Date In: 29/3/18-18:32	Jcb description	Date &Time C	ompleted	Done	e pi.
Ref No: HA INC 1800 1892 /24	SAS e-filing				
Vch No: GBH911	E-mail (within Shrs, A	IC 2hrs)			94
D.O.A.: 29/3/18-12:25	i-Motor Claim For	m MT/098829	6 29	3/18	19:23
	i-Motor W/O (With	in: OD 2hrs, TP 4hrs)			
OD (TP:/)Reporting Only	i-Photo Uploaded	l v		111	
TD	Assessment/Survey I	Report			
TP Insurer:	Ass't Report by Fax	/ Hand to Owner/Wksp			
Preferred Wksp / INC Assign Wksp / QW:	(Tel:	Fax:		
TP Particulars: Veh No: yN	88V9X	INC()/Non-INC	()		
Owner / Driver: (Tel:)	
Policy No: ()	Period: () Cover Type: ().	
Confirmed by : (Dat	te: Time	:)	
Insured/Driver Liability: (%	Note-Est. Status (WO):	N: 0-20%; P: 21-79%	P: 80-100%		
Year of Registration: ()	Warranty: YES ()/1	()0/			
Excess: (\$) Loading: \$	\$1,000()/\$2,000()		THE WAY	
General Remarks;-					
() Walk-In Customer : Customer's	information strictly Confiden	tial & Strictly NO refer of	repairer.		e-main Av
() Total Loss Case : to e-mail Ins		· · · ·	4	EL CRETTE	
	oice: YES () / NO () ; Towing Co: (· ,	-,)
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Remarks:- (INC hotline: 6788 6616	0 :-	Date&Timb Co	inple od	Done	by
	/ Courtesy Car ()	-	•		
Apply for Transport Allowance (QC Check / Post Repair Inspection) / Courtesy Car ()	-			
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as <u>truthful</u> and <u>accurate</u> 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.

5. 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.

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 Date Of Report
 29/03/2018 18:32

 Date Of Accident
 29/03/2018 12:25

Exact Location Of Accident PAYA LEBAR RD TWDS GUILLEMARD RD AFTER SHELL STN

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBH91X

Insured/Policyholder

Name Of Registered Owner DELSEC LOGISTICS PTE LTD

 Co Reg No
 201720731R

 Email Address
 NOEMAIL

 Mobile Phone No
 (LOCAL) +65-93888663

 Alternative Phone No
 OFFICE-93888663

Vehicle Particulars

Manufacturer TOYOTA

Model HIACE 2.5 A

Exact Purpose for which vehicle was being used at

time of accident

WORKING

Are you claiming under your own insurance policy

for repair to your vehicle?

NO

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 THIRD PARTY FIRE AND/OR THEFT

Fleet Policy NO

Policy Number 5097708789

Cover Note Number

Driver

Name of Driver BENNEDICT YAP GUO MING

 NRIC No
 S9623197J

 Date Of Birth
 05/07/1996

 Occupation
 OUTDOOR

 Date Of Driving Pass
 30/03/2015

Driving Experience 2 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91123232

Fax Number

Contact Number OFFICE-91123232

EMail Address NOEMAIL

Address BLK 754 JURONG WEST STREET 74

#02-38

Postcode 640754

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE

1

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO Number of vehicles involved in the accident 2

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police? NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO STATEMENT.

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? NO
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number YN8849X

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver YEE KOK CHANG

NRIC/Passport Number

Contact Number 90388113

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

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.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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. 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.
- 7. 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)

I understand, acknowledge, agree and consent that:

- (a) 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)
 - (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:
 - (i) 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.

Co. Reg. No. 201720731R

Email: delseclogistics@gmail.com Mobile +65 8318 1128

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

Date & Time:

nnel's Signature Reporting Centre Pers

Name:

NRIC/FIN No .:

SKETCH PLAN Manique A-GBH 91X VALLICLE B- JN8549X PAYA LEBAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

EXTREME RIGHT LANE PRIVIAN STRAIGHT AMEAD, ON THE WAS TOWARDS CHILLEMARD ROAD DIRECTION. AS DUR TO HEAVY TRAFFIC I COMPLETED MY CHANGING OF LAME SLIGHTLY SLAMP TO LANE 1 WITH MY LANG 2 VEHICLE From STOPPED VILLANCLIE. AND STATIONARY STOPPED BEHIND A STATIONARM LANG. THIR COMPLETELY IN NOTICE A VEHICUR TRYING TO STRUTEZE THROUG FROM AS I'M ALREADY VERY WEHI CLIZ ch my 5,02 INFRONT AND WHICH I TIME VEHICLE COULDN'T SHIFT MY BROMENS AND THE NEXT FEW SECUNDS I FIELT IMPOUT FROM THE RIGHT SIDE Um so VEHICUE. ALICHTED FROM MY VEMICUE BAID REPLIZED A VEHICUE BEARING (JN 8849X) HAD COLLIDED TO THE RIGHT 5.DIE AND HE WAS STATIONARY STOPPED TRUED OF MY VERMOUR WHILE I HUNHA OND THUIS EM NO THEN ING RIGHT LANG THE SQUEEZE INTO HITTED ONTO THE PACHT SIDE OF MY VEHICUE. WILLIAM A - GOH 91 X Wemicus YP789 WK

DECLARATION

foregoing particulars are true in every respect.

