Invoice Preparation Checklist		Jeb description		Date &Time Completed	Done	př.
D.O.A.	Ref No: NALING 800 6134174	SAS e-filing		i		
I-Motor Claim Form		E-mail (within 8	hrs, AIC 2hrs)			•
I-Motor W/O (winks) 0D 2hr, Tr 4hr)		i-Motor Clair	n Form	MT/0989111	5/4/18 11	07
TP Insurer:  Assessment/Survey Report   Asset Report by Fax/Hand to Owner/Wiss  Preferred Wksp / INC Assign Wksp / GW;  Tel: Fax:  TP Particulars:		i-Motor W/O	(Within: OD 2hrs,	TP 4brs)		
Preferred Wksp / INC Assign Wksp / QW:	OD . TP/ Reporting Only	i-Photo Uploa	ided	1.		
Preferred Wksp   INC Assign Wksp   QW:   Tel:   Fax:	MANAGE TO THE PARTY OF THE PART	Assessment/Su	vey Report	İ		
Preferred Wksp / INC	TP Insurer:	Ass't Report by	Fax / Hand to	Owner/Wksp		-
Owner / Driver:	Preferred Wksp / INC Assign Wksp / QW:	(		Tel:	Fax:	
Policy No.   Period.   Period.   Cover Type.   Policy No.   Policy N	TP Particulars: Veh No:	06310A	, INC(	)/Non-INC( ).		
Confirmed by :	Owner / Driver: (			Tel:	)	
Insured/Driver Liability: ( %) [Note-Est Stams (WO): N: 0-20%; P: 21-79%; P: 30-100%]  Year of Registration: ( ) Warranty: YES ( ) / NO ( )  Excess: (\$ ) Loading: \$1,000 ( ) / \$2,000 ( )  General Reinarks:	Policy No: ( )	Period: (	)	Cover Type: (	) _	
Year of Registration: ( ) Warranty: YES ( ) / NO ( )  Excess: (S ) Loading: \$1,000 ( ) / \$2,000 ( )  General Retriarks: ( ) Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer. ( ) Total Loss Case : to e-mail Insurer URGENTLY.  Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co: ( )  Parestime & Copyright & Done by  Done by  In Apply for Transp-ort Allowance ( ) / Courtesy Car ( )  2) QC Check / Post Repair Inspection ( )  3) Upload Resurvey Photo [Repair Cost > \$3000] ( )  Injury:  Date/Time Actions  Actions  Actions  Actions  Actions  Actions  Actions  Actions  Invoice Pfc (ar atton Checklist	Confirmed by : (		Date:	Time:	)	
Excess: (\$ ) Loading: \$1,000 ( ) / \$2,000 ( )  General Remarks:- ( ) Walk-In Customer: Customer's information strictly Confidential & Strictly NO rafer of repairer. ( ) Total Loss Case : to e-mail Insurer URGENTLY.  Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co: ( )  Remarks: (URC hoftine: \$188.6616) Date Stanta Computed Done by  1) Apply for Transport Allowance ( ) / Courtesy Car ( ) 2) QC Check / Post Repair Inspection ( ) 3) Upload Resurvey Photo [Repair Cost > \$3000] ( )  Injury:  Date/time   Actions    Injury:  Date/time   Actions    Injury:  Date/time   Actions    Injury:  Date/time   Actions    Injury:  Date Time   Conditions    Injury:  Date Time   Conditions	Insured/Driver Liability: ( %	6) [Note-Est. Status (W	O): N: 0-20	%; P: 21-79%. P: 30-	100%]	
General Remarks:  ( ) Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.  ( ) Total Loss Case : to e-mail Insurer URGENTLY.  Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co: ( )  Remarks: (INC hotline: 6788 6616)  1) Apply for Trans-ort Allowance ( ) / Courtesy Car ( )  2) QC Check / Post Repair Inspection ( )  3) Upload Resurvey Photo [Repair Cost > \$3000] ( )  Injury:  Date/Time Actions    Actions	Year of Registration: (	) Warranty: YES (	)/NO(	)		
( ) Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer. ( ) Total Loss Case : to e-mail Insurer URGENTLY.  Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co: ( )  Remarks: (INC hortune: 67886616)		\$1,000 ( )/\$2,000	( )			
( ) Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer. ( ) Total Loss Case : to e-mail Insurer URGENTLY.  Drive-In ( ) / Towed-In ( ); Invoice: YES ( ) / NO ( ); Towing Co: ( )  Remarks: (ING hoftine: 67885616) Date Time Completed ( )  Apply for Trans-ort Allowance ( ) / Courtesy Car ( )  2) QC Check / Post Repair Inspection ( )  3) Upload Resurvey Photo [Repair Cost > \$3000] ( )  Injury:  Date Time Actions  ACTION Date Time Actions  1) AR: Accident Reporting (310); INC (880)  2) Date During Austineed (\$100); INC (880)  3) IT: Testing Fee \$40,745  4) FT: Follow-Through Survey (Resurvey) \$10  Per claiming assument (\$100); INC (880)  3) FT: Follow-Through Survey (Resurvey) \$10  Per claiming assument INC Only (we [10 Jan 2000) Per claiming assument INC Only (we [10 Jan 2000) Per claiming assument INC Only (we [10 Jan 2000) Per claiming assument INC Only (we [10 Jan 2000) Per claiming assument INC Only (we [10 Jan 2000) Per Claiming assument INC Only (we [10 Jan	General Remarks:				1000	
Injury :	1) Apply for Transport Allowance (	) / Courtesy Car (	)			
Invoice Freparation Checklist			- t			
Invoice Preparation Checklist	3) Upload Resurvey Photo [Repair Cost		)			
Invoice Preparation Checklist	3) Upload Resurvey Photo [Repair Cost				CHERRICAL TO A SEC	-1., Kit., p
Invoice Preparation Checklist	3) Upload Resurvey Photo [Repair Cost:  Injury:				SE SOSTE	
Invoice Preparation Checklist	3) Upload Resurvey Photo [Repair Cost:  Injury:				Marios III	- , 49, p
Invoice Preparation Checklist	3) Upload Resurvey Photo [Repair Cost:  Injury:					101. 9
Invoice Preparation Checklist	3) Upload Resurvey Photo [Repair Cost: Injury:				Mark Calibration	
1) AR: Accident Reporting (\$30);   2) DA: Darrage Assessment (\$100); INC (\$80)   3) TF: Towing Fee	3) Upload Resurvey Photo [Repair Cost:  Injury:					
