-1910 SINGAPORE 560556		
ID Type / ID No.: NRIC NO / T0022082A			Contact No.: Home/Office:	Mobile: 89315725	
Nationality: SINGAPORE CITIZEN			Email: ashrafromeoboi@gmail.com		
Sex:         Age:         Date of Birth:           Male         19         27/06/2000			Type of Informant: Rider		
Race: Indian			Language: Institution / School Nan English		
Occupation: Student			Driving Licence Information: Class: 2B	Date of Expiry:	

Type of Accident: Injury Attended by Police		Drink Date/Time of Accident:		Type of Location Straight Road	
Location: ANG MO KIO	AVE 5	In. do. f			
Weather: Clear		Road Surface: Wet		Road Speed Limit: 50 Km/h	
Clear					
Clear Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light	

Details of V	ehicle Involved	deal of the	PER STATE	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		TENSE STREET
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FT7306X	Motorcycle	YAMAHA	RXZ	Black	Slightly Damaged	0
SJG2017J	Car			Grey	Seriously Damaged	0

	ehicle Insurance	是的是自己的		THE CHARLES W.
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FT7306X	NTUC Income Insurance Co-Operative Limited	5108991729-01	18/04/2020	17/04/2021





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## CONTINUATION OF REPORT

Name H MOHAMED ASHRAF ID No. T002206  Related Vehicle FT7306X (Motorcycle) Contact No. 8931572	32A
Related Vehicle FT7306X (Motorcycle) Contact No. 8931572	32A
Related Vehicle FT7306X (Motorcycle) Contact No. 8931572	32A
Total of Total (Motoroyolo)	
	25
Hospital/Clinic 24 HOUR WALK-IN CLINIC Class of Driving Licence & Expiry Date	B Expiry: NIL
Date Treatment 20/05/2020 Date Discharge 20/05/2020	

## Brief Details.

ON THE STATED VENUE, DATE AND TIME, I, VEHICLE A BEARING MOTOR PLATE FT7306X EXITED A GANTRY, STOPPED AND WAS CHECKING THE MAIN ROAD IF THERE IS ANY INCOMING CAR.

SUDDENLY, I FELT A STRONG IMPACT FROM THE REAR OF MY MOTORBIKE. I FELL ON MY LEFT SIDE AND REALIZED VEHICLE B, BEARING CAR PLATE SJG2017J HAD COLLIDED ONTO THE REAR OF MY VEHICLE.

AFTER THE ACCIDENT, I SUFFERED PAIN ON MY NECK AND BACK. SO I WENT TO INTEMEDICAL





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3 of 3 Report No. T/20200520/7011

## CONTINUATION OF REPORT

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Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report habeen authenticated by SingPass. No signature required.		
Signature Of Interpreter: Not applicable	Date/Time: 20/05/2020 14:35		
Officer In Charge Of Case: TP / TPHQ / RASHIDAH BINTE AZMAN Contact No.: 65476216	Classification Of Case:		

**Authentication Stamp** 

NP168