Delsec Logistics Pte Ltd

Policyholder's Signature
Email: delseclogistics@gmail.com
Driver's Signature Date & Time:

Co. Reg. No. 201720731R Mobile +85 8318 1128

Date & Time:

Reporting Centre Personne's Signature

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Girstanh

CONTRAL

NRIC/FIN No.:

Name:

03/2018 23 pm HRS a lebar Road toward Guillemard Rd Derivery (after shells) 138886340me: Office: 201720731 R Verde Crescent Villa Verde 5'688454 THIRD PARTY REPORTING ONLY THE THE PARTY Any Passengers: O 123232 Home: Office: 364, Jurong West St74 # 62-38 \$'641 If yes, Reg No. Dyee, If no, state Raining Other
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/ Female 71123232 Home: Office: 754, Jurong West St74 # 52-38 \$'641 If yes, Reg No. Oyee, If no, state Raining Other
/ Female 71123232 Home: Office: 754, Jurong West St74 # 52-38 \$'641 If yes, Reg No. Oyee, If no, state Raining Other
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If yes, Reg No. Oyee, If no, state Raining Other
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If Yes, Who?
If Yes, Where?
√8849 × Any Passengers : O
Kok CHang. Contact No.: 90388113
Any Passengers :
Witness Contact :
t side centre
No
edict 754@notmail.com
+

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9623197J



Name

BENEDICT YAP GUO MING

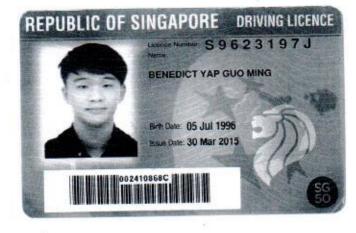
CHINESE

Country of birth

SINGAPORE

05-07-1996 M

596231973



4745109



NRIC No. S9623197J

06-07-2011

APT BLK 754 JURONG WEST STREET 74 #02-38 SINGAPORE 640754

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

EFFECTIVE DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive 30 Mar 2015 of the driver; and other motor vehicles =< 2500kg



NP 428A



Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS)	A)	
Certificate Number: 5097708789		r : Third Party, Fire & Theft
Index mark and Registration Number		
Chassis Number		00003200
Name of Policyholder		EC LOGISTICS PTE, LTD.
Effective Date of Insurance		b 2018
Expiry Date of Insurance		b 2019
5. Persons or Classes of Persons entitle	AND THE PERSON CONTRACTOR OF THE PERSON CONTRA	2013
(a) The Policyholder.	24 15 4111211	
(b) Any other person who is driving	on the Policyholder's order or w	ith his/her permission.
		the licensing or other laws or regulations to drive
		ed by order of a Court of Law or by reason of any
enactment or regulation in that	t behalf from driving the Motor Ve	ehicle.
6. Limitations as to Use#		
		n with the Policyholder's business or profession.
(b) Use for the carriage of passenge	ers or goods in connection with th	ne Policyholder's business.
This Policy does not cover		
(a) Use for hire or reward.		
(b) Use for racing, pace-making, re-	liability trial or speed-testing.	
(c) Use whilst drawing a trailer exc	ept the towing of any one disable	ed mechanically propelled vehicle.
headings.	: N/A	7 (Malaysia), are not to be included under these SG MOTOR TRADER PTE
	: N/A	Reg. No.: 201537467C
EXCESS (SECTION 2)		
EXCESS (SECTION 2) INSURE WITH COE	: YES	
	: HITACHI CAPITAL ASIA PACIFI	IC PTE LTD 172 Sin Ming Drive Singapore 575720
INSURE WITH COE	: HITACHI CAPITAL ASIA PACIFI	172 Sin Ming Drive
INSURE WITH COE HIRE PURCHASE COMPANY SUM INSURED I/We hereby Certify that the Policy to w Vehicles (Third Party Risks and Compen	HITACHI CAPITAL ASIA PACIFI MARKET VALUE OF INSURED which this Certificate relates is issue.	VEHICLE AT TIME OF LOSS 8933 9400 Fax: 6456 0 ued in accordance with the provisions of the Motor rt IV of the Road Transport Act, 1987 (Malaysia)
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eBao Tech								GeneralClaim		
Hello, NAC_PAYA_UBI_80	0601		- Company		ALICE STATE	,	Change Lan	guage	Change Passwo	rd + Log Out
My Desktop Notice of Loss	Policy N	o. No.(For Motor)	[GВН91X		3	Date of Acc	cident	29/0	3/2018 12:25	
	Select	Policy No.	Policyholder Name	Policyholder NRJC	Product	Search Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5097708789	DELSEC LOGISTICS PTE. LTD.	201720731R	GCV	Third Party, Fire & Theft	GBH91X	GBH91X	02/02/2018	01/02/2019
					18	Continue				

Policy No.	5097708789	Policyholder Name	DELSEC LOGIST	TICS PTE. LTD.	Policyholder NRIC	201720731R
Address	109 VERDE CRESCENT VILLA VE	RDE SINGAPO	RE 688454			
Product Name	COMMERCIAL VEHICLE INSURAL	Plan			Group Policy Flag	N
Policy ssue Date	31/01/2018	Effective Date	02/02/2018 00	00	Expiry Date	01/02/2019 23:59
Third Party Excess	0	Own damage Excess	0		Windscreen Excess	0
Additional Excess		OS Premium	0			
Outside Singapore OD Excess		Outside Singapore TP Excess				
Agent	SG MOTOR TRADER PTE. LTD.	Agent Tel.	62527370		GST Flag	Y
Co- insurance Flag Open Policy Info Certificate	No					
Info Policyh	older Mailing Address					
Address 1	109 VERDE CRESCENT	Address 2	VILLA VERDE		Address 3	SINGAPORE 688454
Address 4		Address Type	Singapore addr	ess	Post Code	688454
Unit No.		Related Policy Number	5097708789			
	d Object: GBH91X					
	ements					
Sequenc	ce Date of Endorsement	Endorse	ment Type	Endorsem	ent Status	Endorsement Content
í	02/02/2018 00:00	Basic Inform Endorsemen		Endorsement Ta	ke Effective	Thank you for giving us the opportunity to serve you. W confirm that from 02 Feb 2018, the following policy details are amended as follows: HIRE PURCHASE COMPANY: HITACHI CAPITA ASIA PACIFIC PTE LTD CHASSIS NUMBER: KDH2000032800 ENGINE NUMBER: 2KD1382139 VEHICLE REGISTRATION