Inimant's Particulars:-   2 DA : Damage Assessment (\$100); INC (\$80)     3 TF : Towing Fee	3) Upload Resurvey Photo [Repair Cost:  Injury:  Date/Time Actions		Invoice Pre-	paration Checklist	ALC: The Court of the Court of the Court of the	And
A) FT : Follow-Through Survey   \$120	3) Upload Resurvey Photo [Repair Cost:  Injury:  Date/Time Actions			Reporting (530);	16.Bill	A 1000 6
Por claiming against INC Only (wef 10 Jan 2003)	3) Upload Resurvey Photo [Repair Cost:  Injury:  Date/Time Actions		1) AR : Accident 2) DA : Damage	Reporting (530); Assessment (\$100); INC (	146 B i i i i i i i i i i i i i i i i i i	Amu (
6) TR: Re-inspection 575 7) N1: Idao DA + SMRT Survey 5160 8) NTUC Additional Services:- OD* C Checked by (Engr-In-Charge): *N5: Courtesy Car / Tpt Allowance 55 *N6: Repair Co-ordination 510 *N6: Repair Inspection 525 *N7: Fost Repair Inspection 525 *N8: DV / Collect Excess Coordination 53 TP (N11): TP (N in INC) against INC 520	Oate/Time Actions  Actions  NA\No2095		1) AR : Accident 2) DA : Damage 3) TF : Towing F 4) FT : Follow-T	Reporting (530); Assessment (\$100); INC ( ce S hrough Survey	146 Bill ( 580) 40/545 \$120	A 100 00 00 00
S   NTUC Additional Services   OD*	3) Upload Resurvey Photo [Repair Cost:  Injury:  Date/Time Actions  NA\% 2095  Inimant's Particulars:- river/Owner:		1) AR: Accident 2) DA: Damage 3) TF: Towing F 4) FT: Follow-T 5) FT: Fullow-T	Reporting (530); Assessment (\$100); INC ( ee S hrough Survey hrough Survey (Resurvey)	\$80) 40/545 \$120 \$30	A 1000 6
C Checked by (Engr-In-Charge):  *N5: Courtesy Car / Tpt Allowance \$5  *N6: Repair Co-ordination \$10  *N7: Fost Repair Inspection \$25  *N8: DV / Collect Excess Coordination \$5  TP (N11): TP (N-in INC) against INC \$20	3) Upload Resurvey Photo [Repair Cost:  Injury:  Date/Time Actions  NA\No 2095  Inimant's Particulars:-  river/Owner:  ontact No:		1) AR : Accident 2) DA : Darrage 3) TF : Towing F 4) FT : Follow-T 5) FT : Follow-T For claiming a 6) TR : Re-inspe	Reporting (530); Assessment (5100); INC ( ce S through Survey through Survey (Resurvey) gainst INC Only (wef 10 Jan 20) ction	\$80) 40/\$45 \$120 \$30 05) \$75	A 1000 6
*N6: Repair Co-ordination 510  *N6: Repair Co-ordination 525  *N7: Fost Repair Inspection 525  *N8: DV / Collect Excess Coordination 53  TP (N11): TP (N1n INC) against INC 520	3) Upload Resurvey Photo [Repair Cost:  Injury:  Date/Time Actions  NA\No 2095  Inimant's Particulars:-  river/Owner:  ontact No:		1) AR : Accident 2) DA : Darrage 3) TF : Towing F 4) FT : Follow-T 5) FT : Follow-T For claiming a 6) TR : Re-inspec 7) N1 : Idao DA	Reporting (530); Assessment (5100); INC ( ce S through Survey through Survey (Resurvey) gainst INC Only (wef 10 Jan 20) ction + SMRT Survey	\$80) 40/\$45 \$120 \$30 05) \$75	A 100 00 00 00
unditors' Comments:-  *N7: Fost Repair Inspection \$2.5  *N8: DV / Collect Excess Coordination \$3  TP (N11): TP (N:n INC) against INC \$20	3) Upload Resurvey Photo [Repair Cost:  Injury:  Date/Time Actions  NA\%02095  Limant's Particulars:-  river/Owner:  ontact No:  hmaged Portion:		1) AR : Accident 2) DA : Darrage 3) TF : Towing F 4) FT : Follow-T 5) FT : Follow-T For claiming a 6) TR : Re-inspec 7) N1 : Idao DA 8) NTUC Addition	Reporting (530); Assessment (5100); INC ( ee S through Survey (Resurvey) gainst INC Only (wef 10 Jan 20) thion + SMRT Survey onal Services.	\$80) 40/\$45 \$120 \$30 \$55 \$560	A 100 00 00 00
TP (N11): TP (N:n INC) against INC \$20	3) Upload Resurvey Photo [Repair Cost:  Injury:  Date/Time Actions  NA\%02095  Limant's Particulars:-  river/Owner:  ontact No:  hmaged Portion:		1) AR : Accident 2) DA : Darrage 3) TF : Towing F 4) FT : Follow-T 5) FT : Follow-T For claiming a 6) TR : Re-insper 7) N1 : Idao DA 8) NTUC Addition	Reporting (\$30); Assessment (\$100); INC ( ee S through Survey (Resurvey) gainst INC Only (wef 10 Jan 20) tion + SMRT Survey onal Services Cer / Tpl Allowance	\$80) 40/\$45 \$120 \$30 \$55 \$160	A 100 00 00 00
1.1.	3) Upload Resurvey Photo [Repair Cost:  Injury:  Date/Time Actions  Na\%2095  Inimant's Particulars:- river/Owner: ontact No: amaged Portion:  C Checked by (Engr-In-Charge):		1) AR : Accident 2) DA : Darrage 3) TF : Towing F 4) FT : Follow-T 5) FT : Follow-T For claiming a 6) TR : Re-insper 7) N1 : Idae DA 8) NTUC Addition OD* *N5: Courtesy *N6: Repair C *N7: Fost Rep	Reporting (530); Assessment (5100); INC ( ee S through Survey (Resurvey) gainst INC Only (wef 10 Jan 20) etion + SMRT Survey enal Services Cer / Tpl Allowance to-ordination enir Inspection	\$80) 40/\$45 \$120 \$30 \$55 \$160 \$55 \$510 \$25	A 1000 6
9) N12: Idac Mobile 30 Invoice dated Fee Charged	3) Upload Resurvey Photo [Repair Cost:  Injury:  Date/Time Actions  NA\% 2095  Inimant's Particulars:-  river/Owner:  ontact No:  amaged Portion:  C Checked by (Engr-In-Charge):  uditors' Comments:-		1) AR : Accident 2) DA : Darrage 3) TF : Towing F 4) FT : Follow-T 5) FT : Follow-T For claiming a 6) TR : Re-insper 7) N1 : Idao DA 8) NTUC Addition OD* *N5: Courtesy *N6: Repair C *N7: Fost Rep *N8: DV / Co	Reporting (530); Assessment (5100); INC (100); INC (100	\$80) 40/\$45 \$120 \$30 \$51 \$160 \$53 \$160 \$25 \$55 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$50 \$5	A 1000 6

