



Police Station Of Origin:  
Woodlands West N.P.C.  
1 Woodlands Street 12 SINGAPORE 738622  
Tel No: 1800-363 9999

Report No. T/20190315/2001

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 15/03/2019 00:19	Vide Report No.: F/20190314/0094	Station Diary No.: 7
--	-------------------------------------	-------------------------

Informant's Particulars			
Name of Informant: NAGARAJAN APLASAMY		Address: A 05-06 TMN PULAI FLORA SKUDAI JOHOR	
ID Type / ID No.: PASSPORT / A51918411		Contact No.: Home/Office: Mobile: 01112730939	
Nationality: MALAYSIAN		Email:	
Sex: Male	Age: 48	Date of Birth: 17/05/1970	Type of Informant: Driver
Race: Indian		Language: English	Institution / School Name:
Occupation: Bus driver		Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 14/03/2019 15:45	Type of Location: Straight Road
Location: Along Road 1 SELETAR EXPRESSWAY  ALONG SLE TOWARDS WOODLANDS , TPE(SLE) 11KM to TPE(SLE) 11KM BEFORE JLN KAYU EXIT				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GW1756S	Lorry				Slightly Damaged	0
JSM7	Bus/Coach/Mi nibus				Seriously Damaged	30
WMW8901	Bus/Coach/Mi nibus				Seriously Damaged	29

Certified True Copy  
pursuant to Sec. 78 of the  
Evidence Act, Cap 97.

*W*

Yat Hwee Choo  
CSO Traffic Police  
Date :

18-9-19



Police Station Of Origin:  
Woodlands West N.P.C.  
1 Woodlands Street 12 SINGAPORE 738622  
Tel No: 1800-363 9999

Report No. T/20190315/2001

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	NAGARAJAN APLASAMY	ID No.	A51918411
Related Vehicle	WMW8901 (Bus/Coach/Minibus)	Contact No.	01112730939
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	14/03/2019	Date Discharge	14/03/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	MOHD AZWAN BIN MOHAMMAD ZAWAWI	ID No.	A36393345
Related Vehicle	NIL	Contact No.	0104414156
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 14/03/2019 at about 3.45pm, I was driving my company's bus WMW8901 when I was involved in an accident. There was about 29 passengers inside my bus. At that point of time, I was travelling on the 3rd lane of SLE towards Woodlands behind another bus of my same company, JSM7 when suddenly JSM7 changed lane to the 2nd lane to avoid another vehicle which I do not know of. I decided to follow JSM7 to change to the 2nd lane when suddenly JSM7 which was in front of me, applied emergency brakes. I could not stop or change lane on time to avoid and hit onto the rear side of the said bus. I was then trapped at my driver seat as I could not move. I sustained minor injuries on my hands and legs. Then an ambulance came to the scene and conveyed me to Sengkang Hospital. I received outpatient treatment and received 3 days of medical leave reference EMD201925116. There was no injuries reported from my passengers at that point of time. I am lodging this as advised by the traffic police whom attended to my accident reference number F/20190314/0094.

Certified True Copy  
pursuant to Sec. 78 of the  
Evidence Act, Cap 97.

Yet Hwee Choo  
CSO Traffic Police  
Date: 18-9-19



**SINGAPORE  
POLICE FORCE**



T/20190315/2001

3 of 3

Report No. T/20190315/2001

Police Station Of Origin:  
Woodlands West N.P.C.  
1 Woodlands Street 12 SINGAPORE 738622  
Tel No: 1800-363 9999

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: L / Sgt 2 NUR FADILAH BINTE ARSHAD
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / GIT / SI MOHAMMAD ABDILLAH BIN PALIL Contact No.: 65476246

Authentication Stamp  
NP168

Signature Of Informant:
Date/Time: 15/03/2019 00:19
Classification Of Case:

Certified True Copy  
pursuant to Sec. 78 of the  
Evidence Act, Cap 97.

Yet Hwee Choo  
CSO Traffic Police

Date:

15-3-19