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| Date In: 9/4/8-19:35 | Job description | Date & Time Completed | Done b | oż. |
| Res No: NA) INC 18006547/24 | SAS e-filing | i | | |
| Veh No: 6W80136 | E-mail (within Shrs, Ale | C 2hrs) | | |
| D.O.A : 7/4/8-11:55 | i-Motor Claim For | m ,M10989645 | 914/18 20: | 02 |
| | i-Motor W/O (Within | n: OD 2hrs, TP 4hrs) | | |
| OD / TP-/ Reporting Only | i-Photo Uploaded | | A COMPANY OF THE PARTY | 1 |
| | Assessment/Survey R | teport | | |
| TP Insurer: | Ass't Report by Fax | Hand to Owner/Wksp | | |
| Preferred Wksp / INC Assign Wksp / QW: | (| Tel: | Fax: | |
| TP Particulars: Veh No: Se | | INC()/Non-INC(). | | |
| Owner / Driver: (| | Tel: |) | |
| Policy No: () | Period: (|) Cover Type: (|) | |
| Confirmed by : (| Date | e: Time: |) | |
| Insured/Driver Liability: (% | (WO): | N: 0-20%; P: 21-79%. P: 30 | -100%] | # # # # # # # # # # # # # # # # # # # |
| Year of Registration: () | Warranty: YES ()/N | | | Victor States |
| | 51,000 ()/\$2,000 () | | | |
| | | NAMES OF THE PARTY | | |
| () Walk-In Customer : Customer's | | | TOTAL STREET, | |
| () Total Loss Case : to e-mail Ins | | ial & Suictly 140 Tales of repositor | · | |
| | | \ Tourism Co. (| | 1 |
| Drive-In ()/ Towed-In (); Invo | oice: YES () / NO (|); Towing Co: (| | |
| Remarks:- (INC hotline: 6788 6616 | 000 | Date&Timis Completed | Done | У |
| The state of the s | | 4 . 16 | | |
| 1) Apply for Transport Allowance () | / Courtesy Car () | | | |
| Apply for Transport Allowance (QC Check / Post Repair Inspection | () | | - | - |
| 2) QC Check / Post Repair Inspection | () | | | |
| QC Check / Post Repair Inspection Upload Resurvey Photo [Repair Cost > | () | | | |
| 2) QC Check / Post Repair Inspection | () | | | |
| QC Check / Post Repair Inspection Upload Resurvey Photo [Repair Cost > | () | | | |
| 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury: | () | | | |
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| 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury: | () | | | |
| 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury : Date/Time Actions | () | | Ant(S) | Am.(1) |
| 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury : Date/Time Actions | () | ice Preparation Checklist | Ant (S) | Fi # 1 - CO. L. T. |
| 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury: Date/Time Actions | () - \$3000] () Inve | Accident Reporting (\$30); | ficBill | |
| 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury : Date/Time Actions A 180 2772 | () - \$3000] () Inve | Accident Reporting (\$30); Damage Assessment (\$100); INC (| 15t Bill \$80) 40/\$45 | |
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| 2) QC Check / Post Repair Inspection 3) Upload Resurvey Photo [Repair Cost > Injury : Date/Time Actions A 180 M72 laumant's Particulars:- river/Owner: | [inve) | Accident Reporting (\$30); Darriege Assessment (\$100); INC (Towing Fee S Follow-Through Survey Follow-Through Survey (Resurvey) | 580) 40/545 5120 530 | F1 # 1 - 10 2 2 3 3 |
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SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. 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 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.

| aforesaid, | |
|------------------------------------------------------------------------------|----------------------------------------|
| | ACCIDENT STATEMENT |
| Date Of Report | 09/04/2018 19:35 |
| Date Of Accident | 07/04/2018 11:55 |
| Exact Location Of Accident | ALONG KRETA AYER RD |
| Country/State of Loss | SINGAPORE |
| D | DETAILS OF OWN VEHICLE |
| Vehicle Registration Number | GW8013G |
| Insured/Policyholder | |
| Name Of Registered Owner | NEWSMAG INTERNATIONAL PTE LTD |
| Co Reg No | 200413522Z |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-89999999 |
| Vehicle Particulars | |
| Manufacturer | TOYOTA |
| Model | LITEACE 2.2A |
| 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 | REPORTING ONLY |
| Vehicle Category | COMMERCIAL VEHICLE |
| Insurance Company | |
| Name of Insurance Company | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | THIRD PARTY |
| Fleet Policy | NO |
| Policy Number | 5058723608-04 |
| Cover Note Number | |
| | |

Driver

ANBUALAGAN S/O VELUCHAMY Name of Driver

S1441499A NRIC No 23/03/1960 Date Of Birth OUTDOOR Occupation 13/02/1998 Date Of Driving Pass

20 YEARS AND 1 MONTH Driving Experience

MALE Gender

(LOCAL) +65-90661025 Mobile Number

Fax Number

OFFICE-90661025 Contact Number

NOEMAIL EMail Address

Address #06.10 PURY INDUS

#05-10 RUBY INDUSTRIAL COMPLEX

Postcode 347740

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

100

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? 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) 2

Passenger 1 NAME: :

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?

