



Police Station Of Origin: Thomson NPP 25 Sin Ming Road #01-180 SINGAPORE

570025

Tel No: 1800-4529999

REPORT OF A TRAFFIC ACCIDENT

Report No. T/20190325/2105

1 of 3

Date/Time Report Made: 25/03/2019 14:14			Vide Report No.: G/20190325/0089	Station Diary No.: 42	
Informa	nt's Particu	ulars			
Name of Informant: NG ONG YAM			Address: APT BLK 144 BEDOK RESERVOIR ROAD #04-1601 SINGAPORE 470144		
ID Type / ID No.: NRIC NO / S2039522B			Contact No.: Home/Office: Mobile: 91319236		
National SINGAP	ity: ORE CITIZ	EN	Email:		
Sex: Male	Age: 67	Date of Birth: 11/12/1951	Type of Informant: Driver		
Race: Chinese		:	Language: English	Institution / School Name:	
Occupation: Lorry driver			Driving Licence Information: Class: 2B,2A,2,3,4A,4,5 Date of Expiry:		

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 25/03/2019 10:30	Type of Location: Straight Road	
	XPRESSWAY 65km Along TPE towards	SLE, Lane 1			
		Road Surface: Dry		Road Speed Limit:	
Traffic Flow: Traf		Traffic Control: Not Controlled		Traffic Volume: Light	
Type of Collis Between Mov	ion: ing Vehicles - Head To Re	ear		Anyone conveyed by ambulance:	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SHD2614A	Car	TOYOTA	PRIUS HYBRID 1.8S CVT	Brown	Slightly Damaged	0
YM9547R	Water Tanker Lorry	MITSUBISHI	FM65FM1R DEA	White	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		A STANSON E		3772V		
Name	NG ONG YAM		ID No		S2039522B	
Related Vehicle	YM9547R (Water Tanker Lorry)			Conta	ct No.	91319236
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: 2B,2A,2,3,4A,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Disc	harge	NIL		
No. of Days gran	ted Medical Leave	NIL	Degree of	Injury	NIL	

Brief Details.

On 25/03/2019 at about 1028hrs, I was travelling along TPE towards SLE on Lane 1 in my vehicle(YM9547R). Suddenly I felt an impact come from the rear of my vehicle, and I immediately applied my brakes. I thus exited my vehicle to make a check on what had happened, and discovered that another vehicle(SHD2614A) had collided into the rear of my vehicle, causing damage. Thereafter, police and ambulance were at scene, and the driver of the other vehicle was conveyed to hospital. I do have in car camera that was directed to my vehicle's rear, and it was recording during the incident. I am lodging this report a directed by police.





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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 / Staff Sgt LIM BENG LEE SIGT(12) THEODORE LEE	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 25/03/2019 14:14
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt NOR FAIZAL BIN YAHYA Contact No.: 65476202	Classification Of Case:
Authentication Stamp NP168 SIGN SIGN SIGN	NATURE