NATIONAL Asse	Samen Cour		7.1.25.76%	Date &Tune Con	pleted	Done by	
Date to 19/01/18		Jcb description	1-24 100-12-0	LANGE STORY			
Ref No MA/INCISC	001169/13	SAS e-filing			1		
Veh No YN4423S		E-mail (within 8hi					
DOA 18/01/18	1415	i-Motor Claim		m1/09781	36		
	Zvala	i-Motor W/O (Within: OD 2hr	r TP 4hrs)		1000	
OD (IP) Reporting	Only	i-Photo Uploac	led		NOT YELD THE	-	
		Assessment/Surv		I		1	
TP Insurer		Ass't Report by	Fax / Hand	to Owner/Wksp			
Preferred Wksp / INC As	sign Wksp / QW: (TWINCAR		Tel:	Fax:)
TP Particulars:		SLEIS 140	INC ()/Non-INC ()		5100000
Owner / Driver: (Tel:)	
Policy No: () P	eriod: ()	Cover Type: (
Confirmed by	: (Date:	Time)	
Insured/Driver Liabil	ity: (%)	[Note-Est. Status (W	O): N: 0-	20%; P: 21-79%.	F: 80-100%]		
Year of Registration:		Warranty: YES ()/NO()			
Excess: (\$) Loading: \$1,	,000 () / \$2,000 ()				
General Remarks:-				1 1 2 2 1 2 1 2 2 2 2		-	
() Walk-In Custo	mar : Customer's int	formation strictly Con	fidential & S	Strictly NO rafer of	repairer.		
() Total Loss Cas	e : to e-mail Insu	rer URGENTLY.					
Drive-In ()/Tow	The second secon	ce: YES () / N	0();	Towing Co. (
	(700 (616)	100		Date&Time Co	mplerad	Done b	y .
CASE STORY SERVICE STREET, SERVICE STORY SERVICE STREET	horline: 6788 6616)	Courtesy Car ()				
1) Apply for Transport		()	/-				
2) QC Check / Post Ro 3) Upload Resurvey Pl		\$30001 ()				
3) Upload Resulvey 11	noto [reepan cose	1					
Injury: -					7 N SE SE LA		
Date/Time Actions			1/1/2	Feb. 1703.05 15-152.0	r story (division)		
		×i-					
	4.						
			14.835 3.537	Class	laliet	Amt (\$)	Amt (\$)
	NAISUO	f4 0	THE PROPERTY OF THE PARTY OF	reparation Chec		1st Bill	Add Bill
Claimant's Particular	s:-		1) AR : Aces 2) DA : Dan	dent Reporting (\$30); age Assessment (\$100); INC (\$30)		
Driver/Owner:			3) TF : Tow		\$40/\$45 \$120		•
	-		St. FT · Follo	w-Through Survey (Res	survey) \$30 vef 10 Jan 2005)		
Contact No:			6) TR : Re-i	nspection	\$75	-	-
Damaged Portion:			7) N1 : Idac	DA + SMRT Survey dditional Services	\$160		
			OD*		s S:	1	*
QC Checked by (Eng	r-In-Charge):		*N5: Cor *N6: Rer	artesy Car / Tpt Allowsia mair Co-ordination	310		
	V		*N7: Pos	t Repair Inspection / Cullect Excess Coord	nation \$		
Auditors' Comments	<u> </u>	"自己"等某个这一大人	TP(NII): TP (Non INC) agains	INC \$2	0	-
Cat. 1:			9) N12: Ide	ic Mobile	Fee Charged		Made
Cat. 2 / 3;			Invotes da		Fine Charged	基础处理	

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy ability.
- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

Any false reporting may be referred to the Police for investigation.

- 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
- 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

	7	ne	1.4	СΤ	ΛТ	= 1441	ENT
AL	ы	UE	OV I	OIL		-0.0	ENT

 Date Of Report
 19/01/2018 10:22

 Date Of Accident
 18/01/2018 14:15

Exact Location Of Accident JURONG TOWN HALL RD TWDS BUKIT BATOK RD

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number YN4423S

Insured/Policyholder

Name Of Registered Owner EVERSHINE PROJECTS PTE LTD

Co Reg No 199603295M Email Address NOEMAIL

Mobile Phone No

Alternative Phone No OFFICE-90030860

Vehicle Particulars

Manufacturer HINO

Model -

Exact Purpose for which vehicle was being used at

time of accident

WORKING

NO

Are you claiming under your own insurance policy

for repair to your vehicle?