#### 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 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.

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

	ACCIDENT STATEMENT
Date Of Report	05/04/2018 10:20
Date Of Accident	04/04/2018 17:45
Exact Location Of Accident	ALONG CTE (AYE-TUAS) TWDS COLLEGE RD
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	FBE4909C
Insured/Policyholder	
Name Of Registered Owner	NURUL AQILAH BINTE ZULKIFLE
NRIC No	S9422838G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90077513
Alternative Phone No	OFFICE-90077513
Vehicle Particulars	
Manufacturer	PIAGGIO
Model	GILERA RUNNER ST 200
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	MOTORCYCLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5079520367-01
Cover Note Number	

-	-4		_	_
D	п	v	е	г

NURUL AQILAH BINTE ZULKIFLE Name of Driver

S9422838G NRIC No 29/06/1994 Date Of Birth INDOOR Occupation 13/06/2013 Date Of Driving Pass

4 YEARS AND 9 MONTHS **Driving Experience** 

FEMALE Gender

(LOCAL) +65-90077513 Mobile Number

Fax Number

OFFICE-90077513 Contact Number

NOEMAIL **EMail Address** 

**BLK 120A EDGEDALE PLAINS** Address #07-271

821120

NO

Was driver an employee of the Insured's Company

OWNER 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

COLLISION - MAJOR/MINOR RD Type Of Accident

CLEAR Weather Conditions DRY Road Surface

#### Other Information

Postcode

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident 2

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by ambulance?

NO

Was any other material or property damaged?

YES

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

NO

Number of Passengers (Including Driver)

1

#### **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

ON STATED DATE AND TIME, I WAS TRAVELLING ALONG LANE 2 CTE ABOUT TO ENTER SLIP RD COLLEGE RD. SUDDENLY VEHICLE B COMING OUT FROM SLIP RD OUTRAM RD TWDS CTE. IN A RESULT, VEHICLE B HIT ONTO MY VEHICLE LEFT PORTION.

### 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

SKU6310A

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

PRIVATE CAR

Name of Driver

PAH THOCK FONG

NRIC/Passport Number

S0014532G

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1** 

Name

NURUL AQILAH BINTE ZULKIFLE

Approximate Age

Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

LEG & ARM

FBE4909C

NO

#### 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
- 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.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

KETCH PLAN		
10.3	A: FBE 49 090	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
0 /	5: SKUGJIDA	
1 = /		
Jest L		
ESCRIBE CIRCUMSTANCES OF THE ACCIDENT		
Refer to statement.		
		_
	2	
DECLARATION		
I/We declare the foregoing particulars are true in every respect.		
Driver's Signature	Reporting Centre Personnel's Signatur	e

Policyholder's Signature

Oriver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

Z

# REPUBLIC OF SINGAPORE

IDENTITY CARD NO. \$9422838G





NURUL AQILAH BINTE ZULKIFLE

MALAY

Date of birth 29-06-1994 F Country of birth

SINGAPORE







IRIC No.S9422838G



Date of issue

07-04-2009

APT BLK 120A EDGEDALE PLAINS #07-271 SINGAPORE 821120

NRIC No: \$94228386

Date: 31/10/2016



Clear 3 Meter cars w< 3000 kg with m< 7 passengers, exclusive of the driver; and meter tractors/vehicles m< 2500 kg

