

NATIONAL Assessment Centre Services: [wef 1 Jan 2005] MNA118045373

Date In: 5/4/18-12:11	Job description	Date & Time Completed	Done by
Ref No: NA/INC18006261/24	SAS e-filing		
Veh No: FBFB110X	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 28/3/18 - 05:50	i-Motor Claim Form	MT/0959131	5/4/18 12:43
OD / TP: Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: JRD6405	INC () / Non-INC ()
Owner / Driver: (Tel:	
Policy No: ()	Period: ()	Cover Type: ()
Confirmed by: (Date:	Time:
Insured/Driver Liability: ()	[Note-Est. Status (WO): N: 0-20%; P: 21-79% P: 80-100%]	
Year of Registration: ()	Warranty: YES () / NO ()	
Excess: (\$)	Loading: \$1,000 () / \$2,000 ()	

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)	Date & Time Completed	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

NA1802101	Invoice Preparation Checklist	Amt (\$) Inc Bill	Amt (\$) Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	QD:		
QC Checked by (Engr-In-Charge):	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
Auditors' Comments:-	*N8: DV / Collect Excess Coordination \$5		
Dat. 1:	TP (N11): TP (Non INC) against INC \$20		
Dat. 2 / 3:	9) N12: Idac Mobile 30		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

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 withholding 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.

ACCIDENT STATEMENT

Date Of Report	05/04/2018 12:11
Date Of Accident	28/03/2018 08:50
Exact Location Of Accident	ALONG SLE AFTER WOODLANDS AVE 12 EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBF6110X
Insured/Policyholder	
Name Of Registered Owner	ISNADY BIN NASIR
NRIC No	S8434805H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90092154
Alternative Phone No	OFFICE-90092154

Vehicle Particulars

Manufacturer	HONDA
Model	CB400 M
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	REPORTING ONLY
Vehicle Category	MOTORCYCLE

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	5051524545-06
Cover Note Number	

Driver

Name of Driver	ISNADY BIN NASIR
NRIC No	S8434805H
Date Of Birth	23/10/1984
Occupation	INDOOR
Date Of Driving Pass	17/10/2006
Driving Experience	11 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90092154
Fax Number	
Contact Number	OFFICE-90092154
Email Address	NOEMAIL

Address	BLK 649 HOUGANG AVENUE 8 #08-341
Postcode	530649
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JRD6405 (PRIVATE CAR)
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20180328/7023.

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	JRD6405
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

1

DETAILS OF INJURED PERSON 1

Name ISNADY BIN NASIR

Approximate Age

Injuries Sustain BODY

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

SKETCH PLAN

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 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.
5. **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:

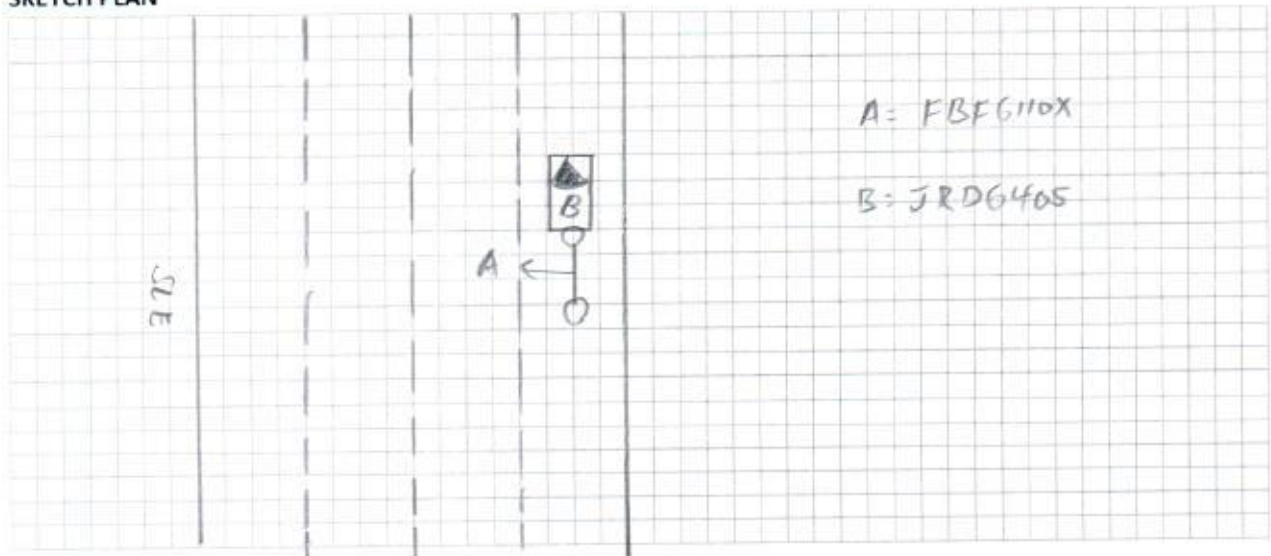
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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) 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:
 - (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.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - T/20180328/7023.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