If No, Please state action to be taken THIRD PARTY

Vehicle Category COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company NTUC INCOME INSURANCE CO-OPERATIVE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 5069274027-03

Cover Note Number

Driver

Name of Driver DURAIRAJ SARANRAJ

 Passport No/FIN
 G8234065W

 Date Of Birth
 12/03/1986

 Occupation
 OUTDOOR

 Date Of Driving Pass
 04/05/2015

Driving Experience 2 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91749468

Fax Number

Contact Number

EMail Address NOEMAIL

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
 Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
 interested parties.
- By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that:

- My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

Oriver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

SKETCH PLAN	JURONY TOWN HALL BEFORE		BURIT BATUR KOA
VEHICLE A - SN 44235	SCIENCE CENTRE RP/	845 LA	NE
	JUNCTION.		1 - 1 - 1 - 2 - 1
		 101	

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was	PRIVING FORWARD ON THE EXTREME RICHT LANE ALONG
JURONY	TOWN HALL ROAD TOWARDS BURIT BATOK ROAD.
WHILE DE	ZIVING SCOWLY STRAIGHT FORWARD SCHOOLDING I FIELT A
GREGA	imager from the Rizar DR my various.
ALICHT	ED FROM MY VELLICUE OND REALIZED A VELLICUE
BRAZINH	(SLE 15140) HAD COLLIDED TO THE REDA OF MY
Victoria	E.
Well co	12 A- YN 44235
MICH	E B- SLF 15140

DECLARATION

I/We declerate or oregoing particulars are true in every respect.

Policetarcer's Signature

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No :

/ehicle No.	Model/Make HINO
ate of Accident	18/01/2018
ime of Accident	1415 HRS
ocation of Accident	JUDONA TOWN HALL ROAD TOWARDS BUKIT BATOK
xact purpose use during acci	dent wormsh Hour (BEPONE GRATING HOTEL
Name of Owner	EVERSHING PROJECTS PTIE LTD
elephone No.	H/P: 90030860 Home: Office:
NRIC	199663275M
Address	4 SIXTH AURNUE 5 (276471)
Claim type	OD THIRD PARTY REPORTING ONLY
nsurance Company	NTAC
Type of Coverage	Comprehensive Third Party Third Party / Fire /Theft
Policy No.	5069274027-03
Name of Driver	As Above If No. Dungle AJ SAR ANRAJ
NRIC FIN	G9234065W Any Passengers: 1
Date of birth	12 mga 1986
Occupation	Outdoor / Indoor
	04 mgs 2015
Driving License Pass Date Gender	Male / Female
Contact No.	H/P: 91749466 Home: Office:
Address	II/I
Driver have any own vehicle	No, If yes, Reg No.
	Employee, If no, state
Relationship	Clear Raining Other
Weather condition	
Road Surface	
Any Injuries	No. If Yes, Who?
Name And Contact No.	
Name And Contact No.	No. If Yes, Where?
Police Report Vehicle B No.	SUF 15140 Any Passengers :
	Contact No. :
Name of Driver	Any Passengers :
Vehicle C No.	Any Passengers :
Vehicle D No.	Any Passengers :
Vehicle E no.	Any Passengers :
Vehicle F No.	Any Passengers :
Vehicle G No. Witness Name	Witness Contact :
	REAR
Accident Portion	Yes / No
Camera Recorder	163 / 140
Email Address	
Email Address	Yes / No
PARTICULAR WORKSHOP	TWINCAR AMOMOTIVE PTZ (TO
CONTACT NO.	6842 0051 / 6744 0510
CONTACT PERSON	
CONTACT PERSON	6741 0510



WORK PERMIT

Employment of Foreign Manpower Act (Chapter 91A) Republic of Singapore

EVERSHINE PROJECTS PTE LTD



DURAIRAJ SARANRAJ

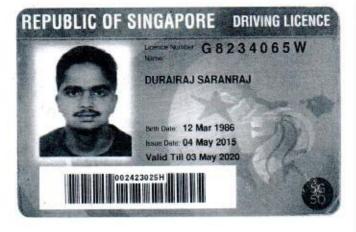
Work Fermit No. 0 34195021

Sector.
CONSTRUCTION





K0046287



VISIT PASS

Immigration Regulations

Name DURAIRAJ SARANRAJ



G8234065W

Date of Birth 12-03-1986

INDIAN

MULTIPLE JOURNEY VISA ISSUED



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 2B Motorcycles =< 200 cc 04 May 2015 Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive 04 May 2015 of the driver; and other motor vehicles =< 2500kg

