Describe Circumstances of the Accident	
* Ou T - 10 - W	
* ON THE ABOVE MENTION DATE, TIME & LOCATION MY VEHIC	LE
PC 79984 WAS STATIONARY AT THE TRAFFIC LIGHT SUNCTION	MO
PORTION OF MY VEHICLE PC 7998U. I THEN ALIGHTED FROM	u
THE E SAW VEHILLE DE GOHE HAD COLLIDED INTO	-1
THE REAR PORTION OF MY VEHICLE.	
	-
* PLS NOTE: MY VEHICLE SUSTAINED SERIOUS DAMAGE ON REAR PORTION, AND ALSO DUE TO THE IMPACT I PEUT SEVERI	1-7
REAR PORTION, AND ALSO DUE TO THE IMPACT I PELT SEVEDI	4 14
THE RUPIN OF THE PROPERTY OF T	2~
VISITING THE DOCTOR . STANDARD TO THE POLICE TO THE DOCTOR .	DE.
(a) (a) D( ) my	
I went to BLESS MEDICAL CENTRE PIELTD and was given	
3 day MC	-
	-
9/100	
	-
· ·	-
	-

Declaration

IWWe declare the foregoing particulars are true in every respect.

PONE MINDS of Signature / Date &

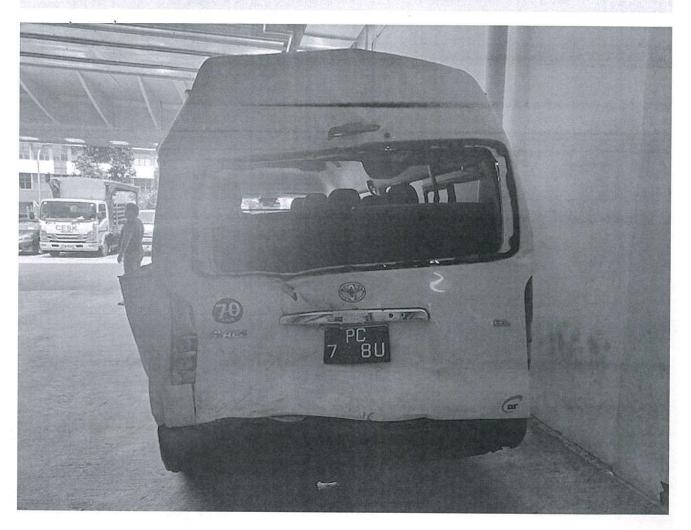
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

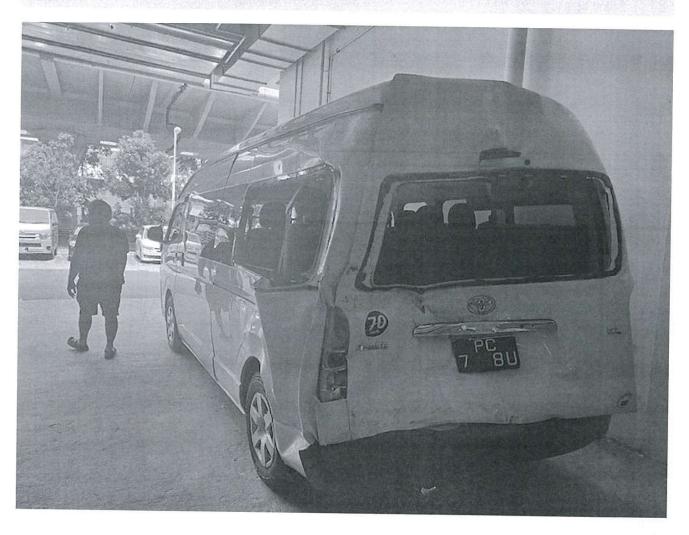
















Police Station Of Origin: Traffic Police

Report No. T/20210814/7004

10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

REPORT OF	A TRAFFIC	CACCIDENT								
Date/Time Report Made: 14/08/2021 11:27			Vid	Vide Report No.;				Station Diary No.:		
Informant	's Particu	ulars		objetiva s		2022-1704				
Name of Ir DURAISAI		IGAPANDI	823	dress: 3 JURONG W 1823	EST STREE	T 81 #03-	-462 S	SINGAPORE		
ID Type / ID No.: NRIC NO / S7469342C			Cor	ntact No.: me/Office:	Mobile	: 8468	36944			
Nationality INDIAN	,	1	Em	ail: AKAN2003@	YAHOO.CC	M.SG				
Sex: Male	Age: 47	Date of Birth: 13/03/1974	Typ	e of Informar /er	nt:					
Race: Indian				Language: Institu English				ution / School Name:		
Occupation Van driver	Occupation: Van driver			Driving Licence Information: Class: 3 Date				of Expiry:		
Type of Injury Others			Drink Drive: No	Accider	Date/Time of Accident: 10/08/2021 16:25		Type of Location Straight Road			
Location: AYER MEF	RBAU RO	AD								
Weather: Clear			Ros	d Surface:			Road 50 Ki	l Speed Limit; m/h		
Traffic Flow; One Way			2.72	Traffic Control: Traffic Light - Working				Traffic Volume: Moderate		
Type of Co Between M		hicles - Head To	Rear					ne conveyed by ulance:		
Details of	Vehicle I	nvolved				Separation of the	MICHIGAN IN			
Vehicle No.	mark the market of the same of	Make		Model	Color	Con	ditio	No of		
PC7998U	Van	200.00	- Acres Money	A STATE OF THE STA	1000	2000	Series Series	0		
				1						

Use of Pedestrian Crossing: NA

Any Pedestrian Involved: No No. of Pedestrians Injured: NIL





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20210814/7004

## CONTINUATION OF REPORT

Name	DURAISAMY THAN	IGAPAND	ID No.	S7469342C	
		10/11/11/10		10.140.	014000420
Related Vehicle	PC7998U (Van)		Contact No	84686944	
Hospital/Clinic	BLESS MEDICAL C	ENTRE	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL	
Date	10/08/2021	Date	10/0	8/2021	
No. of Days granted Medical Leave 03			Degree of		

## Brief Details.

on the above mention date and time and location, my vehicle was stationary at a traffic light junction (red), a few seconds later, i felt an impact on the rear portion of my vehicle, i then alight from my vehicle and saw vehicle (PC604C) had collided into my rear portion of my vehicle and badly damaged it, after the accident i felt severe pain on the rear of my nack and lower body, i then proceded to see a doctor at bless medical centre pte lid and was given 3 days medical leave by the doctor.