



**SINGAPORE
POLICE FORCE**



T/20211229/7004

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

1 of 3
Report No. T/20211229/7004

REPORT OF A TRAFFIC ACCIDENT

| | | | | | |
|--|------------|------------------------------|---|--------------------|----------------------------|
| Date/Time Report Made: 29/12/2021 11:45 | | Vide Report No.: | | Station Diary No.: | |
| Informant's Particulars | | | | | |
| Name of Informant: PEH CHOON KWEE | | | Address: 253 BANGKIT ROAD #10-230 SINGAPORE 670253 | | |
| ID Type / ID No.: NRIC NO / S1226996Z | | | Contact No.: Home/Office: Mobile: 97316996 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: CKSEBASTIAN5371@GMAIL.COM | | |
| Sex: Male | Age: 64 | Date of Birth: 19/04/1957 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: English | | Institution / School Name: |
| Occupation: TAXI DRIVER | | | Driving Licence Information: Class: 3 | | Date of Expiry: |

| | | | | |
|--|------------------|---|---|--|
| General Information of the Accident | | | | |
| Type of Accident: | Injury Others | Drink Drive: No | Date/Time of Accident: 28/12/2021 14:55 | Type of Location: Straight Road |
| Location: WOODLANDS AVENUE 3 | | | | |
| Weather: Clear | | Road Surface: Dry | | Road Speed Limit: |
| Traffic Flow: Two Way | | Traffic Control: Traffic Light - Working | | Traffic Volume: Moderate |
| Type of Collision: Between Moving Vehicles - Head To Rear | | | | Anyone conveyed by ambulance: No |

| Details of Vehicle Involved | | | | | | |
|-----------------------------|------|---------|-------|-------|---------------------|-------|
| Vehicle No. | Type | Make | Model | Color | Conditio | No of |
| GBL3279G | Van | NISSAN | NV200 | Grey | Slightly Damaged | 0 |
| SHD7285H | Car | HYUNDAI | IONIQ | Blue | Slightly Damaged | 1 |



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Report No. T/20211229/7004

CONTINUATION OF REPORT

| | | | |
|-----------------------------------|-----------------------|-----------------------------------|---------------------------------|
| Details of Person Involved | | | |
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Driver | | | |
| Name | PEH CHOON KWEE | ID No. | S1226996Z |
| Related Vehicle | SHD7285H (Car) | Contact No. | 97316996 |
| Hospital/Clinic | HARMONY FAMILY CLINIC | Class of Driving Licence & Expiry | Class: 3 Date of Expiry: NIL |
| Date | 29/12/2021 | Date | 29/12/2021 |
| No. of Days granted Medical Leave | 05 | Degree of | Slight |

Brief Details.

On 28/12/2021 at about 1455 Hrs, i was driving my taxi SHD7285H along Woodland Ave 3 towards Ave 5 with 1 passenger onboard. I was stationary at the traffic lights Junction along Woodland Ave 3 as the light was on RED. About a few seconds later, i felt a impact from behind, i alighted my taxi and discover that a Van GBL3279G had rear ended my taxi rear portion and cause damage and dented to my taxi rear section. I take some scene photo and request to exchange particular but the driver refused to exchange and just tell me take the vehicle number and go for insurance claim. Today when i wake up i felt my neck and back pain due to the impact of the accident so i consult doctor and was given 5 days MC from 29/12/2021 to 2/1/2022.



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CONTINUATION OF REPORTSketch 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

NP188

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

Date/Time:
29/12/2021 11:45

Classification Of Case:



IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SJ0421CS000T Vehicle Registration No: SHD7285H
 Name (as shown in NRIC): Comfort Transportation Pte Ltd NRIC/FIN/Passport No: 1XXXXX821R
 (¹Vehicle Driver/Vehicle Owner) (²) Please delete as appropriate
 Address: _____ Singapore ()
 Contact (Tel): _____ Mobile No.: _____
 Email Address: _____
 Date of Accident: 28/12/2021 Time of Accident: 1455hrs
 Place of Accident: Woodlands, Singapore
 Insurance Company: AXA Insurance Singapore Pte Ltd

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

- AMEND TIME OF ACCIDENT

- ADD POLICE REPORT

- ADD INJURY DETAILS



Policyholder / Driver's Signature
Date:

kavi

Reporting Centre Personnel's Signature
Name: KAVI
NRIC/FIN No.:
Date: 03.01.2022

GIAIARC Addendum Form