



Report No. T/20210413/2116

1 of 3

Police Station Of Origin: Bedok North N.P.C 30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/04/2021 20:41		flade:	Vide Report No.:	Station Diary No.: 78			
Informan	t's Particu	ulars					
Name of I	Informant:		Address:				
ONG POH KIM			APT BLK 518 BEDOK NORTH AVENUE 2 #08-165 SINGAPORE 460518				
ID Type / ID No.:			Contact No.:				
NRIC NO / S1689761B			Home/Office:	Mobile: 98356561			
Nationalit SINGAPO	y: DRE CITIZ	EN	Email:	11			
Sex: Age: Date of Birth: Female 56 15/03/1965		- 17	Type of Informant: Driver				
Race: Chinese		1/	Language:	Institution / School Name:			
Occupation: SALES SUPPORT			Driving Licence Information: Class:	Date of Expiry:			

General Inform	nation of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 09/04/2021 19:3	60	Type of Location: Straight Road
Location:					
PAN-ISLAND	EXPRESSWAY				
Weather:		Road Surface:		Roac	Speed Limit:
Clear		Dry			
Traffic Flow:		Traffic Control:		Traffi	ic Volume:
One Way		Not Controlled		Mode	erate
Type of Collisi Between Movi	ion: ing Vehicles - Head To R	ear			ne conveyed by ulance:

Details of Vo	ehicle Invo	lved				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SMK1830C	Car		HONDA	Black	Seriously Damaged	
SMS9674S	Car	CITROEN	C5 AIRCROSS 1.6L SHINE	Black	Seriously Damaged	5

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date





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CONTINUATION OF REPORT

Details of Vo	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMS9674S	AIG ASIA PACIFIC INSURANCE PTE.	2070053281	24/03/2020	23/03/2022

Details of Perso	n involved				11312	
Any Pedestrian Ir	nvolved: No					
No. of Pedestrian	Use of Pe	Use of Pedestrian Crossing: NA				
Driver						عاليه والكاري وأفر
Name	ONG POH KIM			ID No	ic .	S1689761B
Related Vehicle	SMS9674S (Car)			Contact No.		98356561
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL Date		Date Disc	<u> </u>	NIL	
No. of Days granted Medical Leave NIL			Degree of	of Injury NIL		

Brief Details.

On the above mentioned date time and place, I was at the expressway, PIE towards Changi before exiting Bedok Reervoir Road, when an accident took place. I was travelling at a slow speed however, my front of my car hit the rear of the vehicle stated above. I wish to state that it was due to the front taxi making a emergency brake and therefore the cars that followed behind also did emergency brake. Therefore, I also attempted to make a emergency brake but however I could not stop my car in time. Traffic police and ambulance came down to scene and assess and nobody was injured. I wish to state that I only have the handphone number of the other party which is 92765085. I am making this report for insurance purposes.





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CONTINUATION OF REPORT

Sketch Plan

NP168

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.

Date/Time: 13/04/2021 20:41
Classification Of Case:

