


**SINGAPORE
POLICE FORCE**


T/20210504/7009

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20210504/7009

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/05/2021 11:08		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: LEE KIM SIA			Address: 197D BOON LAY DRIVE #06-121 SINGAPORE 644197		
ID Type / ID No.: NRIC NO / S6938859J			Contact No.:		Mobile: 96221571
Nationality: SINGAPORE CITIZEN			Email: leekimsia69@gmail.com		
Sex: Male	Age: 51	Date of Birth: 05/11/1969	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: Self Employed		Driving Licence Information: Class:		Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 03/05/2021 16:10	Type of Location: Straight Road
Location: PIONEER ROAD NORTH				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SGU5446X	Car					0
XE6130H	Lorry					0

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



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2 of 3

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CONTINUATION OF REPORT

Driver			
Name	LEE KIM SIA		ID No. S6938859J
Related Vehicle	SGU5446X (Car)		Contact No. 96221571
Hospital/Clinic	SILVER CROSS MEDICAL CENTRE PTE LTD		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	03/05/2021	Date	03/05/2021
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

On 03/05/2021, at about 4:10pm, I was travelling along Pioneer Road North towards PIE. I was driving on the middle lane of 3 lanes. Out of a sudden, I felt a huge impact from the rear. I alighted and realised vehicle XE6130H which was from the right most lane had collided onto my vehicle's right rear portion. My vehicle suffers damages on the right rear portion.

I later went to Silver Cross Medical to seek medical attention and was issued with 3 days MC.



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3 of 3

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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 Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
MOHAMAD ZULFAZDLI BIN ABDULLAH
Contact No.: 65476204

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
04/05/2021 11:08

Classification Of Case: