

# NATIONAL Assessment Centre Services

[wef: 1 Jan 2018]

Date In: 07/04/2018 09:58	Job description	Date & Time Completed	Done by
Ref No: NA/INC18006426/24	SAS e-filing		
Veh No: 3JJ674J	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 04/04/2018 20:50	i-Motor Claim Form	MT/0989862	11/4/18 10:00
OD: TP Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
	Assessment/Survey Report		
TP Insurer:	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: SKM86694	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%; F: 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:-	Date & Time Completed	Done by
(INC hotline: 6788 6616)		
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

Injury: \_\_\_\_\_

Date/Time	Actions
11/4/18 1000	E-Boo cannot open when type Vehicle Number but when type Policy No can open E-Boo. Pls take note?

NA1802234	<b>Invoice Preparation Checklist</b>	Amt (\$)	Amt (\$)
		1st Bill	Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$50)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
	5) PT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2018)		
QC Checked by (Engr-In-Charge):	6) TR: Re-inspection \$75		
	7) N1: Idac DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
	ON*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (Non INC) against INC \$20		
	9) N12: Idac Mobile 30		
Auditors' Comments:-	Invoice dated	Fee Charged	
Cat. 1:	Invoice dated	Fee Charged	
Cat. 2 / 3:			



## 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	07/04/2018 09:58
Date Of Accident	04/04/2018 20:50
Exact Location Of Accident	HOUGANG AVE 3 TWDS UBI
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJJ674J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	235 MOTOR TRADING
Co Reg No	53150102K
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90660111
Alternative Phone No	OFFICE-90660111

### Vehicle Particulars

Manufacturer	NISSAN
Model	PRESAGE 2.5 HIGHWAY STAR 4AT
Exact Purpose for which vehicle was being used at time of accident	WORK
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	PRIVATE CAR

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5064407964-04
Cover Note Number	

### Driver

Name of Driver	YAM WENG FEI (REN RONGHUI )
NRIC No	S7237457F
Date Of Birth	08/10/1972
Occupation	INDOOR
Date Of Driving Pass	06/10/1994
Driving Experience	23 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90660111
Fax Number	
Contact Number	OTHERS-90660111
Email Address	NOEMAIL

Address	BLK 46 LORONG 5 TOA PAYOH #11-93
Postcode	310046
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - WORK
Vehicle Registration Number of Driver's Own Vehicle	-
Insurance Company of Driver's Own Vehicle	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
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

PLS REFER TO THE ATTACHED 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 Witness 1

Name	MR LIM YONG CHUAN
Phone Number	91810809
Email Address	

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKM8669U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ER SOO SIAN
NRIC/Passport Number	S1548900F
Contact Number	96585176
Address	
Postcode	
Insurance Company Name	

Nature Of Damage  
No. Of Passenger (Including Driver)



## 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.

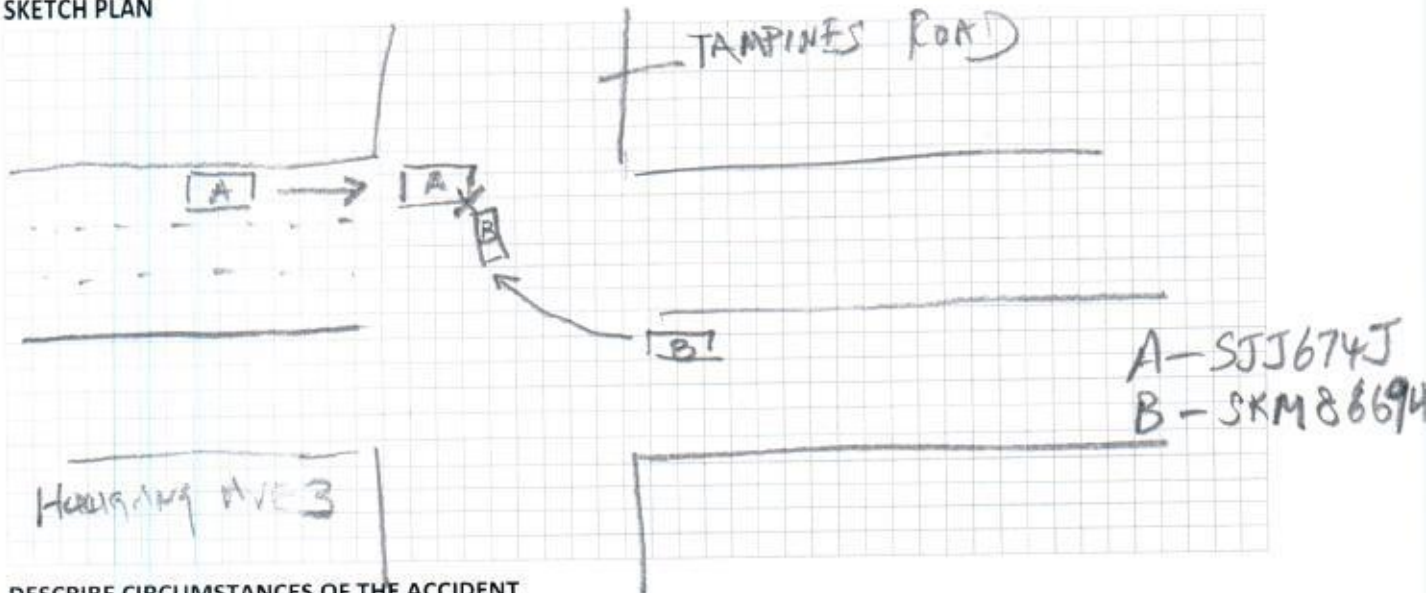


Policyholder's Signature  
\*Date & Time:

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

On 4<sup>TH</sup> APR, 2050HRS, I was driving straight on Heang Ave 3 towards UBI. Traffic was light, no rain and traffic light was green in my favor.

Vehicle B turned right without consideration and hit my vehicle. I attempted to brake but not in time as I do not expect (straight road, green light) any vehicle to negotiate a right turn from opposite direction.

Vehicle B driver admitted his fault and signed on the letter indicating his mistake.

He had wanted to settle privately. However, he called me the following day to change his mind to settle via insurance.

I have a witness who is driving a van (GBH2032) behind me (Mr Lim Yong Chuan) 91810809

## DECLARATION

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.:


7/4/2018



(19)  
I, ER SOO SIAN, S1548900F driver of  
SKM8669U admitted I knock on  
vehicle SJJ674J while negotiating  
a right turn when the on-coming traffic  
is in green.

I ER SOO SIAN, S1548900F admitted  
that I am at fault and is willing  
to compensate the repair cost  
of the vehicle SJJ674J incurred.  
There are no personal injury by both  
parties.

  
Ernest Eo  
ER SOO SIAN  
S1548900F  
96585176

  
YAM WENG FUI  
S7237487E  
90660111

**LIST OF AUTHORISED DRIVER(S) ATTACHING TO POLICY NUMBER: 5064407964-04**

No.	Name	ID Number	Driver's Licence Reg. Date
1	HAN EU ING	S****757Z	07 Sep 1998
2	YAM WENG FEI	S****457F	06 Oct 1994

**Total number of authorised driver(s): 2**



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7237457F



Name

YAM WENG FEI  
(REN RONGHUI)

任 榮 輝

Race

CHINESE

Date of birth

08-10-1972

Sex

M

S7237457F

Country of birth

SINGAPORE

4874663



NRIC No. S7237457F

Date of issue

23-08-2012

Address

APT BLK 46 LORONG 5 TOA PAYOH  
#11-93  
SINGAPORE 310046

REPUBLIC OF SINGAPORE

DRIVING LICENCE



Licence Number:

S 7237457F

Name:

YAM WENG-FEI  
(REN RONGHUI)

Birth Date: 08 Oct 1972

Issue Date: 14 Oct 2003



PERMITTED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES):

PASS DATE

Class 3

Motor Cars and Motor Tractors the weight of  
which unladen does not exceed 2500 kilograms

06 Oct 1994

NP 428A



Licence No: S7237457F



## Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

**Certificate Number** : 5064407964-04

**Cover** : Third Party

1. Index mark and Registration Number of Vehicle

: N/A

Any Motor Vehicle the property of the Policyholder or in their custody or control. All steam-driven vehicles are excluded.

2. Name of Policyholder

: 235 MOTOR TRADING

3. Effective Date of Insurance

: 22 Mar 2018

4. Expiry Date of Insurance

: 21 Mar 2019

5. Persons or Classes of Persons entitled to drive\*

Refer to List Attached

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to Use\*

(a) Use only for Motor Trade purposes.

**This Policy does not cover**

(a) Use for hire or reward.

(b) Use for racing, pace-making, reliability trial or speed-testing.

(c) Use solely for 'Breakdown' purposes is not deemed to be use for hire or reward.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third- Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

POLICY TYPE : MOTOR-TRADE INSURANCE

TYPE OF TRADE/BUSINESS : CAR DEALERS

TOTAL NUMBER OF AUTHORISED DRIVER(S) : 2

DETAILS OF AUTHORISED DRIVER(S) : REFER TO LIST ATTACHED

EXCESS (SECTION I) : N/A

EXCESS (SECTION II) : N/A

SUM INSURED : N/A

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : KINETIC INSURANCE AGENCY (00000573090)

Date of Issue : 22 Mar 2018 14:59 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive

Hello, NAC\_PAYA\_UBI\_800601

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

## Policy Query

Policy No.	<input type="text" value="5064407964-04"/>	Date of Accident	<input type="text" value="04/04/2018 20:50"/>						
Vehicle No.(For Motor)	<input type="text"/>								
<input type="button" value="Search"/>									
Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5064407964-04	235 MOTOR TRADING	53150102K	GMT	Third Party		HAN EU ING/S7501757Z_YAM WENG FEI/S7237457F	22/03/2018	21/03/2019
				<input type="button" value="Continue"/>					



▼ Policy Information

Policy No.	5064407964-04	Policyholder Name	235 MOTOR TRADING	Policyholder NRIC	53150102K
Address	201 HENDERSON ROAD #06-23 APEX @ HENDERSON SINGAPORE 159545				
Product Name	MOTOR TRADE INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	22/03/2018	Effective Date	22/03/2018 00:00	Expiry Date	21/03/2019 23:59
Third Party Excess	0.0	Own damage Excess	0	Windscreen Excess	
Additional Excess		OS Premium	0		
Outside Singapore OD Excess		Outside Singapore TP Excess			
Agent	KINETIC INSURANCE AGENCY	Agent Tel.	66946128	GST Flag	Y
Co-Insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	201 HENDERSON ROAD	Address 2	#06-23 APEX @ HENDERSON	Address 3	SINGAPORE 159545
Address 4		Address Type	Singapore address	Post Code	159545
Unit No.		Related Policy Number	5064407964-04		

▶ Insured Object: HAN EU ING/S7501757Z\_YAM WENG FEI/S7237457F

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
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Continue

Cancel

## Claim Handling

## Accident MT/0989862

Policy No.	5064407964-04	Vehicle No.		GST Registration No.	
Policyholder Name	235 MOTOR TRADING			Policyholder NRIC	531
Product Code	MOTOR TRADE INSURANCE	Cover Type	Third Party	Loading	0
Motor Trade Plate No.	SJJ6743	Motor Trade Driver Name	YAM WENG FEI (REN RONGHUI)	Motor Trade Driver NRIC	S72
Contact No.(Mobile)	90660111	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
KFK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	20	Private Hire	No

## ▼ Accident Details

Report Date	11/04/2018 09:50	Accident Report Within 24 hrs	Yes	Accident Type	Side
Date of Accident	04/04/2018	Time of Accident hh:mm	20:50	Country of Accident	Sing
Reporting Centre		Orange Force		ICM No.	
Accident Location	HOUGANG AVE 3 TWDS UBI				

## ▼ Benefits

## ▼ Excess

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 Information

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

## ▼ Policyholder Mailing Address

Address 1	201 HENDERSON ROAD	Address 2	#06-23 APEX @ HENDERSON	Address 3	SINGAPORE
Address 4		Address Type	Singapore address	Post Code	159001
Unit No.		Related Policy Number	5064407964-04		

## ▼ OI Driver Info

Driver Name	YAM WENG FEI	Driver Type	Named Driver		
Unnamed driver Name		Driver NRIC	S7237457F	Driver DOB	08/11/1978
Register Date of Driver License	06/10/1994	Driver Age	45	Driving Experience	23
Contact No.(Mobile)	90660111	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 46	Address 2	LORONG 5 TOA PAYOH	Address 3	
Address 4		Address Type	Singapore address	Post Code	310001
Unit No.	#11-93				
Does he own a Singapore Registered car?	Yes <input type="radio"/> No <input type="radio"/>	Driver Vehicle No.		Driver Insurer Company	

## Declaration

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

## Claim 001 OD-MX

New

Claim Type *	OD-MX ▼	Insured Name	235 MOTOR TRADING	Insured NRIC	531
Contact No.(Mobile)	90660111	Contact No.(Home)	NIL	Contact No.(Office)	
Email Address		OI Vehicle Number		TP Vehicle Number	SKM
Claim Description	/ SKM8669U ON 4 Apr 2018				
Preferred Workshop Contact No.		Insured Liability *	Partially at Fault ▼	Name of Preferred Workshop	
Require Finalisation	Yes ▼	Preferred Repair Option	Preferred Workshop, Name unknown ▼	GIA report	Rec
Date Registered	11/04/2018 10:01	Claim Close Date		Date Received	11/0
Report Taken By	KRISHNASAMY	Workshop Repairer		Total Loss but Repaired	

☒ Print AK letter

Save Submit

## Attachment



Accident No.	MT/0989862	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	11/04/2018 10:00

Path *	Category *	Confidential	Urgency *
Choose File No file chosen	Clear Please Select ▼	NO ▼	Normal ▼
Choose File No file chosen	Clear Please Select ▼	NO ▼	Normal ▼
Choose File No file chosen	Clear Please Select ▼	NO ▼	Normal ▼
Choose File No file chosen	Clear Please Select ▼	NO ▼	Normal ▼
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Choose File No file chosen	Clear Please Select ▼	NO ▼	Normal ▼
Choose File No file chosen	Clear Please Select ▼	NO ▼	Normal ▼

Message Read

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Descr
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 10:01	NRIC/ Driving License	Normal	NRIC/ Driving Lice
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 10:01	NRIC/ Driving License	Normal	NRIC/ Driving Lice
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 09:59	SAS	Normal	SAS 2018
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 09:58	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 09:58	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 09:58	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 09:58	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 09:58	Photos	Normal	Photos 20:
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	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 09:58	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 09:58	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 09:58	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 09:57	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 09:57	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 09:57	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 09:57	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 09:57	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 09:57	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 09:57	Photos	Normal	Photos 20:

## Video List

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