



Police Station Of Origin: Orchard N.P.C

51 Killiney Road SINGAPORE 239572 Tel No: 1800-7359999 1 of 4 Report No. T/20210210/2008

# REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/02/2021 01:51			Vide Report No.:	Station Diary No.: 10
Informan	t's Partic	ulars		
	Informant: NA TIN FU		Address: 22 NOVENA RISE SIN	GAPORE 307508
ID Type / ID No.: NRIC NO / S2193607C			Contact No.: Home/Office:	Mobile: 90031110
Nationalit SINGAPO	y: DRE CITIZ	EN	Email:	
Sex: Female	Age: 53	Date of Birth: 09/04/1967	Type of Informant: Driver	
Race: Chinese		Language:	Institution / School Name:	
Occupation: RECRUITER			Driving Licence Informa Class:	ation: Date of Expiry:

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 09/02/2021 18:20	Type of Location Straight Road	
Location: THOMSON F	ROAD	Road Surface:		Road Speed Limit:	
Clear		Dry		The special annual	
Traffic Flow:		Traffic Control:		Traffic Volume: Heavy	
		Anyone conveyed by ambulance:			

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SLA4145S	Car				Seriously Damaged	42.7
SLN3396Y	Car				Slightly Damaged	0
SMX3269S	Car				Slightly Damaged	3

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

Driver		201000	ID No.		
Name	Jonathan Yee Jun Xian				S9084438E
Related Vehicle	SLA4145S (Car)			ct No.	87000868
Hospital/Clinic	NIL			of e & Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disc	harge	NIL	
	ted Medical Leave NIL	Degree of		NIL	
Passenger					
Name	Teo Bon Kai	je.	ID No		S2134849Z
Related Vehicle	SMX3269S (Car)			ct No.	90031110
Hospital/Clinic	MOUNT ELIZABETH NOVENA HOSPITAL			of g ce & Date	Class: NIL Date of Expiry: NIL
Date Treatment	09/02/2021	Date Disc	harge	NIL	
	ted Medical Leave NIL	Injury	NIL		
Driver					
Name	CHRISTINA TIN FUI LING				S2193607C
Related Vehicle	SMX3269S (Car)			ict No.	90031110
Hospital/Clinic	MOUNT ELIZABETH NOVENA HOSPITAL			of g ce & / Date	Class: NIL Date of Expiry: NIL
Date Treatment	09/02/2021	Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave NIL	Degree o		Sligh	t
Passenger					
Name	Reyes Tin				T0516639F
Related Vehicle	SMX3269S (Car)	Conta	act No.	90031110	
Hospital/Clinic	MOUNT ELIZABETH NOVENA HOSPITAL			of ng ce & y Date	Class: NIL Date of Expiry: NIL
Date Treatment	09/02/2021	Date Disc		NIL	





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#### CONTINUATION OF REPORT

Passenger					-	
Name	Tin Ah Chuan			ID No.		S2678504I
Related Vehicle	SMX3269S (Car)				ct No.	90031110
Hospital/Clinic	MOUNT ELIZABETH NOVENA HOSP			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	09/02/2021 Date Disc			harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	e of Injury NIL		
Driver	WIEG ALE					
Name	Chan Ewe ghee			ID No.		S2591509G
Related Vehicle	NIL			Contact No.		92385519
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	nt NIL Da			charge NIL		
No. of Days gran	ted Medical Leave	NIL	Degree of	Degree of Injury NIL		

### Brief Details.

On 09/02/2021 at about 1820hrs, my vehicle (SMX3269S) was stationary at Thomson road, right infront of Velocity Square due to the traffic light. Subsequently, my vehicle was hit by a vehicle (SLA4145S) from the rear. I then alighted from my vehicle to check on the damage. The driver of SLA4145S alighted as well and told me that he was hit from the rear by another vehicle (SLN3396Y) which resulted his vehicle to collide onto mine.

I was in the car together with my 2 parents and my nephew. I did not see any passengers in the other 2 cars. I am unsure if the other drivers sustained any injury, but I felt a tightness at the back of my head and my mother felt dizzy for a short time just now. My father and nephew seems okay as of now.

My vehicle rear bumper sustained scratches and the rubber strap came off. SLA4145S front bumper was slightly dislodged and the rear was badly dented. Whereas SLN3396Y only has slight dent on the front bumper.

I would like to add that there was no government property and foreign vehicle involved. No one sustained visible injury or conveyed to hospital by ambulance. I have camera install at the front and rear of my vehicle. The driver of SLN3396Y also informed me that his vehicle is a rented car.



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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 Recording The Report: E / Sgt 3 HENGKY SETIAWAN HOO	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 10/02/2021 01:51
Officer In Charge Of Case: TP / AEIT / Sr Staff Sgt ONG YONG HOCK Contact No.: 65476436	Classification Of Case:
Authentication Stamp NP168	1/2