aim Handling							
ident HT/0988296	274797272	Vehicle No.	G8H91X	- 41	ST Registration No.		
HCY No.	5097706789	Venicle No.	POLINTY				720731R
icyholder Name	DELSEC LOGISTICS PTE. LTD.				dicyholder NRIC		ASTRACT.
sduct Code	COMMERCIAL VEHICLE INSURA	Cover Type	Third Party, Fire & Theft	Le	sading	0	
ntact No.(Mobile)	93888663	Contact No. (Office)	0	C	ontact No.(Home)	0	
ail Address		Special Remark		40	lode	Mr	~
c	® No ○Yes	TCA	® No ○ Yes	-	Code Reason		
D Protection	No	NCD Entitlement(%)	0	Pr	ivate Hire	No	
	346						
Accident Details		127020 12811 1281	VQ19		ontest Tons	Coll	ision - Change / Cross lane
ort Date	29/03/2018 19:20	Academt Report Within 24 hrs	Yes		ccident Type		
e of Accident	29/03/2018	Time of Accident hh:mm	12:25	C	ountry of Academ	Sin	gagore
orting Centre		Orange Force		10	OM No.		
ident Location	PAYA LEBAR RD TWDS GUILLEMARD RD	AFTER SHELL STN					
Benefits							
Excess							0.00
n damage Excess	0.00	Additional Excess		w	Indscreen Excess		0.00
samed Driver Excess		Outside Singapore OD Excess					
og Party Excess	0.00	Dutside Singapore TP Excess					
GST Registered Informa	etion						
Registered	No		GST Registration Date				
T Registration No.	3759		GST Status Verified		Yes		
dification History							
Incapor resory							
Policyholder Mailing Ad	dress						
fress 1	109 VERDE CRESCENT	Appress 2	VILLA VERDE	A	ddress 3	50	IGAPORE 688454
iress 4		Address Type	Singapore address	P	ost Code	688	1454
ž No.		Related Policy Number	5097708789				
		The state of the s	S1697406071				
OI Driver Info							
ver Name	Unnamed Driver	Driver Type	Unnamed Driver				
named driver Name	BENNEDICT YAP GUO MING	Driver NR3C	595231971	D	river DOB	05/	07/1996
pister Date of Driver License	30/03/2015	Driver Age	21	D	riving Experience	2	
ntact No.(Mobile)	91123232	Contact No. (Office)	0	c	ontact No.(Home)	0	
			With the substitution of the		ddress 3	518	IGAPORE 540754
dress 1	BLK 754	Address 2	JURONG WEST STREET 74				A PARTICIPATION .
	BLX 754	Address Type	Singapore address		ost Code		0754
dress 4	02-38						7754
dress 4 it No. es he own a Singepore				P		64	7754
dress 4 at No. les he own a Singapore gatered car?	02-38	Address Type		P	ost Code	64	7754
idress 1 stress 4 vit No. ses he own a Singapora gastered car? claration eathelyser or Blood Test mading?	02-38	Address Type		P	ost Code	64	7754
idress 4 st No. ses he own a Singapore glatered car? claration eathelyser or fillood Test	02-38 ○ Yes ® No	Address Type Driver Vehicle No.	Singapore address	P	ost Code	64	7754
dress 4 st No. st No	02-38 ○ Yes ® No	Address Type Driver Vehicle No.	Singapore address ○ Yes No	p.	ost Code	64i	
dress 4 st No. set No. set he own a Singapore gatered car? claration eathelyser or Blood Test ading? diffication History Claim 001 New	02-38 ○ Yes ® No	Address Type Driver Vehicle No.	Singapore address	p.	ost Code	64i	2754 1720731R
dress 4 at No. with No.	02-38 ○ Yes No 0 mg	Address Type Driver Vehicle No. Any Injury?	Singapore address ○ Yes No	P. D.	ost Code	64i	1720731H
dress 4 If No. es he own a Singapore gratered car? Claration bathelyser or Blood Test adding? Chairm 001 MEM Impre * Matt No.[Mobile]	02-38 ○ Yes No 0 mg	Address Type Driver Vehicle No. Any injury? Insured Name	Singapore address ○ Yes No DELSEC LOGISTICS PTE, LTD.	p. 0	ost Code inver Insurer Comp	20 NI	1720731H
dress 4 if No. es he own a Singapore glatered car? claration eathelyser or Blood Test adding? chication History Claim 001 New im Type * intact No.(Mobile) had Address	02-38 ○ Yes No 0 mg	Address Type Driver Vehicle No. Any Injury? Insured Name Consect No. (Home)	Singapore address ○ Yes No	D 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ost Code inver Insurer Comp nsured NRIC contact No. (Office) P Vehicle Number	20 NII	1720731R
dress 4 if No. is the own a Singapore glatered car? charation eathelyser or Blood Test adding? chication History Chaim 001 New ism Type * intact No. (Mobile) has Address ism Description	02-38 ○ Yes No 0 mg	Address Type Driver Vehicle No. Any Injury? Insured Name Correct No. (Home) Of Vehicle Number	Singapore address ○ Yes No DELSEC LOGISTICS PTE, LTD. GEHPLX		ost Code inver Insurer Comp nsured NRIC contact No.(Office)	20 NII	1720731R
idrecs 4 st No. ses he own a Singapore gistered car? claration eathelyser or Blood Test adding?	02-38 ○ Yes No 0 mg	Address Type Driver Vehicle No. Any Injury? Insured Name Consect No. (Home)	Singapore address ○ Yes No DELSEC LOGISTICS PTE, LTD.	11 1 1 1 1 1 1 1 1	ost Code inver Insurer Comp nsured NRIC contact No. (Office) P Vehicle Number	20 NII	1720731R
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dress 4 If No. es he own a Singapore gistered car? Claration Esthelyser or Blood Test ading? Chaim 001 New Improve the single of the si	02-38 ○ Yes No 0 mg GD-MX GBH91X / YN8849X ON 29 Mar 2018 Yest	Address Type Driver Vehicle No. Any injury? Insured Name Correct No. (Home) Of Vehicle Number Insured Liability *	Singapore address ○ ves No DELSEC LOGISTICS PTE, LTD. GEHPLX Not at Fault	Down G	nsured NR3C contact No.(Office) P Vehicle Number name of Preferred V	20 NII VN	1720731R L DE49X
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	Uploaded By/Date	Folder Date	Rie Name		9	Source	Action
Video List						1.000.001	
-	NAC_PAYA_UBJ_800601(NAT	DNAL ASSESSMENT CENTRE SERVICES) on 29 Mw r 2018 19:23	Photos		Normal	Photos 2018-3-29	Edit
1	NAC_PAYA_UBI_800601(NAT	ONAL ASSESSMENT CENTRE SERVICES) on 29 Ma r 2018 19:23	Photos		Normal	Photos 2018-3-29	Edit
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es com	NAC_PAYA_UBI_800601(NATI	ONAL ASSESSMENT CENTRE SERVICES) on 29 Mg r 2018 19:23	NRIC/ Driving License		Normal	NRIC/ Driving License 2018-3-29	Edit
Attachment		uploaded By/Date	Category	P	Urgency	Description	Msg Sent? Action (CO)