



1 of 3 Report No. T/20210712/2021

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

## REPORT OF A TRAFFIC ACCIDENT

	me Report N 021 11:29	Made:	Vide Report No.: A/20210710/0076	Station Diary No.:	
Informa	nt's Partic	ulars			
Name of Informant: KUMARAN A/L SATAYANAZAM			Address: 8 TUAS SOUTH LANE SINGAPORE 637302		
ID Type / ID No.: FIN NO / G7570919L			Contact No.: Home/Office: 89455358 Mobile:		
National MALAYS			Email:		
Sex: Male	Age: 35	Date of Birth: 23/10/1985	Type of Informant: Rider		
Race:		- portugi Senio Personal	Language: English	Institution / School Name:	
Occupation: MRT train operator			Driving Licence Information: Class: 2B,3,4	Date of Expiry:	

Type of Accident:	Injury Conveyed By Ambula	nce Drink Drive: No	Date/Time of Accident: 10/07/2021 13:35	Type of Location Straight Road
	ASTAL EXPRESSWAY	Dood Confession		Dood Spood Limits
Weather:		Road Surface:		Road Speed Limit:
		Road Surface: Net		Road Speed Limit.
Weather: Raining Traffic Flow: One Way				Traffic Volume: Moderate

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
MCL5549	Motorcycle					0
SLN7252C	Car	SUZUKI	SWIFT GLX 1.4 AT	Blue		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**

Rider						
Name	KUMARAN A/L SATAYANAZAM			ID No		G7570919L
Related Vehicle	MCL5549 (Motorcycle)			Conta	ct No.	89455358
Hospital/Clinic	RAFFLES HOSPITAL			Class Drivin Licent Expire	g	Class: 2B,3,4 Date of Expiry: NIL
Date Treatment	10/07/2021		Date Disc		10/07	7/2021
	ted Medical Leave	07	Degree o	f Injury	NIL	

## **Brief Details.**

ON THE ABOVE STATED DATE, TIME AND LOCATION ON 10TH JULY 2021 AT OR ABOUT 1.30 PM, I WAS RIDING MY MOTORCYCLE BEARING NUMBER. MCL5549 ALONG MCE TOWARDS KPE ON LANE 4 OF 6 LANES. THERE WAS A UNKNOWN TIPPER TRAVELLING AHEAD OF ME, I THEN CHANGED LANE INTO LANE 5. AS I WAS ALMOST RIDING PAST THE UNKNOWN TIPPER, SUDDENLY A MOTORCAR WHICH CAME FROM MY LEFT SIDE SIDE-SWIPE WITH MY MOTORCYCLE'S LEFT SIDE CAUSING ME TO SKID AND FELL ON TO THE ROAD. THE WEATHER WAS RAINING AT THAT TIME OF ACCIDENT.

THATS ALL.





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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 R	decording The Report:
SC T/ N JUIN QI	TolVIAD
Signature Of Interpret Not applicable	er:
Officer In Charge Of C	Case:
Staff Sgt MUHAMMAI	NOOR BIN ABDUL
Contact No.: 6547620	11
Authentication Stamp	

NP168

Signature Of Informant: Date/Time: 12/07/2021 11:29

Classification Of Case: