



Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20210123/7013

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/01/2021 14:23		de:	Vide Report No.:	Station Diary No.:		
Informant'	s Particul	ars				
Name of Informant: PEH LEE HENG			Address: 212B COMPASSVALE DRIVE #11-121 SINGAPORE 542212			
ID Type / ID No.: NRIC NO / S8134675E			Contact No.: Home/Office: Mobile: 91904133			
Nationality: SINGAPORE CITIZEN			Email: MIKE.PEH16@GMAIL.COM			
Sex: Age: Date of Birth: Male 39 15/10/1981			Type of Informant: Driver			
Race: Chinese			Language: English	Institution /	School Name:	
Occupation: Grab Driver			Driving Licence Information: Class: 3	Date of Ex	piry:	

General Informati	on of the Accident						
Type of Accident:	Injury Others		Drink Drive: No	Date/Time of Accident: 22/01/2021 21:40		Type of Location: SLIP ROAD	
Location:							
DEVONSHIRE R	OAD						
Weather: Clear		Road S Dry	Surface:		Road	d Speed Limit:	
			Traffic Control:			Traffic Volume:	
One Way Not Co			t Controlled			Light	
Type of Collision: Between Moving Vehicles - Head To Rear Anyone conveyed by ambulance: No					, ,		

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SKU8002B	Car					0
SMP2467K	Car	TOYOTA	NOAH	White		0

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





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CONTINUATION OF REPORT

Driver						
Name	PEH LEE HENG			ID No. S8134675		S8134675E
Related Vehicle	SMP2467K (Car)		Contact No.		91904133	
Hospital/Clinic	NIL		Class Drivin Licend Expiry	g ce &	Class: 3 Date of Expiry: NIL	
Date	23/01/2021	Date	23/01		/2021	
No. of Days gran	04	Degree of		Sligh	t	

Brief Details.

ON 22/01/2021 AT ABOUT 2140 HOURS, I WAS DRIVING VEHICLE BEARING PLATE NUMBER SMP2467K WAS TRAVELLING ALONG THE SLIP ROAD OF DEVONSHIRE ROAD INFRONT OF 111 SOMERSET ON THE LEFT LANE. AS THERE WERE VEHICLES AT THE MAIN ROAD, I STOPPED TO GIVE WAY. OUT OF SUDDEN, I FELT A HUGE IMPACT FROM MY REAR PORTION, VEHICLE BEARING PLATE NUMBER SKU8002B COLLIDED ONTO THE REAR PORTION OF MY VEHICLE CAUSING DAMAGES. I THEN FELT UNWELL AND WENT TO CONSULTED THE DOCTOR AT INTEMEDICAL KOVAN, GIVEN 4 DAYS MC.





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CONTINUATION OF REPORT

Sketch Plan
Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 23/01/2021 14:23
Officer In Charge Of Case: TP / TPIB / MOHAMAD ZULFAZDLI BIN ABDULLAH Contact No.: 65476204	Classification Of Case:

Authentication Stamp NP168