REPUBLIC OF SINGAPORE

13 Jun 2013

EFFECTIVE DATE

DRIVING LICENCE

S9422838G

NURUL AQILAH BINTE

Der Das 29 Jun 1994 m Cluty 13 Jun 2013

20 May 2014

S / No. 9000190802

S9422838G

NP 428A

								Gene	ralClaim
601						Change Lan	guage '	Change Passwo	rd · Log Ou
Polic	cy Query								
Policy N	io.				Date of Ac	cident	04/04/2	2018 17:45	
Vehicle	No.(For Mator)	FBE4909C							
				1	Search				
Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
0	5079520367- 01	NURUL AQILAH BINTE ZULKIFLE	S9422838G	GMC	Third Party	FBE4909C	FBE4909C	16/04/2017	15/04/2018
	Policy N Vehicle	Policy Query  Policy No.  Vehicle No.(For Motor)  Select Policy No.  5079520367-	Policy Query  Policy No.  Vehicle No.(For Motor)  Select Policy No.  Policyholder Name  S079520367- NURUL AQILAH BINTE	Policy Query  Policy No.  Vehicle No.(For Motor)  Select Policy No.  Policyholder Naric Name NRIC  NURUL AQILAH BINTE S9422838G	Policy Query  Policy No.  Vehicle No.(For Motor)  Select Policy No.  Policyholder Name Name Name NRIC  S079520367- NURUL AQILAH BINTE S942283BG GMC	Policy Query  Policy No.  Vehicle No.(For Motor)  Select Policy No.  Policyholder Name NRIC  Solvent Type  NURUL AQILAH BINTE S9422838G GMC Third Party	Policy Query  Policy No.  Vehicle No.(For Motor)  Select Policy No.  Policyholder Name NRIC  Solution NRIC  Solution Name NRIC  Solution NRIC  Sol	Policy Query  Policy No.  Vehicle No.(For Motor)  Select Policy No.  Policyholder Nome NRIC  Name NRIC  Solution Product Cover Type Vehicle No.  Solution No.  Solution No.  No.  No.  No.  No.  No.  No.  Solution Product Cover Type No.  No.  No.  No.  No.  Solution Product Cover Type No.  No.  Solution Product Cover Type No.  Sol	Policy Query  Policy No. Vehicle No.(For Motor)  Select Policy No. Policyholder Name NRIC Product Cover Type Vehicle Insured Commence NRIC  Solvent Policy No. Name NRIC Product Cover Type Vehicle Insured Commence Name NRIC  Solvent Policyholder No. Object Date  No. Object Date

Sequen	ce Date of Endorsement	Endorse	ement Type Endors	sement Status	Endorsement Content
□ Endors	sements		The San San		A CONTRACTOR LOS AN INC. ATTACH
Insure	d Object: FBE4909C				
Unit No.	06-1333	Related Policy Number	5079520367-01		
Address 4	SINGAPORE 821120	Address Type	Singapore address	Post Code	821120
Address 1	BLK 120A #07-271	Address 2	EDGEDALE PLAINS	Address 3	PUNGGOL EDGE
Policyh	older Mailing Address				
Certificate Info					
Open Policy Info					
Co- nsurance Flag	No				
Agent	YANG YANLI	Agent Tel.	94506493	GST Flag	Υ
Outside Singapore OD Excess		Outside Singapore TP Excess			
Additional Excess		OS Premium	0		
Third Party Excess	0	Own damage Excess	0	Windscreen Excess	
Policy Ssue Date	05/04/2017	Effective Date	16/04/2017 00:00	Expiry Date	15/04/2018 23:59
Product Jame	MOTORCYCLE INSURANCE	Plan		Group Policy Flag	N
ddress	BLK 120A #07-271 EDGEDALE	PLAINS PUNGO	OL EDGE SINGAPORE 82112		
olicy No.	5079520367-01	Policyholder Name	NURUL AQILAH BINTE ZULK	INC	S9422838G