NO

NO

SKE6071Z

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?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver CHRISTEN

NRIC/Passport Number

Contact Number 97470299

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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.
- 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:
 - 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, involces, 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, NEWSMAG INTERNATIONAL PTE LID

NEWSMAG INTERNATIONAL PTE LTD

35 TANNERY ROAD, for complying with requirements under any regulations, laws or court orders. #05-10 TANNERY BLOCK
RUBY INDUSTRIAL COMPLEX

RUBY INDUSTRIAL COMPLEX SINGAPORE 347740 TEL: 67430688 FAX: 67482402 E-MAIL: msbnews@starhub.net.sg REGN. NO: 2004135522

Policyholder's Signature Date & Time: Driver's Signature

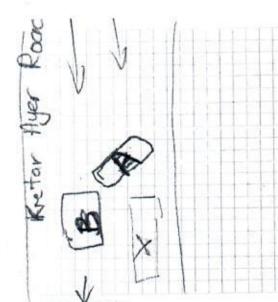
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



GW80139 SKE6071Z

| DESCRIBE | CIRCUMS" | TANCES | OF THE | ACCIDENT |
|----------|----------|--------|--------|----------|

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E-MAIL: msbnews@starhub.net.sg REGN, NO: 200413552Z

Policyholder's Signature

7th April 2018

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

The April 2018

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

ACCIDENT STATEMENT

| | ACCIPAL | . 1 " | S)(HH:MM) |
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| | 7, 4,7018 VD | D/MM/YYYY), TIME:(| <u>→</u>)(HH:MM) . |
| ACCID | ENT DATE: 7 4 200 (DE | 0 | ž. |
| | Kreta H | 1er Kead | 1 |
| LOCAT | ION: | | |
| , | DETAILS OF VEHICLE | 100136 | 10 10 |
| 3.0 | DETAILS OF VEHICLE | W 80139 | |
| | | | |
| | b)INSURANCE COMPANY: | | On the second se |
| | d)POLICY NUMBER: | / THIRD PARTY / THIRD PARTY | FIRE &THEFT) |
| | d)POLICY TYPE: (COMPREHENSIVE | / INIKO I AKIT / III | |
| | F)TYPE:(SALOON / COUPE / MPV / | VAN / LORRY / MOTORCYCLE | (OTHERS) |
| | g) VEHICLE CATEGORY: (PRIVATE / | COMMERCIAL / MOTORCYC | LE) |
| | THE PART OF LIGHT AT ACCIDE | AL HWE: | |
| | - THE PROPERTY OF A MAINING LINIDER YOU | B OMN INPRINCE LIFELIA | |
| | IF NO, PLEASE STATE (THIRD PART | Y CLAIM / REPORTING ONLY) | |
| | IF NO, PLEASE STATE (THIRD FARE | | |
| 2. | INSURED / POLICY HOLDER | MALE | / FEMALE) |
| | A)NAME: | CONTACT: | |
| | c) ADDRESS: | The second secon | - |
| | | | |
| | * CONTINUE TO 3.d IF DRIVER ALSO | O POLICY HOLDER | 25 |
| MIII . D 3 | DRIVER | 000000 | / FENALE) |
| * He of passenger | CINAME: | | 9066 LO 25 |
| (Including driver) | b)NRIC/FIN/PASSPORT: | CONTACT: | 90086 |
| (2) | c)ADDRESS: | | 1 |
| · profile | | 175 " 11 (VVVV) | |
| STANA | d)DATE OF BIRTH: |)(DD/MM/YYYY) | Bar B |
| - or Y c | e)OCCUPATION: (INDOOR / OUT | DOOR) | |
| 1. | F) YEARS OF DRIVING EXPRERIENCE WAS DRIVER AN EMPLOYEE OF | THE INSURED'S COMPANY | ? (YES / NO) |
| 4. | IF NO, RELATIONSHIP OF THE | DRIVER WITH INSURED: | |
| | a) WEATHER CONDITION: (CLEAR | / RAINING / OTHERS | |
| 5. | b)ROAD SURFACE: (DRY / WET / | DIHERS | |
| 3,6 | WAS ANYBODY INJURED (YES / N | | |
| 7 | a) REPORTED TO POLICE (YES / NO | 50 | |
| | IF YES, PLEASE STATE WHICH PO | LICE STATION: | |
| 8. | THIRD PARTY VEHICLE | E60712 MODEL: | |
| # his of passenger | O VELHOLE HOMOGINI | | |
| (Inducting driver) | b) DRIVER'S NAME: CAPIS | CONTACT:_ | 97470299 |
| / | C) NRIC/FIN/FASSI OKI | | • |
| () 9. | THIRD PARTY VEHICLE | MODEL: | |
| X-112 A DO STUDIO | d) VEHICLE NUMBER: | MODEL | |
| Xt his of passanger | 01 01111 | CONTACT: | |
| (Industing drives |) f) NRIC/FIN/PASSPORT: | | *** |
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Certificate of Insurance

