



1 of 4

Report No. T/20230123/2044

Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

REPORT	OF A	TRAFFIC	ACCIDENT
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Date/Time Report Made: 23/01/2023 17:53		ade:	Vide Report No.:	Station Diary No.: 55			
Informan	t's Particu	lars					
Name of Informant: TING BOON KIAT			Address: 5 PASIR RIS RISE #03-09 SINGAPORE 518082				
ID Type / ID No.: NRIC NO / S6911334F			Contact No.: Home/Office:	Mobile: 91162738			
Nationality: SINGAPORE CITIZEN		N	Email:				
Sex: Age: Date of Birth: Male 53 25/03/1969			Type of Informant: Driver				
Race: Chinese		1	Language:	Institution / School Name:			
Occupation: PROJECT MANAGER		R	Driving Licence Information: Class: 3,4 Date of Expiry:				

General Inform	nation of the Accid	dent	The same of the sa		
Type of Accident: Injury Others		Drink Drive: No	Date/Time of Accident: 23/01/2023 13:30	Type of Location Slip Road	
Weather:	EXPRESSWAY	Road Surface:	R	oad Speed Limit:	
Drizzling		Wet			
Traffic Flow:		Traffic Control:	T1	Traffic Volume:	
Type of Collis Between Mov	sion: ving Vehicles - Head	I To Rear		nyone conveyed by mbulance: o	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SMQ8868S	Car	ТОУОТА	LEXUS ES250 4DR SEDAN (AUTO) EXECUTIVE	White	Slightly Damaged	0
SMS2311K	Car	MERCEDES BENZ			A STANDER	0

Details of Vehicle Insurance			100 100 100
Vehicle No. Insurance Company	Insurance No	Effective	Expiry Date





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CONTINUATION OF REPORT

Details of Vehicle Insurance					
Vehide No.	Insurance Company	Insurance No	Effective	Expiry Date	
SMQ8868S	FWD Singapore Pte. Ltd	PNPV2021- 00004580-01	25/11/2022	24/11/2023	

Details of Person	n Involved					生产的 国际企业
Any Pedestrian In	volved: No			the state of		
No. of Pedestrian	s Injured: NIL		Use of Pe	destrian	Cross	sing: NA
Driver	THE REPORT OF THE PARTY.		A CONTRACTOR	anto expens		
Name	TING BOON KIAT		1	ID No.		S6911334F
Related Vehicle	SMQ8868S (Car)			Contact No.		91162738
Hospital/Clinic	KINGS MEDICAL CLINIC			Class of Driving Licence & Expiry Date		Class: 3,4 Date of Expiry: NIL
Date Treatment				harge		/2023
No. of Days gran	ted Medical Leave	07	Degree of	f Injury	NIL	
Driver						
Name	SOH LAY GEOK			ID No.		S1677974A
Related Vehicle	SMS2311K (Car)			Contact No.		91099093
Hospital/Clinic	NIL		Class Drivin Licent Expiry	g	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL	Date Disc	scharge NIL		Maria de la companya della companya	
No. of Days gran	ted Medical Leave	NIL	Degree o	f Injury	NIL	

Brief Details.

On the above-mentioned date, time and location I was driving my vehicle bearing plate no. [SMQ8868S] along TPE exiting onto the slip road towards Pasir Ris Drive 8. As I was approaching the filter lane I slowed down and came to a stop as there was a vehicle coming from the main road of Pasir Ris Drive 8. Subsequently, a vehicle bearing plate no. [SMS2311K] knock onto the rear of my vehicle. The damages were to my rear bumper.

After the accident I was fine, however, after reaching home the pain started to occur as such, I went to my family Doctor's clinic to seek medical advice. I have a medical certificate from Kings Medical Clinic.

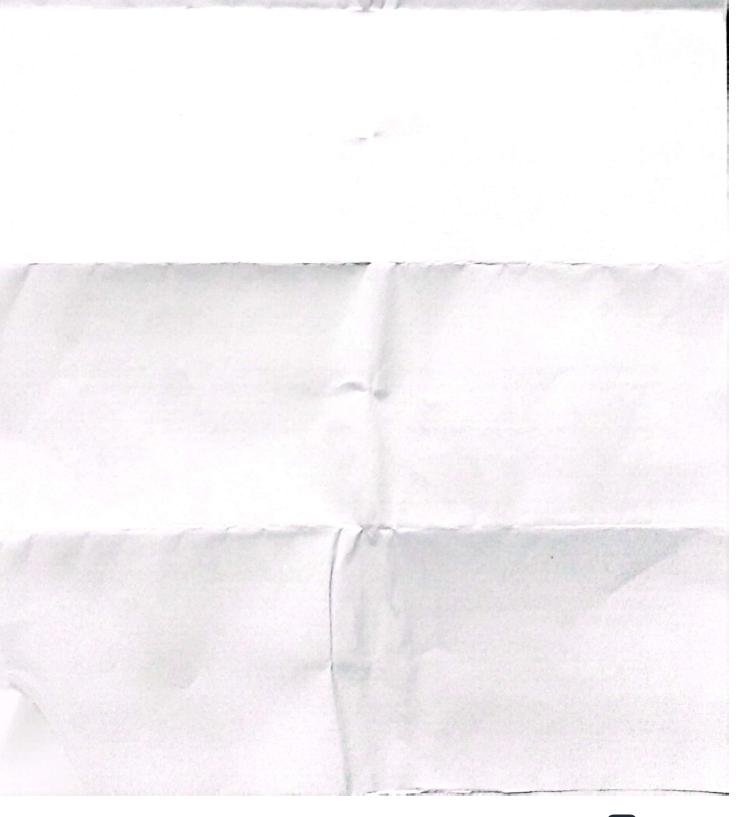
I wish to add that I have an in-car camera footage that managed to capture the accident happened.





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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 Informant:

Signature of Officer Recording The Report: F / SGT 2 MOHAMAD YASHRIF BIN MOHAMED YASIN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 23/01/2023 17:53
Officer In Charge Of Case: TP / AEIT / SI MOHAMAD ZULFAZDLI BIN ABDULLAH Contact No.: 65476204	Classification Of Case:
NP168	