aim Handling								
cident MT/0989111								
lcy No.	5079520367-01	Vehide No.	FBE4909C		ST Registration No.			
cynolder Name	NURUL AQILAH BINTE ZULKIFLE				olicyholder NRIC		9422838G	
tuct Code	MOTORCYCLE INSURANCE	Cover Type	Third Party		oading	0		
	90077513	Contact No (Office)	0		Contact No.(Home)	0		
ell Address		Special Remark			Code	1	0.00	
	® No ○Yes	TCA	® No ○ Yes		Code Reason			
		NCD Entitlement(%)	10	p	Private Hire	N	0	
D Protection	ho	Web firmming of sal	1.55					
Accident Details					Accident Type	ಂ	ollision - Majo	Minor Road
port Date	05/04/2018 11:05	Accident Report Within 24 hrs	Yes				ingapore	
e of Accident	04/04/2018	Time of Accident hh:mm	17:45		Country of Accident	-	rigapore	
porting Centre		Orange Force		1	CM No.			
	AUDING CTE (AVE-TUAS) TWDS COLLEGE RD							
ident Location	Applied Circ (Archites) 1 (Archites)							
Benefits								
Excess					Windscreen Excess			
n damage Excess	0,00	Additional Excess			Windscreen Excess			
named Oriver Excess		Outside Singapore OD Excess						
nd Party Excess	0.00	Outside Singapore TP Excess						
GST Registered Informa	No.		GST R	egistration Date				
T Registered	0100.5			tatus Venfied	Yes			
T Registration No.								
dification History								
P Policyhelder Halling Ad	dress							
Idress t	BLK 120A #07-271	Address 2	EDGEDALE P	D-10-10	Address 3		PUNGGOL EDG	
idress 4	SINGAPORE 821120	Address Type	Singapore ad	dress	Post Code	3	821120	
NE NO.	06-1333	Related Policy Number	5079520367	-01				
	My same							
OI Driver Info	Control of the Contro	Driver Type	Main Driver					
iver Name	NURUL AQILAH BINTE ZULKIPLE	Onver NRIC	594228380		Driver DOB		29/05/1994	
mamed driver Name					Driving Expenence		4	
igister Date of Driver License	13/06/2013	Driver Age	23				0	
ortact No.(Mobile)	90077517	Contact No.(Office)	0		Contact No. (Home)			
odress 1	BLK 120A	Address 2	EDGEDALE P	LAINS	Address 3		PUNGGOL ED	-
	SINGAPORE 821120	Address Type	Singapore ad	tdress	Post Code		821120	
ddress 4		3.00						
nn No. ioes he own a Singapore	07-271							
		Onver vehicle No.			Driver Insurer Compa	any		
legistered car?	Yes ® No	Onver Vehicle No.			Briver Insurer Compo	any		
egistered car?	○ Yes (® No	Onver vehicle No.			Driver Insurer Compa	any		
egistered car? eclaration breathalyser or Blood Test	D mg	Onyer vehicle No.  Any injury?	® Yes ○ N		Driver Insurer Comp.	any		
tegistered car? Peclaration Breathlayser or Blood Test Reading?			® Yes ○N		Briver Insurer Comp	any		
egistered car? eclaration sreathelyser or Blood Test			® Yes ○No		Briver Insurer Comp	any		
epistered car? eclaration realthalyser or Blood Test eading?			® Yes ○N		Briver Insurer Compi	any		
egistered car?  eclaration  realthluser or Blood Test eading?  odification HISTORY			® Yes ○N		Briver Insurer Compi			
egistered car?  ectaration reathshister or Blood Test eoding?  oddication History  Claim 001 Next	0 mg		0.760.2-000		Briver Insurer Compi		\$94228385	
egistered car?  sciaration reathslyser or Blood Test esding?  claim 001 Next	0 mg	Any marry?	NURUL AQII	9			\$9422838G	
egistered car?  sciaration realthalyser or Blood Test esding?  Claim 001 Nex  laim Type *	0 mg	Any injury?  Insured Name Contact No.(Heme)	NURUL AQII	9	Insured NRIC		\$9422838G SKU6310A	
egistered car?  sciaration realthalyser or Blood Test esding?  Claim 001 Nex  laim Type *	0 mg    DD-MX   Y     90077913     NURUL AQILAH+B*GMAIL COM	Any marry?	NURUL AQII	9	Insured NAIC Contact No.(Office) TP Vehicle Number	100.00		
ectaration reatherser or Blood Test ectaration reatherser or Blood Test ectaration restherser or Blood Test ectaration restherser or Test restherser restherser restherser restherser restherser restherser restherser	0 mg	Any injury?  Insured Name Contact No.(Heme)	NURUL AQII NIL FBE4909C	O LAH BUNTE ZULKIFLA	Insured NRIC Contact No. (Office)	100.00		
epistered car?  eclaration reathslyser or Blood Test eoding?  Ctalm 001 Nex  Derm Type *  John Address  Jaim Description veferred Workshop Contact	0 mg    DD-MX   Y     90077913     NURUL AQILAH+B*GMAIL COM	Any injury?  Insured Name Contact No.(Heme)	NURUL AQII	O LAH BUNTE ZULKIFLA	Insured NAIC Contact No.(Office) TP Vehicle Number	100.00	SKUBJIOA	
egistered car?  eclaration realthalaser or Blood Test eoding?  Claim 001 Meet  Jern Type +  Jern Type +  Jernach No. (Moore) Jerly Address  Listin Description Verferred Workshop Contact Mo	0 mg    DO-MK   Y     90077513     MURULAQILAHH@GMAIL.COM     F884909C / SKUS310A DN 4 Apr 2018	Any injury?  Insured Name  Contact No.(Heme)  OI vehicle Number	NURUL AQII NIL FBE4909C	O LAH BUNTE ZULKIFLA	Insured NAIC Contact No.(Office) TP Vehicle Number	100.00	SKU6310A	
egistered car?  eclaration realthslaser or Blood Test eoding?  Ctaim 001 Mee  Type *  Centact No.(Moore) Impli Address  Usim Description Verformed Workshop Contact  No.(More) Reguer Emalication	0 mg    00-MX   Y     90077913     MURUL AQILAH+B-GMAIL COM     FBE4909C / SKUS310A DN 4 Apr 2018     Ves   Y	Any injury?  Insured Name Contact No.(Heme) OI vehicle Number  Insured Liability *	NURUL AQII NIL FBE4909C	CAH BUNYE ZULKIFLA	Insured NATC Contact No. (Office) TP Vehicle Number Name of Preferred W	100.00	SKUBJIOA	The second secon
ectaration reatherser or Blood Test ectaration reatherser or Blood Test ectaration restriction costnotion History  Claim 003 Nex  Test Type * formact No.(Moore) treatherse Workshop Contact to legure Finalisation take Registered	0 mg    DD-MX   Y     90077913     NURUL AQILAFH@GMAIL COM     PBL4909C / SKU8310A DN 4 Apr 2018     Ves   Y     05/04/2018 11:07	Any injury?  Insured Name Contact No. (Heme) OI velvice Number  Insured Liability * Preferenced Repair Option	NURUL AQII NIL FBE4909C	CAH BUNYE ZULKIFLA	Insured NATC Contact No.(Office) TP Venicle Number Name of Preferred 'A	100.00	SKU6310A	The second secon