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.:



SINGAPORE POLICE FORCE



T/20180328/7023

1 of 3

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20180328/7023

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/03/2018 21:58		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: ISNADY BIN NASIR			Address: APT BLK 649 HOUGANG AVENUE 8 #08-341 SINGAPORE 530649		
ID Type / ID No.: NRIC NO / S8434805H			Contact No.: Home/Office: Mobile: 90092154		
Nationality: SINGAPORE CITIZEN			Email: isnady84@gmail.com		
Sex: Male	Age: 33	Date of Birth: 23/10/1984	Type of Informant: Rider		
Race: Javanese			Language: English		Institution / School Name:
Occupation: Customs/Immigration officer			Driving Licence Information: Class: 2B,2A Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 28/03/2018 08:50	Type of Location: Straight Road
Location:				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 90 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBF6110X	Motorcycle	HONDA	CB400SF	White	Slightly Damaged	0
JRD6405	Car	KIA	Cerato	White	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBF6110X	NTUC Income Insurance Co-Operative Limited	5051524545-06	16/09/2017	15/09/2018



SINGAPORE POLICE FORCE



T/20180328/7023

2 of 3

Report No. T/20180328/7023

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	Kanaga	ID No.	941025016100
Related Vehicle	FBF6110X (Motorcycle)	Contact No.	+60106606518
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Rider			
Name	ISNADY BIN NASIR	ID No.	S8434805H
Related Vehicle	FBF6110X (Motorcycle)	Contact No.	90092154
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A Date of Expiry: NIL
Date Treatment	28/03/2018	Date Discharge	28/03/2018
No. of Days granted Medical Leave	07	Degree of Injury	Slight

Brief Details.

On 28 march 2018 at about 0850hrs, i was travelling at first lane at SLE towards CTE after Woodlands Ave 12. I noticed a MYS bike whose box was opened and i try to warned the Malaysia motorist. But after i face to the front, i was to near to the Malaysia White Car, JRD6405. I tried to brake but unfortunately, i fishtailed my bike and hit on to the rear of the car and fell on the right side of the bike. I had few abrasion on the right side and feel weird on my toe. Got to know i got dislocated at my right big toe after Xray. Back to the story, I try to relax myself and went to the side of the railing at 1st lane and call the ambulance. While waiting for the ambulance to reach, we exchange particular. Some driver came by try to "so called" help me and the other party involved. And there is this guy from the opposite side of the road came to assist the other party and i do not see his vehicle park at the road shoulder at all. Upon the ambulance, they came to aid me and the convey me to Khoo Teck Phuat Hospital. While im inside the ambulance still at the scene, the driver ambulance told me that the Malaysia White Car left the scene where the opposite party need to wait for the traffic police. I straight away dialed 999 for assistance. I was given 7days MC from KTPH. That all the incident happen on the accident.



**SINGAPORE
POLICE FORCE**



T/20180328/7023

3 of 3

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20180328/7023

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
YEO CHUN JIAN
Contact No.: 65476213

Authentication Stamp

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
28/03/2018 21:58

Classification Of Case:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8434805H



Name

ISNADY BIN NASIR

اشنادي بن ناصير

Race

JAVANESE

Date of birth

23-10-1984

Sex

M

S8434805H

Country/Place of birth

SINGAPORE



5470344



NRIC No. S8434805H



Date of issue

18-05-2015

Address


APT BLK 649 HOUGANG AVENUE 8
#08-341
SINGAPORE 530649

REPUBLIC OF SINGAPORE DRIVING

Licence Number: **S8434805H**
Name: **ISNADY BIN NASIR**

Birth Date: **23 Oct 1984**
Issue Date: **12 May 2005**

001341569C



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

	PASS DATE
Class 2B Motorcycles <= 200 CC	12 May 2005
Class 2A Motorcycles between 201 CC and 400 CC	17 Oct 2006

S8434805H S / No. 9000053182

NP 428A

Licence No: S8434805H

eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.