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| MOTOR VEHICLES (THIRD PARTY RISKS AN | | |
| NOTOR VEHICLES (THIRD PARTY RISKS AN | | LES, 1960 |
| ROAD TRANSPORT ACT, 1987 (MALAYSIA) | | |
| NOTOR VEHICLES (THIRD PARTY RISKS) RI | ULES, 1959 (MALAYSIA) | THE CONTRACT OF THE PROPERTY O |
| Certificate Number: 5058723608-04 | | Cover : Third Party |
| . Index mark and Registration Number | of Vehicle : | GW8013G |
| Chassis Number | (\$ | |
| 2. Name of Policyholder | | NEWSMAG INTERNATIONAL PTE LTD |
| Effective Date of Insugance | 4 | 04 May 2017 |
| L Expiry Date of Insurance | | 03 May 2018 |
| Persons or Classes of Persons entitled | to drive# | |
| (a) The Policyholder. | - the Dellas haldade pre | for an with hir/har normicsion |
| (b) Any other person who is driving o | in the Policyholder's ord | see with the licensing or other laws or regulations to drive |
| Provided that the person driving | s permitted in accordance | nce with the licensing or other laws or regulations to drive squalified by order of a Court of Law or by reason of any |
| enactment or regulation in that b | ehalf from driving the | Motor Vehicle. |
| 5. Limitations as to Use# | and the same of the same of | numerome of Training Andrews |
| (a) The for social domestic and pleas | ure purposes and in co | nnection with the Policyholder's business or profession. |
| (b) Use for the carriage of passenger | s or goods in connectio | n with the Policyholder's business. |
| | #. #1. @ % *********************************** | 73. EN 477.7 (No. 17.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1.) (1.1. |
| This Policy does not cover | | |
| | | |
| (a) Use for hire or reward. | bility trial or speed-test | log |
| (b) Use for racing, pace-making, relia | bility trial or speed-test | ring. e disabled mechanically propelled vehicle. |
| (b) Use for racing, pace-making, relia (c) Use whilst drawing a trailer except the Limitations rendered inoperative | by Section 8 of the Mo | e disabled mechanically propelled vehicle. tor Vehicle (Third Party Risks and Compensation) |
| (b) Use for racing, pace-making, relia (c) Use whilst drawing a trailer except the Limitations rendered inoperative | by Section 8 of the Mo | e disabled mechanically propelled vehicle. |
| (b) Use for racing, pace-making, relia (c) Use whilst drawing a trailer except # Limitations rendered inoperative Act (Chapter 189) and Section 95 headings. | by Section 8 of the Mo | e disabled mechanically propelled vehicle. tor Vehicle (Third Party Risks and Compensation) |
| (b) Use for racing, pace-making, relia (c) Use whilst drawing a trailer excep # Limitations rendered inoperative Act (Chapter 189) and Section 95 headings. EXCESS (SECTION 1) | by Section 8 of the Mo of the Road Transport | e disabled mechanically propelled vehicle. tor Vehicle (Third Party Risks and Compensation) |
| (b) Use for racing, pace-making, relia (c) Use whilst drawing a trailer excep # Limitations rendered inoperative Act (Chapter 189) and Section 95 headings. EXCESS (SECTION 1) | by Section 8 of the Mo of the Road Transport | e disabled mechanically propelled vehicle. tor Vehicle (Third Party Risks and Compensation) |
| (b) Use for racing, pace-making, relia (c) Use whilst drawing a trailer except # Limitations rendered inoperative Act (Chapter 189) and Section 95 headings. EXCESS (SECTION 1) EXCESS (SECTION 2) INSURE WITH COE | by Section 8 of the Mo of the Road Transport N/A N/A | e disabled mechanically propelled vehicle. tor Vehicle (Third Party Risks and Compensation) |
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| (b) Use for racing, pace-making, relia (c) Use whilst drawing a trailer except # Limitations rendered inoperative Act (Chapter 189) and Section 95 headings. EXCESS (SECTION 1) EXCESS (SECTION 2) INSURE WITH COE HIRE PURCHASE COMPANY SUM INSURED I/We hereby Certify that the Policy to wh Vehicles (Third Party Risks and Compensation Agency : HON BROTHI Date of Issue : 26 Apr 2017 | by Section 8 of the Mo of the Road Transport. N/A N/A N/A N/A N/A N/A Control Control N/A | e disabled mechanically propelled vehicle. tor Vehicle (Third Party Risks and Compensation) Act, 1987 (Malaysia), are not to be included under these . es is issued in accordance with the provisions of the Motol and Part IV of the Road Transport Act, 1987 (Malaysia) |
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| (b) Use for racing, pace-making, relia (c) Use whilst drawing a trailer except # Limitations rendered inoperative Act (Chapter 189) and Section 95 headings. EXCESS (SECTION 1) EXCESS (SECTION 2) INSURE WITH COE HIRE PURCHASE COMPANY SUM INSURED I/We hereby Certify that the Policy to wh Vehicles (Third Party Risks and Compensa Agency : HON BROTHI Date of Issue : 26 Apr 2017 Reprint : 26 Apr 2017 Countersigned By: | by Section 8 of the Mo of the Road Transport. N/A N/A N/A N/A N/A N/A CONTRIBUTION N/A CONTRIBUTION N/A N/A N/A N/A N/A N/A N/A N/A N/A N/ | e disabled mechanically propelled vehicle. tor Vehicle (Third Party Risks and Compensation) Act, 1987 (Malaysia), are not to be included under these . es is issued in accordance with the provisions of the Motol and Part IV of the Road Transport Act, 1987 (Malaysia) |