NP 428A





Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISE	KS AND COMPENSATION) ACT (CHAPTER 189)	
MOTOR VEHICLES (THIRD PARTY RISI	KS AND COMPENSATION) RULES, 1960	
ROAD TRANSPORT ACT, 1987 (MALA	(AIZY		
MOTOR VEHICLES (THIRD PARTY RISE	KS) RULES, 1959 (MALAY	SIA)	
Certificate Number: 5069274027-0		Cover : Comprehensive	
 Index mark and Registration Num 	nber of Vehicle	: YN4423S	
Chassis Number		: JHHUCP3HX0K007574	
Name of Policyholder		: EVERSHINE PROJECTS PTE LTD	
3. Effective Date of Insurance		: 19 Dec 2017	
 Expiry Date of Insurance Persons or Classes of Persons ent 	and and any district the	: 18 Dec 2018	
 Persons or classes of Persons em The Policyholder. 	inted to drive#		
	ing on the Policyholder'	s order or with his/her permission.	
		ordance with the licensing or other laws or regulation	s to drive
the Motor Vehicle or has bee	en so permitted and is no	ot disqualified by order of a Court of Law or by reaso	n of any
enactment or regulation in t	hat behalf from driving t	he Motor Vehicle.	
6. Limitations as to Use#			
(a) Use for social domestic and	pleasure purposes and in	n connection with the Policyholder's business or prof	ession.
(b) Use for the carriage of passe	ngers or goods in conne	ection with the Policyholder's business.	
This Policy does not cover			
(a) the fee bies or covered			
(a) Use for hire or reward.			
(b) Use for racing, pace-making,	reliability trial or speed	-testing.	
(b) Use for racing, pace-making, (c) Use whilst drawing a trailer	except the towing of any	one disabled mechanically propelled vehicle.	
(b) Use for racing, pace-making, (c) Use whilst drawing a trailer of # Limitations rendered inopen.	except the towing of any ative by Section 8 of the	testing. y one disabled mechanically propelled vehicle. Motor Vehicle (Third Party Risks and Compensation out Act, 1987 (Malaysia), are not to be included under	er these
(b) Use for racing, pace-making, (c) Use whilst drawing a trailer of the second secon	except the towing of any ative by Section 8 of the on 95 of the Road Transp	one disabled mechanically propelled vehicle. Motor Vehicle (Third Party Risks and Compensation)	er these
(b) Use for racing, pace-making, (c) Use whilst drawing a trailer of the second	except the towing of any ative by Section 8 of the on 95 of the Road Transp : S\$500	one disabled mechanically propelled vehicle. Motor Vehicle (Third Party Risks and Compensation)	er these
(b) Use for racing, pace-making, (c) Use whilst drawing a trailer of the second	except the towing of any ative by Section 8 of the on 95 of the Road Transp : 5\$500 : N/A	one disabled mechanically propelled vehicle. Motor Vehicle (Third Party Risks and Compensation)	er these
(b) Use for racing, pace-making, (c) Use whilst drawing a trailer of the second	except the towing of any ative by Section 8 of the on 95 of the Road Transp : S\$500	one disabled mechanically propelled vehicle. Motor Vehicle (Third Party Risks and Compensation)	er these
(b) Use for racing, pace-making, (c) Use whilst drawing a trailer of the second	except the towing of any ative by Section 8 of the on 95 of the Road Transp : \$\$500 : N/A : \$\$100	one disabled mechanically propelled vehicle. Motor Vehicle (Third Party Risks and Compensation)	er these
(b) Use for racing, pace-making, (c) Use whilst drawing a trailer of the second	except the towing of any ative by Section 8 of the on 95 of the Road Transp : \$\$500 : N/A : \$\$100 : YES : N/A	one disabled mechanically propelled vehicle. Motor Vehicle (Third Party Risks and Compensation)	er these
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(b) Use for racing, pace-making, (c) Use whilst drawing a trailer of the second	except the towing of any ative by Section 8 of the on 95 of the Road Transp : \$\$500 : N/A : \$\$100 : YES : N/A : MARKET VALUE o which this Certificate opensation) Act (Chapter	one disabled mechanically propelled vehicle. Motor Vehicle (Third Party Risks and Compensation Fort Act, 1987 (Malaysia), are not to be included under the compensation of the Insured Vehicle AT TIME OF LOSS relates is issued in accordance with the provisions of 189) and Part IV of the Road Transport Act, 1987 (M.	er these
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(b) Use for racing, pace-making, (c) Use whilst drawing a trailer of the second	except the towing of any ative by Section 8 of the on 95 of the Road Transp : \$\$500 : N/A : \$\$100 : YES : N/A : MARKET VALUE o which this Certificate opensation) Act (Chapter	one disabled mechanically propelled vehicle. Motor Vehicle (Third Party Risks and Compensation Fort Act, 1987 (Malaysia), are not to be included under the compensation of the Insured Vehicle AT TIME OF LOSS relates is issued in accordance with the provisions of 189) and Part IV of the Road Transport Act, 1987 (M.	the Motor alaysia)
(b) Use for racing, pace-making, (c) Use whilst drawing a trailer of the second	except the towing of any ative by Section 8 of the on 95 of the Road Transp : \$\$500 : N/A : \$\$100 : YES : N/A : MARKET VALUE o which this Certificate opensation) Act (Chapter	one disabled mechanically propelled vehicle. Motor Vehicle (Third Party Risks and Compensation port Act, 1987 (Malaysia), are not to be included under the content of the included under the provisions of the sistence of the provisions of the Road Transport Act, 1987 (Malaysia) and Part IV of the Road Transport Act, 1987 (Malaysia)	the Motor
(b) Use for racing, pace-making, (c) Use whilst drawing a trailer of the second	except the towing of any ative by Section 8 of the on 95 of the Road Transp : \$\$500 : N/A : \$\$100 : YES : N/A : MARKET VALUE o which this Certificate opensation) Act (Chapter	one disabled mechanically propelled vehicle. Motor Vehicle (Third Party Risks and Compensation port Act, 1987 (Malaysia), are not to be included under the content of the included under the provisions of the sistence of the provisions of the Road Transport Act, 1987 (Malaysia) and Part IV of the Road Transport Act, 1987 (Malaysia)	the Motor