egistered car?  eclaration realthalaser or Blood Test eoding?  Claim 001 Meet  Jern Type +  Jern Type +  Jernach No. (Moore) Jerly Address  Listin Description Verferred Workshop Contact Mo	0 mg    00-MX   Y     90077913     MURUL AQILAH+B-GMAIL COM     FBE4909C / SKUS310A DN 4 Apr 2018     Ves   Y	Any injury?  Insured Name Contact No. (Heme) OI velvice Number  Insured Liability * Preferenced Repair Option	NURUL AQII NIL FBE4909C	CAH BUNYE ZULKIFLA	Insured NATC Contact No.(Office) TP Venicle Number Name of Preferred 'A	100.00	SKU6310A	The second secon
egistered car?  ectaration reathalyser or Blood Test eoding?  Ctalin Ods Nex  Laim Type *  Comact No. (Modife) comal Address  Ligim Description referred Workshop Contact los  Loguer Enalisation  Loguer Enalisation	0 mg    DD-MX   Y     90077913     NURUL AQILAFH@GMAIL COM     PBL4909C / SKU8310A DN 4 Apr 2018     Ves   Y     05/04/2018 11:07	Any injury?  Insured Name Contact No. (Heme) OI velvice Number  Insured Liability * Preferenced Repair Option	NURUL AQII NIL FBE4909C Not at Fault Preferred W	T Vorkshop, Name unknown	Insured NATC Contact No.(Office) TP Venicle Number Name of Preferred 'A	100.00	SKU6310A	The second secon
ectaration reaths/ser or Blood Test ectaration reaths/ser or Blood Test ectaration restherance odification HISTORY  Claim 003 Nex  Tesm Type * formact No.(Hoose) omail Address Claim Description referred Workshop Contact to the open Finalisation case Registered tesport Taken By	0 mg    DD-MX   Y     90077913     NURUL AQILAFH@GMAIL COM     PBL4909C / SKU8310A DN 4 Apr 2018     Ves   Y     05/04/2018 11:07	Any injury?  Insured Name Contact No. (Heme) OI velvice Number  Insured Liability * Preferenced Repair Option	NURUL AQII NIL FBE4909C	T Vorkshop, Name unknown	Insured NATC Contact No.(Office) TP Venicle Number Name of Preferred 'A	100.00	SKU6310A	The second secon
ectaration reatherser or Blood Test ectaration reatherser or Blood Test ectaration restherser or Blood Test ectaration restherser or Blood Test ectaration restherser less Type + entact No. (Moore) mell Address lisin Description referred Workshop Contact lessyre Finalisation rate Registered lisport Teken By	0 mg    DD-MX   Y     90077913     NURUL AQILAFH@GMAIL COM     PBL4909C / SKU8310A DN 4 Apr 2018     Ves   Y     05/04/2018 11:07	Any injury?  Insured Name Contact No. (Heme) OI velvice Number  Insured Liability * Preferenced Repair Option	NURUL AQII NIL FBE4909C Not at Fault Preferred W	T Vorkshop, Name unknown	Insured NATC Contact No.(Office) TP Venicle Number Name of Preferred 'A	100.00	SKU6310A	The second secon
ctarguer car?  ctarguer or Blood Test resthalaser or Blood Test resting?  Ctaim 003 Nex  leim Type *  entact No.(Moore)  mell Address  laim Description referred Workshop Contact to.  coguire Finalisation also Registered  sport Taken By  Print AK letter  Attachment	0 mg    DD-MX   Y     90077913     NURUL AQILAFH@GMAIL COM     PBL4909C / SKU8310A DN 4 Apr 2018     Ves   Y     05/04/2018 11:07	Any injury?  Insured Name Contact No. (Heme) OI velvice Number  Insured Liability * Preferenced Repair Option	NURUL AQII NIL FBE4909C Not at Fault Preferred W	T Vorkshop, Name unknown	Insured NATC Contact No.(Office) TP Venicle Number Name of Preferred 'A	100.00	SKU6310A	The second secon
ectaration reatherser or Blood Test reatherser referred Workerser referred Registered report Taken By  Print AK letter  Attachment	D mg  DD-MX  S0077913  NURUL, AQILAH+@GMAIL COM  F88 4909C / SKU4310A DN 4 Apr 2018  Ves  Ves  D5/04/2018 13:07	Any injury?  Insured Name Contact No.(Hems) Of vehicle Number  Insured Liebility * Preferend Repair Option Claim Clase Date	NURUL AQII NIL FBE4909C Not at Fault Preferred W	LAM BUNTE ZULKIFLE	Insured NATC Contact No.(Office) TP Venicle Number Name of Preferred 'A	100.00	SKU6310A	The second secon
ectaration reatherser or Blood Test reatherser referred Workerser referred Registered report Taken By  Print AK letter  Attachment	D mg  DD-MX  S0077513  NURUL, AQLAH+IPGMAIL COM  F88 4909C / SKU4310A DN 4 Apr 2018  Ves  Ves  D5/04/2018 13:07  Jackson  MT/D988111	Any injury?  Insured Name Contact No.(Hems) Of vehicle Number  Insured Liability * Preferend Repair Option Claim Clase Data	NURUL AQII NIL FBE4909C Not at Fault Preferred W	TAM BINTE ZULKIFLE  I Varicinap, Name unknown V	Insured NATC Contact No.(Office) TP Venicle Number Name of Preferred 'A	100.00	SKU6310A	The second secon
ectaration reaths/ser or Blood Test reaths/ser or Blood reaths/ser or B	D mg  DD-MX  S0077913  NURUL, AQILAH+@GMAIL COM  F88 4909C / SKU4310A DN 4 Apr 2018  Ves  Ves  D5/04/2018 13:07	Any injury?  Insured Name Contact No.(Hems) Of vehicle Number  Insured Liebility * Preferend Repair Option Claim Clase Date	NURUL AQII NIL FBE4909C Not at Fault Preferred W	LAM BUNTE ZULKIFLE	Insured NATC Contact No. (Office) TP Vehicle Number Name of Preferred W GSA report Date Received	Workshap	SKU6310A  Received 05/04/2018	00.00
ectaration reaths/ser or Blood Test reaths/ser or Blood reaths/ser or B	D mg  DD-MX  S0077513  NURUL, AQLAH+IPGMAIL COM  F88 4909C / SKU4310A DN 4 Apr 2018  Ves  Ves  D5/04/2018 13:07  Jackson  MT/D988111	Any injury?  Insured Name Contact No.(Hems) Of vehicle Number  Insured Liability * Preferend Repair Option Claim Clase Data	NURUL AQII NIL FBE4909C Not at Fault Preferred W	TAM BINTE ZULKIFLE  Vorkshop, Name unknown  O01  O5/04/2018 11:08  Category *	Insured NRIC Contact No. (Office) TP vehicle Number Name of Preferred W GSA report Data Received  Confidencial	Workshap	Received 05/04/2018	The second secon