eBaoTech

Hello, NAC_PAYA_UBI_800601

GeneralClaim

| Change Language | · Change Password | Log Out |
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| Change Language | Change Password | Log Cu |

My Desktop Notice of Loss

| Polic | y Query | | | | | | | 2. | |
|----------|-------------------|-------------------------------------|----------------------|---------|-------------|----------------|-------------------|------------------|-------------|
| Policy N | lo. | | | | Date of Ac | cident | 07/04/2 | 018 11:55 | |
| Vehicle | No.(For Motor) | GW8013G | | | | | | | |
| | | | | | Search | | | | |
| Select | Policy No. | Policyholder Name | Policyholder NRIC | Product | Cover Type | Vehicle No. | Insured Object | Commence Date | Expiry Date |
| 0 | 5058723608- 04 | NEWSMAG INTERNATIONAL PTE LTD | 200413522Z | GCV | Third Party | GW8013G | GW8013G | 04/05/2017 | 03/05/2018 |

Continue

Policy Information Policyholder Policyholder 200413522Z NEWSMAG INTERNATIONAL PTE NRIC Policy No. 5058723608-04 Name 35 TANNERY ROAD #05-10 RUBY INDUSTRIAL COMPLEX SINGAPORE 347740 Address Group N Product COMMERCIAL VEHICLE INSURAL Plan Policy Flag Name Policy Effective 03/05/2018 23:59 Expiry Date 04/05/2017 00:00 26/04/2017 issue Date Date Own Windscreen Third 0.0 damage 0.0 0.0 Excess Party Excess Excess 05 Additional 0 Premium Excess Outside Outside Singapore Singapore OD TP Excess Excess GST Flag Agent Tel. 68446450 HON BROTHERS MOTOR Agent Coinsurance No Flag Open Policy Info Certificate Info Policyholder Mailing Address #05-10 RUBY INDUSTRIAL COM Address 3 SINGAPORE 347740 Address 2 35 TANNERY ROAD Address 1 Address Post Code 347740 Singapore address

Insured Object: GW8013G

Address 4

Unit No.

| CARE-MODELLINGS CO. | 53000 | | | |
|---------------------|---------------------|------------------|--------------------|---------------------|
| Sequence | Date of Endorsement | Endorsement Type | Endorsement Status | Endorsement Content |
| | | Continue Ca | incel | |

