

T/20220111/2090

Date of Expiry:

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 1 of 4 Report No. 1/20220111/2090

Tel No: 1800-7929999

Malay

Occupation: FOODPANDA RIDER

REPORT OF A TRAFFIC ACCIDENT

Station Diary No.: Vide Report No.: Date/Time Report Made: 153 11/01/2022 18:57 Informant's Particulars Address:
APT BLK 745 JURONG WEST STREET 73 #07-57
SINGAPORE 640745
Contact No.:
Home/Office:
Mobile: 83858338 Name of Informant: AZAHAR BIN MAT YUSOF ID Type / ID No.: NRIC NO / S6984129E Email: Nationality: INDONESIAN Date of Birth: 20/07/1969 Type of Informant: Rider Age: 52 Institution / School Name: Male Language: Race:

Class:

eneral Inform	nation of the Accid	ent Drink	Date/Time of	Type of Location Straight Road
Type of Accident	Injury Others	Drive: No	Accident: 11/01/2022 1	
Location: JURONG WI	EST CENTRAL 3			Road Speed Limit
Weather: Sunny		Road Surface Dry Traffic Contr	ol:	Traffic Volume:
Traffic Flow One Way Type of Coll		Not Controlle	ed	Anyone convayed b ambulance:

Driving Licence Information:

t the of V	ehicle Involve	d	Model	Color		No of Passeng
Vehicle No.	Type Motorcycle	Make YAMAHA	AEROX GDR155A	Red	Totally Damaged	
AZ9389X	Wordickers		CVT ABS AE IONIQ	Blue	Slightly	10
SHA7742X	Car	HYUNDAI	HEV FL 1.6			1

	No.	Effective	Expiry Date
Details of Vehicle Insurance	Insurance No	<u> </u>	
Vehicle No. Insurance Company			

1 of 4

-- No. 1/20220111/2090



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Report No. 1/20220111/2090

CONTINUATION OF REPORT

Details of Vo	ahicle Insurance Insurance Company		(14)	
AZ9389X	NTUC Income Insurance Co-Operative	Insurance No 5118109180-01	Effective 07/07/2021	Expiry Date 06/07/2022

No. of Pedestrian	s Injured: NIL	Use of Ped	lestrian	Cross	ing: NA
Name	AZAHAR BIN MAT YUSOF				S6984129E
Related Vehicle	AZ9389X (Motorcycle)		Contact No.		83858338
Hospital/Clinic	RAFFLESMEDICAL			of) e & Date	Class: NIL Date of Expiry: NIL
Date Treatment	11/01/2022 Date Dis		charge 11/01/2022		
The state of the second	ted Medical Leave 03	Degree of	Injury	Slight	
Driver		1000			
Name	KOH CHIANG HUANG		ID No.		S1449623H
Related Vehicle	SHA7742X (Car)		Contact No.		97361728
Hospital/Clinic	NIL			of g ce & / Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disc	harge	NIL	
Date Treatment	ted Medical Leave NIL	Degree of	f Injury	NIL	

On the 11/01/2022 at about 1300hrs, I was riding my motorcycle bearing number AZ9389X along Jurong West Central 3 towards Jin Boon Lay on the right lane as I was doing my food delivery. I did not notice a taxi that was exiting the carpark of Blk 692A Jurong West Central 3 as there was another vehicle that was entering the carpark but I did not take down the vehicle number of that vehicle. Suddenly, the taxi bearing vehicle number SHA7742X came out of the carpark and went straight to get to the other side of the road heading towards Jurong West Central 2. Hence, I was not able to stop in time and thus collided head on to the center of the taxi.

Then, I fell down together with my motorcycle right in the middle of the yellow box. My vehicle was seriously damaged as the handle bar could not be turned and the motorcycle cannot be rode. Additionally, the front wheel was damaged that it had to be dragged off the road. I sustained injuries such as bodily pains on the right side of my body. After which, the taxi stopped on the other side of the road and came to check and assist me to move the vehicle together with some passerby all the way to the nearby carpark so as to not block the road.



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3 of 4

Report No. T/20220111/2090

CONTINUATION OF REPORT

Subsequently, he offered to pay for my medical bills hence we exchanged particulars after. I proceeded to call my insurance company and my motor shop as this is the first time that this has happened to me and I did not know what to do next. The insurance company advised me to lodge a report and go to the clinic to get myself checked. I went to Raffles Medical clinic and got a 3 days MC for my injuries. I wish to inform that I have no in car camera on my motorcycle.



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4 of 4 Report No. 1/20220111/2030

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 Recording The Report J / Sgt 2 ASRUL FADZIL BIN AZMI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 11/01/2022 18:57
Officer In Charge Of Case: TP / AEIT / SI ANG YI TING, STEPHANIE Contact No.: 65476414	Classification Of Case:
Authentication Stamp NP168	SIGNATURE