Date of Accident

Vehicle No.(For Motor)

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5051524545-06	ISNADY BIN NASIR	S8434805H	GMC	Third Party, Fire & Theft	FBF6110X	FBF6110X	16/09/2017	15/09/2018

▼ Policy Information

Policy No.	5051524545-06	Policyholder Name	ISNADY BIN NASIR	Policyholder NRIC	S8434805H
Address	BLK 649 #08-341 HOUGANG AVENUE 8 SINGAPORE 530649				
Product Name	MOTORCYCLE INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	24/08/2017	Effective Date	16/09/2017 00:00	Expiry Date	15/09/2018 23:59
Third Party Excess	0.0	Own damage Excess	0.0	Windscreen Excess	
Additional Excess		OS Premium	0		
Outside Singapore OD Excess		Outside Singapore TP Excess			
Agent	WTT INSURANCE AGENCIES PTI	Agent Tel.	62965445	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	BLK 649 #08-341	Address 2	HOUGANG AVENUE 8	Address 3	SINGAPORE 530649
Address 4		Address Type	Singapore address	Post Code	530649
Unit No.		Related Policy Number	5051524545-06		

► Insured Object: FBF6110X

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
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Continue

Cancel

Claim Handling

Exit

Accident MT/0909131

Policy No.	S051524545-06	Vehicle No.	FRF6110X	GST Registration No.	
Policyholder Name	ISNADY BIN NASIR	Cover Type	Third Party, Fire & Theft	Policyholder NRIC	S8434025H
Product Code	MOTORCYCLE INSURANCE	Contact No.(Office)	0	Loading	0
Contact No.(Mobile)	90092154	Special Remark		Contact No.(Home)	0
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	<input type="text" value="1-1"/>
KPK	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	20	eCode Reason	
NCD Protection	No			Private Hire	No

Report Date:	05/04/2018 12:41	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	28/03/2018	Time of Accident hh:mm	08:50	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG SLE AFTER WOODLANDS AVE 12 EXIT				

Own damage Excess	0.00	Additional Excess		Windscreen Excess	
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	BLK 549 #08-341	Address 2	HOUGANG AVENUE 8	Address 3	SINGAPORE 530649
Address 4		Address Type	Singapore address	Post Code	530649
Unit No.		Related Policy Number	S051524545-06		

Driver Name	ISNADY BIN NASIR	Driver Type	Main Driver	Driver DOR	23/10/1984
Unnamed driver Name		Driver NRIC	S8434025H	Driving Experience	11
Register Date of Driver License	17/10/2006	Driver Age	33	Contact No.(Home)	0
Contact No.(Mobile)	90092154	Contact No.(Office)	0	Address 3	SINGAPORE 530649
Address 1	BLK 649	Address 2	HOUGANG AVENUE 8	Post Code	530649
Address 4		Address Type	Singapore address		
Unit No.	08-341				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	ISNADY BIN NASIR	Insured NRIC	S8434025H
Contact No.(Mobile)	90092154	Contact No.(Home)		Contact No.(Office)	
Email Address	ISNADYB4@GMAIL.COM	OT Vehicle Number	FRF6110X	TP Vehicle Number	JRD6405
Claim Description	FRF6110X / JRD6405 ON 28 Mar 2018				
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	05/04/2018 12:43	Claim Close Date		Date Received	05/04/2018 00:00
Report Taken By	Jackson				

☒ Print AK Letter

Attachment

Accident No.	MT/0909131	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	05/04/2018 12:45

Path *	Category *	Confidential	Urgency *	Description *
<input type="button" value="Browse..."/> <input type="button" value="Clear"/>	Please Select	<input type="button" value="NO"/>	Normal	
<input type="button" value="Browse..."/> <input type="button" value="Clear"/>	Please Select	<input type="button" value="NO"/>	Normal	
<input type="button" value="Browse..."/> <input type="button" value="Clear"/>	Please Select	<input type="button" value="NO"/>	Normal	
<input type="button" value="Browse..."/> <input type="button" value="Clear"/>	Please Select	<input type="button" value="NO"/>	Normal	
<input type="button" value="Browse..."/> <input type="button" value="Clear"/>	Please Select	<input type="button" value="NO"/>	Normal	
<input type="button" value="Browse..."/> <input type="button" value="Clear"/>	Please Select	<input type="button" value="NO"/>	Normal	

Attachment	Uploaded By/Date	Category	Priority	Urgency	Description	Msg Sent? (CO)	Action
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:45	NRIC/ Driving License		Normal	NRIC/ Driving License 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:45	NRIC/ Driving License		Normal	NRIC/ Driving License 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:45	SAS		Normal	SAS 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:44	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:44	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:44	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:44	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:44	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:44	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:44	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:44	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:44	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:44	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:44	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:44	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:44	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:43	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:43	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:43	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:43	Photos		Normal	Photos 2018-4-5		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 05 Apr 2018 12:43	Photos		Normal	Photos 2018-4-5		Edit

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
		Display in New Window	Scan and uploading	