5058723608-04

Туре Related Policy

Number

| aim Handling | | | | | | |
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| ident HT/0989645 | | | | | | |
| cy No. | 5058723608-04 | Vehicle No. | GW8013G | GST Registration No. | NA 2004135222 | |
| icyholder Name | NEWSMAG INTERNATIONAL PTE LTD | | | Poscyholder NRIC | | |
| duct Code | COMMERCIAL VEHICLE INSURA | Cover Type | Third Party | Loading | 0 | |
| ntact No.(Mobile) | 0 | Contact No.(Office) | 0 | Contact No. (Home) | 0 | |
| all Address | | Special Remark | | eCode | Pr A | |
| K. | ® No ○ Yes | TCA. | No ○Yes | eCode Reason | | |
| D Protection | No | NCD Entitlement(%) | 20 | Private Hire | No. | |
| Accident Details | | | | | | |
| | A | Accident Report Within 24 hrs | Yes | Acodent Type | Collision - Head to R | ear |
| port Date | 09/04/2018 19:57 | | | Country of Acodenic | Singapore | |
| te of Accident | 07/04/2018 | Time of Accident hhimm | 11:55 | | 111201100 | |
| parting Centre | | Drange Force | | ICM No. | | |
| oident Location | ALONG KRETA AYER RD | | | | | |
| Benefits | | | | | | |
| Excess | | | | | | 3550 |
| in damage Excess. | 0.00 | Additional Excess | | Windscreen Excess | | 0.00 |
| named Driver Excess | | Outside Singapore OD Excess | | | | |
| ing Party Excess | 0.00 | Outside Singapore TP Excess | | | | |
| GST Registered Informe | | | | | | |
| Registered | Yes | | GST Registration Date | 01/01/2015 | | |
| T Registration No. | NA. | | GST Status Verified | No | | |
| dification History | | | | | | |
| | | | | | | |
| Policyholder Mailing Ade | dress | | | | | |
| | 35 TANNERY ROAD | Address 2 | #05-10 RUBY INDUSTRIAL COM | Address 3 | SINGAPORE 34774 | 0 |
| Sdrekk I | 33 (ARREST SUM) | Address Type | Singapore address | Post Code | 347740 | |
| adress 4 | | | 5058723608-04 | | , m, m, m, | |
| ne No. | | Related Policy Number | 34/301/4/3000-04 | | | |
| U OI Driver Info | | 1200000000 | TOTAL CONTRACTOR AND CONTRACTOR C | | | |
| vac Name | Unnamed Driver | Oriver Type | Unnamed Driver | Driver DOB | 23/03/1960 | |
| named driver Name | ANRUALAGAN S/O VELUCHAMY | Driver NRIC | S1441499A | | | |
| igister Date of Driver License | 13/02/1998 | Driver Age | 58 | Driving Experience | 20 | |
| ontact No. (Mobile) | 90661025 | Contact No.(Office) | 0 | Contact No.(Home) | 0 | |
| ddress 1 | 35 TANNERY ROAD | Address 2 | AUBY INDUSTRIAL COMPLEX | Address 3 | SINGAPORE 34774 | 0 |
| | | SERVICE ACCES | Control of the same | Post Code | 347740 | |
| ddress 4 | | Address Type | Singapore address | Post Code | 342740 | |
| ddress 4 nit No. | 05-10 | Address Type | Singapore address | Post Code | 342740 | |
| nit No. oes he own a Singapore | | Driver Vehicle No. | Singapore address | Driver Insurer Comp | | |
| nit No. oes he own a Singapore | 05-10 ○ Yes ® No | | Singapore address | | | |
| nit No. oes he own a Singapore egistered car? | | | Singapora adoress | | | |
| nit No. oes he own a Singapore egistered car? ccaration | Ú vec | Driver Vehicle No. | | | | |
| | | | ⊙ Yes ® No. | | | |
| nit No. oes he own a Singapore egistered (ar) ectaration resthalyzer or Blood Test | Ú vec | Driver Vehicle No. | | | | |
| nit No. oes he own a Singapore egistered (ar) ectaration resthalyzer or Blood Test | Ú vec | Driver Vehicle No. | | | | |
| nst No. oes he own a Singapore egistered car? ectaration resthalyser or Blood Test easing? | Ú vec | Driver Vehicle No. | | | | |
| nit No. bes he own a Singapore egistered car? cutaration resthalyser or Blood Test eading? | Ú vec | Driver Vehicle No. | | | | |
| ns No- bes he own a Singapore gastered (ar) Claration washnalyser or Blood Test nading? | Ú vec | Driver Vehicle No. | | | any | |
| ns No. Des he own a Singapore gistered car? colaration reathalyses or Blood Test easing? Colaims 005 New | Ú vec | Driver Vehicle No. | | | | |
| nst No. Des he own a Singapore gistered car? Interaction Institution of Blood Test asking? Claim 001 New Item Type * | ∴ yes ⊕ No 0 mg | Driver Vehicle No. Any injury? | ○ Yes ® No. | briver Insurer Comp | any | |
