POLICE REPORT
INS CARD
ACCIDENT PHOTO

ACCIDENT STATEMENT

ACCIDENT DATE: (19 / 01 / ~~2022~~ 2020) (DD/MM/YYYY), TIME: (___ : ___) (HH:MM)

LOCATION: along Seletar Rd

1. DETAILS OF VEHICLE
   a) VEHICLE NUMBER: SJT 6009 M.
   b) INSURANCE COMPANY: Liberty
   c) POLICY NUMBER:
   d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
   e) MAKE & MODEL: KIA
   f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
   g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
   h) PURPOSE OF USING AT ACCIDENT TIME: private use
   i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
      IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)
2. INSURED / POLICY HOLDER
   A) NAME: POH Gim Joo (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: S2189119C CONTACT:
   c) ADDRESS: 115C Canberra Walk #08-173

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

*No of passenger (including driver) (1)

3. DRIVER
   d) NAME: POH Gim Joo (MALE / FEMALE)
   b) NRIC/FIN/PASSPORT: S2189119C CONTACT: 91012723
   c) ADDRESS: As above
   *d) DATE OF BIRTH: (21 / 11 / 1963) (DD/MM/YYYY)
   e) OCCUPATION: (INDOOR / OUTDOOR)
   f) DATE OF DRIVING PASS 19/9/1986.
4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
   IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: No
5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS) No
   b) ROAD SURFACE: (DRY / WET / OTHERS) ND.
6. WAS ANYBODY INJURED (YES / NO)
7. a) REPORTED TO POLICE (YES / NO)
   IF YES, PLEASE STATE WHICH POLICE STATION:
8. THIRD PARTY VEHICLE
   a) VEHICLE NUMBER: SJA5627B MODEL:

*No of passenger (including driver) (__)

   b) DRIVER'S NAME: Mohan s/o Masilamoney
   c) NRIC/FIN/PASSPORT: CONTACT:
9. THIRD PARTY VEHICLE
   d) VEHICLE NUMBER: MODEL:

*No of passenger (including driver) (__)

   e) DRIVER'S NAME:
   f) NRIC/FIN/PASSPORT: CONTACT:

email.= Kennypoh@live.com
VIDEO