Enquire Vehicle Registration Details

Owner Particulars

NRIC/Passport/Company 199803295M

Cen No.:

Owner ID Type:

Company

Owner Name:

EVERSHINE PROJECTS PTE LTD

Registered Address:

4 SIXTH AVENUE SINGAPORE 276471

Mailing Address.

Birth Date:

Vehicle Particulars

Vehicle No.:

YN4423S

Previous Vehicle No.:

Effective Date of Ownership:

28 Oct 2013

Original Regn Date:

28 Oct 2013

Registration Date.

28 Oct 2013

Year of Manufacture:

2013

Vehicle Type:

Goods (Open) Lorry (Wooden Body)

Vehicle Scheme:

Vehicle Attachment 1:

With Hood

Vehicle Attachment 2:

Vehicle Attachment 3:

Vehicle Make:

HINO

Vehicle Model:

XZU710R 4.0 MANUAL ABS TURBO

Primary Colour:

White

Secondary Colour.

Passenger Capacity:

Chassis No.:

JHHUCPSHXCK007874

Engine No.:

N04CUV16512

Engine Capacity/Power 4909 co / -

Rating:

Maximum Power Output: -

Propellant.

Max Unladen Weight 2480 kg

Maximum Laden Weight: 5000 kg Open Market Value:

\$29,300.00

PARF Eligibility:

PARF Eligibility Expiry

Minimum PARF Benefit: -

IU Label No.:

No. of Transfers:

1510807241

2013080105000320R

COE No.: COE Expiry Date:

27 Oct 2023

COE Category:

C - Goods Vehicle & Bus

OCE Registration

C - Goods Vahiole & Bus

Category Quota Premium (CP)

Prevailing Ouota

565.036.00 /-

Actual OF Paid:

\$65,035.00

OP (Regn Cat)

565,036,00

Claim Handling

The premium on this policy has not been collected.