| ns No- oss he own a Singapore registered (ar) Claration matchalyser or Blood Test rading? Claim 005 New Jam Type * ontact No. (Mobile) | ∴ yes ⊕ No 0 mg | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) | ○ YES ® No NEWSMAG INTERNATIONAL PTE | Driver Insurer Comp | 200413522Z | |
| nit No. bes he own a Singapore registered (ar? rettaration resthalyser or Blood Test eacing? Claim 005 New laim Type * ontact No. (Mobile) mail Address | ○ Yes ® No 0 mg | Driver Vehicle No. Any injury? Insured Name | ○ Yes ® No. | Insured NRIC Contact No. (Office) TP Vehicle Number | 200413522Z 07439688 SKE60712 | |
| ns No. bes he own a Singapore gistered (ar) claration reathalyser or Blood Test acting? claim 003 New arm Type * ontact No. (Mobile) nail Address arm Description. | ∴ yes ⊕ No 0 mg | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) OI vehicle Number | YES ® NO NEWSMAG INTERNATIONAL PTE GWB013G | Enver Insurer Comp. Insured NRIC Contact No. (Office) | 200413522Z 07439688 SKE60712 | |
| ns No. Des he own a Singapore gistered car? ctaration mathalyser or Blood Test eacing? Claim 001 New laim Type * omact No. (Motife) mail Address ligem Description referred Workshop Contact | ○ Yes ® No 0 mg | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) | NEWSMAG INTERNATIONAL PTE GWB013G Fully at Pault | Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred W | 200413522Z 97439688 SKE60712 | |
| ns No- pes he own a Singapore gatered (ar) Claration matchalyser or Blood Test adding? Claim 005 New Jam Type * portact No (Mobile) mail address alam Description makened Workshop Contact of Served Workshop Contact of | ○ Yes ® No 0 mg | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) OI vehicle Number | YES ® NO NEWSMAG INTERNATIONAL PTE GWB013G | Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred W | 200413522Z 67430688 SKE6071Z Aerkshop | |
| ns No- bes he own a Singapore gatered (ar? Claration wathalyser or Blood Test lading? Claim 001 New arm Type * omact No (Mobile) half Address arm Description served Workshop Contact or, equine Finalisation | O mg O mg O mg GW8013G / SKE6071Z ON 7 Apr 2018 | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) Of Vehicle Number Insured Liability * | NEWSMAG INTERNATIONAL PTE GWB013G Fully at Pault | Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred W | 200413522Z 97439688 SKE60712 | |
| ns No. Jose he own a Singapore claration matchalyser or Blood Test addination History Claim 005 New Jam Type * Jordant No. (Mobile) mail Address Jam Bescription referred Workshop Contact o. aquare Finansation atc Registered | O mg CO-MX ✓ CM8013G / SKE6071Z ON 7 Apr 2018 Yes SNO4/2018 20:02 | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) OI vehicle Number Insured Liabibly * Preferend Repair Option | NEWSMAG INTERNATIONAL PTE GWB013G Fully at Pault | Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred W | 200413522Z 67430688 SKE6071Z Aerkshop | |
| ns No. Nes he own a Singapore gatered (ar? Claration Wathalyser or Blood Test lading? claim 093 New Aim Type * Inmact No. (Mobile) Inail Address Inaim Description Aftered Workshop Contact Lequine Finalization are Registered Report Taken By | O mg CO-MX ✓ GW8013G / 5KE6071Z ON 7 Apr 2018 Yes | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) OI vehicle Number Insured Liabibly * Preferend Repair Option | NEWSMAG INTERNATIONAL PTE GWB013G Fully at Pault | Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred W | 200413522Z 67430688 SKE6071Z Aerkshop | |
| ns No. Jose he own a Singapore claration mathialyser or Blood Test adding? claim 005 New Jam Type * Jornact No. (Mobile) nail Address Jam Description arterned Workshop Contact or equire Finalization arte Registered epert Takin By | O mg CO-MX ✓ CM8013G / SKE6071Z ON 7 Apr 2018 Yes SNO4/2018 20:02 | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) OI vehicle Number Insured Liabibly * Preferend Repair Option | NEWSMAG INTERNATIONAL PTE GWB013G Fully at Fault Preferred Workshop, Name unknown | Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred W | 200413522Z 67430688 SKE6071Z Aerkshop | |
