

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : MCD620086686 Vehicle Registration No: SHD7295D  
Name (as shown in NRIC) : PE WEE KHENG NRIC/FIN/Passport No : \_\_\_\_\_  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : \_\_\_\_\_ Singapore ( )  
Contact (Tel) : \_\_\_\_\_ Mobile No. : \_\_\_\_\_  
Email Address : \_\_\_\_\_  
Date of Accident : 05/10/2020 Time of Accident : 07:50  
Place of Accident : NORTH BUONA VISTA RD X DOVER RD  
Insurance Company : India International Insurance Pte Ltd

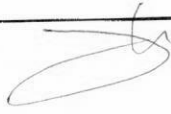
**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

SUBMIT AMENDED POLICE REPORT NO: T/20201005/2026 (PG 2 OF 3)

DATE OF ACCIDENT SHOULD READ AS 05.10.2020

\_\_\_\_\_  
Policyholder / Driver's Signature  
Date:

  
\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name: Janet  
NRIC/FIN No.: \_\_\_\_\_  
Date: 09.10.20



# SINGAPORE POLICE FORCE



T/20201005/2026

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Police Station Of Origin:  
Tampines N.P.C  
6 Tampines Avenue 4 SINGAPORE 529682  
Tel No: 1800-5871999

Report No. T/20201005/2026

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 05/10/2020 12:04	Vide Report No.:	Station Diary No.: 20
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**Informant's Particulars**

Name of Informant: PE WEE KHENG	Address: APT BLK 428 ANG MO KIO AVENUE 3 #03-2632 SINGAPORE 560428		
ID Type / ID No.: NRIC NO / S1572684I	Contact No.:	Mobile: 97717847	
Nationality: SINGAPORE CITIZEN	Home/Office:	Email:	
Sex: Female	Age: 57	Date of Birth: 27/09/1963	Type of Informant: Driver
Race: Chinese	Language:		Institution / School Name:
Occupation: Taxi driver	Driving Licence Information: Class: 3		Date of Expiry:

**General Information of the Accident**

General Information of the Accident				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 05/10/2020 07:50	Type of Location: Straight Road
Location:  NORTH BUONA VISTA ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD7295D	Car				Slightly Damaged	0
SJM1907R	Car				Slightly Damaged	1

**Details of Person Involved**

Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA
No. of Pedestrians Injured: NIL	



**SINGAPORE  
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( AMEND D.O.A. )



T/20201005/2026

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Report No. T/20201005/2026

**CONTINUATION OF REPORT**

Driver			
Name	PE WEE KHENG	ID No.	S1572684I
Related Vehicle	SHD7295D (Car)	Contact No.	97717847
Hospital/Clinic	CHERN MEDICAL CLINIC	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	05/10/2020	Date Discharge	05/10/2020
No. of Days granted Medical Leave	03	Degree of Injury	Slight

**Brief Details.**

On the 07/10/2020 at about 0753hrs, I was driving along North Buona Vista Road heading towards the MRT in my taxi bearing the plate number SHD7295D. There was no passenger on board. I was driving on the middle lane of a 5 laned road. Traffic was very heavy and thus moving very slowly. Occasionally, the traffic will come to a stop. Subsequently, the vehicle in front of me move off slowly and before I was able to accelerate, the vehicle bearing the plate SJM1907R who was initially on the 4th lane, swerved right and collided with the front left side of my taxi.

Nobody was injured at that point of time. We both exchanged particulars with each other before resuming our respective journeys. There are some scratches and my bumper was dislodged from the frame due to the collision. About a while later, I felt some pain on my back and neck thus I seek medical attention and were given 3 days MC.



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T/20201005/2026

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Tampines N.P.C  
6 Tampines Avenue 4 SINGAPORE 529682  
Tel No: 1800-5871999

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Report No. T/20201005/2026

**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:  
G /  
Sgt 3 MOHAMAD IZWAN BIN MOHAMAD  
ISHAK

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIA /  
Staff Sgt WONG SIEU LUI  
Contact No.: 65476151

Authentication Stamp  
NP168

Signature Of Informant:

Date/Time:  
05/10/2020 12:04

Classification Of Case:



SINGAPORE  
POLICE FORCE

SIGNATURE