



**SINGAPORE
POLICE FORCE**



T/20201201/2006

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

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Report No. T/20201201/2006

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/12/2020 01:30	Vide Report No.:	Station Diary No.: 9
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Informant's Particulars

Name of Informant: AMIR BIN MOHAMED NOOR			Address: APT BLK 840 JURONG WEST STREET 81 #04-113 SINGAPORE 640840		
ID Type / ID No.: NRIC NO / S90031611			Contact No.: Home/Office: Mobile: 91135621		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 30	Date of Birth: 02/02/1990	Type of Informant: Driver		
Race: Malay			Language:		Institution / School Name:
Occupation: CNB OFFICER			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 30/11/2020 22:00	Type of Location: Opposite drop off point of CROCKFORDS TOWER
Location: SENTOSA GATEWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJU3376S	Car				Slightly Damaged	0
SLA2105X	Car				Slightly Damaged	0



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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	
Driver			
Name	AMIR BIN MOHAMED NOOR	ID No.	S9003161I
Related Vehicle	NIL	Contact No.	91135621
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
Driver			
Name	MUHAMMAD RUZZI BIN ROTHMAN	ID No.	S9432286C
Related Vehicle	NIL	Contact No.	91685669
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 Place, I parked my vehicle, SLA2105X at the said location while conducting OPS. When I returned to the vehicle, I saw a note with the said person's particulars and contact details on it. I made a call to him and was informed that earlier when he was reversing, his vehicle, SJU3376S knocked on the left rear side of my vehicle and had left subsequently.



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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:

A /

Sgt 2 POH YONG SHENG, MATTHEW

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt IRMAN BIN MOHAMAD SAID

Contact No.: 65476145

Signature Of Informant:

Date/Time:

01/12/2020 01:30

Classification Of Case:

Authentication Stamp

NP168