| ns No. Jess he own a Singapore gatered (ar? Claration wathalyser or Blood Test lading? Claim 003 New Jerry P. Jery P. J | O mg CO-MX ✓ CM8013G / SKE6071Z ON 7 Apr 2018 Yes SNO4/2018 20:02 | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) OI vehicle Number Insured Liabibly * Preferend Repair Option | NEWSMAG INTERNATIONAL PTE GWB013G Fully at Pault | Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred W | 200413522Z 67430688 SKE6071Z Aerkshop | |
| is No. es he own a Singapore gatered car? claration sathelyser or Blood Test asing? dification History Claim 003 New im Type * mtact No.(Mobile) hall Address sym Description aftered Workshop Contact quine Finalisation fice Registered goes Taken By] Price Accretiser | O mg CO-MX ✓ CM8013G / SKE6071Z ON 7 Apr 2018 Yes SNO4/2018 20:02 | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) OI vehicle Number Insured Liabibly * Preferend Repair Option | NEWSMAG INTERNATIONAL PTE GWB013G Fully at Fault Preferred Workshop, Name unknown | Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred W | 200413522Z 67430688 SKE6071Z Aerkshop | |
| is No. In the conn's Singapore gatered car? Claration Inathalyser or Blood Test acing? Claims OOS New Interface No. (Mobile) Inail Address Interface Workshop Contact Inquire Finalsation Inc Rogistered Inpure Taken By In Price Ak Letter | O mg CO-MX ✓ CM8013G / SKE6071Z ON 7 Apr 2018 Yes SNO4/2018 20:02 | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) OI vehicle Number Insured Liabibly * Preferend Repair Option | NEWSMAG INTERNATIONAL PTE GWB013G Fully at Fault Preferred Workshop, Name unknown | Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred W | 200413522Z 67430688 SKE6071Z Aerkshop | |
| at No. was he own a Singapore gatered (ar? Claration mathalyzer or Blood Test ading? children History Claim 001 New arm Type * mathalyzer or Blood Test ading? Attachment Attachment | One No Omg OO-Mox Ves Ow8013G / SKE6071Z ON 7 Apr 2018 Yes O9/04/2018 26:02 Dackson | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) Of Vehicle Number Insured Liability * Preferend Repair Option Claim Class Date | NEWSMAG INTERNATIONAL PTE GWB013G Fully at Fault Preferred Workshop, Name unknown Save Submit | Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred W | 200413522Z 67430688 SKE6071Z Perkshop | |
| ns No. Nos No. Nos No A Singapore gotered (ar) Claration mathalyser or Blood Test adding? Claim 001 New Attachment Attachment Port AK Inter Attachment Codert No. | Ones No Omg CO-MX CWB013G / SKE6071Z ON 7 Apr 2018 PYES S9/04/2018 26:02 Jackson MT/0989645 | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) Of Vehicle Number Insured Liability * Preferend Repair Option Claim Class Date | NEWSMAG INTERNATIONAL PTE GWB013G Fully at Fault Preferred Workshop, Name unknown Save Submit 001 | Insured NRIC Contact No. (Office) TP Vehicle Number Name of Preferred W | 200413522Z 67430688 SKE6071Z Perkshop | |
| ns No. Nos No. Nos No A Singapore gotered (ar) Claration mathalyser or Blood Test adding? Claim 001 New Attachment Attachment Port AK Inter Attachment Codert No. | One No Omg OO-Mox Ves Ow8013G / SKE6071Z ON 7 Apr 2018 Yes O9/04/2018 26:02 Dackson | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) Of Vehicle Number Insured Liability * Preferend Repair Option Claim Class Date | NEWSMAG INTERNATIONAL PTE GWB013G Fully at Fault Preferred Workshop, Name unknown O01 09/04/2016 20:03 | Insured NRIC Contact No.(Office) TP Vehicle Number Name of Preferred W | 200413522Z 67430498 SK66071Z Ferkshop Received 09/04/2018 00:00 | 10 |
| st No. les he own a Singapore gatered (ar? Cuaration les halver or Bleed Test ading? Challes OO1 New lem Type * contact No. (Mobile) nail Address arm Description afford Workshop Contact or open Taken By Price AK letter Attachment Positioners Attachment | Ones No Omg CO-MX CWB013G / SKE6071Z ON 7 Apr 2018 PYES S9/04/2018 26:02 Jackson MT/0989645 | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) Of Vehicle Number Insured Liability * Preferend Repair Option Claim Class Date | NEWSMAG INTERNATIONAL PTE GWB013G Fully at Fault Preferred Workshop, Name unknown 001 09/04/2016 20:03 Category * | Insured NRIIC Contact No.(Office) TP Vehicle Number Name of Preferred W GIA report Date Received Confidential | 2004135222 97430698 SK660712 Fectives 09/04/2018 00:00 | |