ctarguer car?  ctarguer or Blood Test resthalaser or Blood Test resting?  Ctaim 003 Nex  leim Type *  ernact No.(Moore)  mell Address  laim Description referred Workshop Contact to.  egyler Finalisation also Registered  sport Taken By  Print AK letter  Attachment	D mg  DD-MX  S0077913  NURUL, AQILAH+@GMAIL COM  F88 4909C / SKU4310A DN 4 Apr 2018  Ves  O5/04/2018 13:07  Jackson  MT/D989111  © Yes © No	Any injury?  Insured Name Contact No.(Hems) Of vehicle Number  Insured Liability * Preferend Repair Option Claim Clase Data	NURUL AQII NIL FBE4909C  Not at Fault Proferred W	TOTO OSYON/2018 11:08 Category *	Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred W GSA report Data Raceived  Confidential	Workshap	Received 05/04/2018	00.00
claration eathers or Blood Test eathers or Blood eathers e	D mg  DD-MX  S0077913  NURUL, AQILAH+@GMAIL COM  F88 4909C / SKU4310A DN 4 Apr 2018  Ves  O5/04/2018 13:07  Jackson  MT/D989111  © Yes © No	Any injury?  Insured Name Contact No.(Herns) Of vehicle Number  Insured Liability * Preferend Repair Option Claim Clase Date  Claim No Upload Date  Brow	NURUL AQII NIL FBE4909C  Not at Fault Preferred M  Save Subi	TAM BINTE ZULKIFLE  IVANICINAD, Name unknown  OOI  OS/O4/2018 11:08  Category *  Please Select	Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred W GSA report Data Raceived  Confidential	Workshap	Received 05/04/2018	00 CO 📑
claration eathelyser or Blood Test adding?  Claim 003 Nex  with Type + with Address laim Description referred Workshop Contact 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0,	D mg  DD-MX  S0077913  NURUL, AQILAH+@GMAIL COM  F88 4909C / SKU4310A DN 4 Apr 2018  Ves  O5/04/2018 13:07  Jackson  MT/D989111  © Yes © No	Any injury?  Insured Name Contact No.(Herns) Of vehicle Number  Insured Leability * Preferend Repair Option Claim Clase Date  Claim No Upload Date  Brow	NURUL AQII NIL FBE4909C  Not at Fault Preferred M  Save Subi	TAM BINTE ZULKIFLE  Vorkshap, Name unknown  O01  05/04/2018 11:08  Category *  Please Select	Confidencial  Confidencial  Confidencial  Confidencial	Vorkshap Lingenc Normal	Received 05/04/2018	00 CC 📑
claration eathelyser or Blood Test adding?  Claim 003 Nex  with Type + with Address laim Description referred Workshop Contact 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0,	D mg  DD-MX  S0077913  NURUL, AQILAH+@GMAIL COM  F88 4909C / SKU4310A DN 4 Apr 2018  Ves  O5/04/2018 13:07  Jackson  MT/D989111  © Yes © No	Any injury?  Insured Name Contact No.(Herns) Of vehicle Number  Insured Liability * Preferend Repair Option Claim Clase Date  Claim No Upload Date  Brow	NURUL AQII NIL FBE4909C  Not at Fault Preferred M  Save Subi	TAM BINTE ZULKIFLE  Vorkshap, Name unknown  O01  05/04/2018 11:08  Category *  Please Select  Please Select	Confidential  Confidential  Confidential  Local Page 10 Page 1	Vorkshap  Urgenc  Normal  Normal	Received 05/04/2018	00 CO 📑
ctarguer car?  ctarguer or Blood Test resthalaser or Blood Test resting?  Ctaim 003 Nex  leim Type *  ernact No.(Moore)  mell Address  laim Description referred Workshop Contact to.  egyler Finalisation also Registered  sport Taken By  Print AK letter  Attachment	D mg  DD-MX  S0077913  NURUL, AQILAH+@GMAIL COM  F88 4909C / SKU4310A DN 4 Apr 2018  Ves  O5/04/2018 13:07  Jackson  MT/D989111  © Yes © No	Any injury?  Insured Name Contact No.(Herns) Of vehicle Number  Insured Leability * Preferend Repair Option Claim Clase Date  Claim No Upload Date  Brow	NURUL AQII NIL FBE4909C  Not at Fault Preferred M  Save Subi	TOTAL SENTE ZULKIFLE  Vorkshop, Name unknown  OS/O4/2018 11:08  Category *  Please Select  Please Select  Please Select	Confidential  Confidential  Confidential  Confidential  No V  NO V	Urgenc Normal Normal Normal	Received 05/04/2018	00.00
egistered car?  scientian reathsisser or Blood Test eoding?  ctains 003 Nex  test Type *  terract No. (Moore) mell Address Usin Description veferred Workshop Contact to.  test Registered tesport Telan By  Attachment  Attachment	D mg  DD-MX  S0077913  NURUL, AQILAH+@GMAIL COM  F88 4909C / SKU4310A DN 4 Apr 2018  Ves  O5/04/2018 13:07  Jackson  MT/D989111  © Yes © No	Insured Name Contact No.(Herns) Of vehicle Number  Insured Leakity * Preferend Repair Option Claim Clase Date  Claim No. Upload Date  Brow Brow	NURUL AQII NIL FBE4909C  Not at Fault Preferred W  Save Sub	TOTAL SENTE ZULKIFLE  Vorkshop, Name unknown  OS/O4/2018 11:08  Category *  Please Select  Please Select  Please Select	Confidential  Confidential  Confidential  Confidential  No V  NO V	Vorkshap  Urgenc  Normal  Normal	Received 05/04/2018	00.00
egistered car?  sciardian reaths/sser or Blood Test eoding?  ctains 003 Nex  test Type +  terract No. (Moore) imal Address Usin Description veferred Workshop Contact to.  test Registered tesport Teken By  Print AK Letter	D mg  DD-MX  S0077913  NURUL, AQILAH+@GMAIL COM  F88 4909C / SKU4310A DN 4 Apr 2018  Ves  O5/04/2018 13:07  Jackson  MT/D989111  © Yes © No	Insured Name Contact No.(Herns) Of vehicle Number  Insured Liebility * Preferend Repair Option Claim Clase Date  Claim No. Upload Date  Brow Brow	NURUL AQII NIL FBE4909C  Not at Fault Preferred W  Save Subt  Save Subt  Save Cear Se Cear	TOTAL SPINITE ZULKIFLE  TOTAL STATE TO	Confidential  Confidential  Confidential  Confidential  Confidential  Confidential  Confidential	Urgenc Normal Normal Normal	Received 05/04/2018	00.00