Accident MT/0978526

Delicy No. 5059274027-03 Vehicle No. YN4423S GS

GST Registration No. 5069274027-03 Policy No. Policyholder NRIC 199 EVERSHINE PROJECTS PTE LTD Policyholder Name 0 Loading Comprehensive Cover Type FLEET INSURANCE Product Code Contact No.(Home) Contact No.(Office) Contact No.(Mobile) eCode No Special Remark Email Address eCode Reason No Yes No Yes Not Private Hire NCD Entitlement(%) 0 No NCD Protection Accident Details Colli Accident Type Accident Report Within 24 hrs 19/01/2018 09:44 Report Date Country of Accident Sing Time of Accident bhamm 14:15 18/01/2018 Date of Accident ICM No. Orange Force Reporting Centre ALONG JURONG TOWN HALL RD TWDS JURONG GATEWAY Accident Location ₩ Excess Windscreen Excess 500.00 Additional Excess Own damage Excess Outside Singapore OD Excess Unnamed Driver Excess Outside Singapore TP Excess 0.00 Third Party Excess **▽** GST Registered Information GST Registration Date **GST Registered GST Status Verified** No GST Registration No. Modification History SING SUNGEL TENGAH AGROTECHNOL 55 SUNGEI TENGAH ROAD Address 2 Address 1 Post Code 698 Address Type Singapore address Address 4 5069274027-03 Related Policy Number Unit No. OI Driver Info Driver Type Driver Name Driver DOB Driver NRIC Unnamed driver Name **Driving Experience** Driver Age Register Date of Driver License Contact No.(Home) Contact No.(Office) Contact No.(Mobile) Address 3 Address 2 Address 1 Post Code Address Type Foreign address Address 4 Driver Insurer Company Does he own a Singapore Registered car? Driver Vehicle No. Yes . No Modification History Claim 002 OD-MX New 199 Insured NRIC EVERSHINE PROJECTS PTE LTD Insured Name Claim Type * OD-MX 646 Contact No.(Office) NIL Contact No.(Home) Contact No.(Mobile) NIL SLF: TP Vehicle Number YN44235 OI Vehicle Number Email Address TWI Name of Preferred Workshop YN4423S / SLF1514D ON 18 Jan 2018 Claim Description Preferred Workshop Contact Insured Liability * Not at Fault Rec GIA report Preferred Workshop (refer below) Preferered Repair Option Require Finalisation Yes Date Received 19/0 Claim Close Date Date Registered 19/01/2018 10:46 Total Loss but Repaired Workshop Repairer ROSLINDA Report Taken By Print AK letter Save Submit Attachment Claim No. MT/0978526 Accident No. Upload Date 19/01/2018 00:00 Yes No Last Doc. Received Confidential Urgency * Category * Path * 1/2 http://giclaim.income.com.sg/gcs/icm/eclaim/claimantSave.do

Claim Handling(Claim Task 002 OD-MX)

Choose File	No file chosen
Choose File	No file chosen
Message Read	П

Clear	Please Select	•	NO	*	Normal	
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Clear	Please Select	•	NO	•	Normal	
Clear	Please Select	*	NO	*	Normal	-
Clear	Please Select	•	NO	٠	Normal	,
Clear	Please Select	*	NO		Normai	,

Attachment List

					Attachment Li
Descrip	Urgency	P	Category	Uploaded By/Date	Attachment
SAS 2018	Normal		SAS	YA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 19 Jan 2018 10:45	1
NRIC/ Driving Lice	Normal		NRIC/ Driving License	YA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 19 Jan 2018 10:43	C SCI
Photos 20	Normal		Photos	VA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 19 Jan 2018 10:42	324
Photos 20	Normal		Photos	VA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 19 Jan 2018 10:42	P
Photos 20	Normal		Photos	VA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 19 Jan 2018 10:42	
Photos 20	Normal		Photos	NYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 19 Jan 2018 10:42	
Photos 20	Normal		Photos	AVA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 19 Jan 2018 10:42	- 5
Photos 20	Normal		Photos	AYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 19 Jan 2018 10:42	-
Photos 20	Normal		Photos	AYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 19 Jan 2018 10:42	
Source	9		File Name	g By/Date Folder Date	

Display in New Window Scan and uploading