	uploaded By/Date	Folder Date	file Name		9	Source	Action
Video List					V-2-2-2		
T	NAC_PAYA_UBI_800601( N	ATIONAL ASSESSMENT CENTRE SERVICES) on 05 Ap r 2018 11:07	Photos		Normal	Photos 2018-4-5	
*	NAC_PAVA_US1_800601( N	AT(ONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 11:07	Photos		Normal	Photois 2018-4-5	
	NAC_PAYA_UB3_BD0601( No	ATTONAL ASSESSMENT CENTRE SERVICES) on 05 Ap c 2018 11/07	Photos		Normal	Photos 2018-4-5	ı
	NAC_PAYA_UBI_800501( N	ATIONAL ASSESSMENT CENTRE SERVICES) on 05 Ap 7 2018 11:07	Photos		Normal	Photos 2018-4-5	98
-	NAC_PAYA_UBI_800501( NA	ATIONAL ASSESSMENT CENTRE SERVICES) on 05 Ap + 2018 11:07	Photos		Normal	Photos 2018-4-5	
7	NAC_PWYA_UB1_B00603( NA	ATTONAL ASSESSMENT CENTRE SERVICES) on D5 Ap + 2018 11:07	Photos		Normal	Photos 2018-4-5	
3	NAC_PAYA_UBI_800601( NA	ITIONAL ASSESSMENT CENTRE SERVICES) on 05 Ap r 2018 11:07	Photoe		Normal	Pnotos 2018-4-5	E
*	NAC_PAYA_UBI_800501( NA	TIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 7 2018 11:07	Priotos		Normal	Protos 2018-4-5	E
清	NAC_PAYA_UBI_800601( NA	TIONAL ASSESSMENT CENTRE SERVICES) on DE Ap. + 2018 11:07	Photos		Normal	Photos 2018-4-5	E
<b>N</b>	NAC_PAYA_UBI_8006Qt[ NA	TIONAL ASSESSMENT CENTRE SERVICES) on 05 Ap 7 2018 11:07	Photos		Normal	Photos 2018-4-5	£
1	NAC_PAYA_UBI_800601( NA	TIONAL ASSESSMENT CENTRE SERVICES) on 05 Ap + 2018 11:07	Photos		Normal	Photos 2018-4-5	R:
1	NAC_PAYA_UB1_800601( NA	TIONAL ASSESSMENT CENTRE SERVICES) on 05 Ap + 2018 11:07	Photos		Normai	Photos 2018-4-5	Es
8	NAC_PAYA_USI_B00601( NA	TIONAL ARRESSMENT CENTRE SERVICES) on 05 Ap r 2018 31:08	Photos		Normal	Photos 2018-4-5	Es
7	NAC_PAYA_UBI_800601( NA	TIONAL ASSESSMENT CENTRE SERVICES) on 05 Ap r 2018 11:08	Photos		Normal	Phones 2018-4-5	Es
5	NAC_PRYA_UBI_800601( NA	FIONAL ASSESSMENT CENTRE SERVICES; on 05 Ap. r 2016 11:06	Photos		Normal	Photos 3019-4-5	Ed
1	NAC_PAYA_UBJ_800603( NA	TIDNAL ASSESSMENT CENTRE SERVICES) on 05 Ap r 2018 11:08	Photos		Normal	Photos 2018-4-5	Ed
1	NAC_PAYA_UBI_B00601[ NA	TIONAL ASSESSMENT CENTRE SERVICES) on 05 Ap / 2018 11:08	Photos		Normal	Protos 2018-4-5	Ed
斯	NAC_PAYA_UBI_800601( NAT	FIONAL ASSESSMENT CENTRE SERVICES) on 05 Ad r 2018 11:08	Photos		Normal	Photos 2018-4-5	Ed
99	NAC_PAYA_URI_RDD0011( NAT	TIONAL ASSESSMENT CENTRE SERVICES) on 05 Ap + 2018 11:08	SAS		Normal	SAS 2018-4-5	Ed
e 17	NAC_PAYA_UBI_800601[ NAT	TIONAL ASSESSMENT CENTRE SERVICES) on 05 Ap + 2018 11:08	NRJC/ Driving License		Normal	NR3C/ Driving License 2018-4-5	Ed
ttachment.		Uploaded By/Date	Category	?	Urgency	Description	Seni? Acti (00)

Display in New Window Scan and uploading