| st No. les he own a Singapore gatered (ar? Cuaration les halver or Bleed Test ading? Challes OO1 New lem Type * contact No. (Mobile) nail Address arm Description afford Workshop Contact or open Taken By Price AK letter Attachment Positioners Attachment | O mg O mg OO-MX Ves ® No OW8013G / SKE6071Z ON 7 Apr 2018 Ves OS/04/2018 26:02 Dackson MT/0980645 ® Yes © No | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) Of Vehicle Number Insured Liability * Preferend Repair Option Claim Class Date | NEWSMAG INTERNATIONAL PTE GWB013G Fully at Fault Preferred Workshop, Name unknown 001 09/04/2016 20:03 Category * | Insured NRIX Contact No.10thce TP Vehicle Number Name of Preferred W GIA report Date Received Confidential | 2004135222 97430498 SKE60712 Fective5 09/04/2018 00:00 | 10 |
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| nit No. oes he own a Singapore egistered car? ectaration resthalyser or Blood Test eacing? | O mg O mg OO-MX Ves ® No OW8013G / SKE6071Z ON 7 Apr 2018 Ves OS/04/2018 26:02 Dackson MT/0980645 ® Yes © No | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) Of Vehicle Number Insured Liebisty * Preferend Repair Option Claim Cince Date Oaim No. Upload Date Brows Brows | NEWSMAG INTERNATIONAL PTE GWB013G Fully at Fault Preferred Workshop, Name unknown 001 09/04/2016 20:03 Category * Cear Please Select G Clear Please Select | Insured NRIIC Contact No.(Office) TP Vehicle Number Name of Preferred W GIA report Date Received Confidential | 2004135222 97430498 SKE60712 Fective5 09/04/2018 00:00 | 10 |
| not No. Jose he own a Singapore aggreered car? Colaration Testinalyser or Blood Test teacing? Colaration History Attachment Print Acceptage Attachment Colaration History Attachment | O mg O mg OO-MX Ves ® No OW8013G / SKE6071Z ON 7 Apr 2018 Ves OS/04/2018 26:02 Dackson MT/0980645 ® Yes © No | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) Of Vehicle Number Insured Liability * Preferend Repair Option Claim Cone Date Claim No. Upload Date Brows Brows Brows | NEWSMAG INTERNATIONAL PTS GWB013G Fully at Feuit Preferred Workshop, Name unknown O01 09/04/2016 20:03 Category * Ce Clear Please Select C Clear Please Select | Insured NRIC Contact No.(Office) TP Vehicle Number Name of Preferred W GIA report Date Received Confidential INC INC INC INC INC INC INC INC | 2004135222 97430498 SK660712 Ferkshop Received 09/04/2018 00:00 Normal | 10 |
| nis No. Joss he own a Singapore ggstered car? sctaration resthalyser or Blood Test eacing? Claims 003 New Liam Type * John Description referred Workshop Contact of Registered espert Taken By Print AK letter Attachment Poccident No. | O mg O mg OO-MX Ves ® No OW8013G / SKE6071Z ON 7 Apr 2018 Ves OS/04/2018 26:02 Dackson MT/0980645 ® Yes © No | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) Of Vehicle Number Insured Lability * Preferend Repair Option Claim Cone Date Claim No. Upload Date Brows Brows Brows Brows | NEWSMAG INTERNATIONAL PTE GWB013G Fully at Fault Preferred Workshop, Name unknown O01 09/04/2018 20:03 Category * C Clear Please Select e Clear Please Select e Clear Please Select e Clear Please Select e Clear Please Select | Insured NRIC Contact No.(Office) TP Vehicle Number Name of Preferred W GIA report Date Received Confidential V NO V NO V | 2004135222 67430498 SK660712 Sk66071 | 10 |
| ns No. Nos he own a Singapore gatered (ar) Claration Bathalyser or Bleod Test adding? Claim 001 New Altachment Attachment Port AK Inter Attachment Codert No. | O mg O mg OO-MX Ves ® No OW8013G / SKE6071Z ON 7 Apr 2018 Ves OS/04/2018 26:02 Dackson MT/0980645 ® Yes © No | Driver Vehicle No. Any injury* Insured Name Contact No.(Home) Of Vehicle Number Insured Liability * Preferend Repair Option Claim Cone Date Claim No. Upload Date Brows Brows Brows | NEWSMAG INTERNATIONAL PTE GWB013G Pully at Pault Preferred Workshop, Name unknown O01 09/04/2016 20:03 Category * de Clear Please Select de Clear Please Select de Clear Please Select de Clear Please Select | Insured NRIC Contact No.(Office) TP Vehicle Number Name of Preferred W Confidential Confidential V NO NO | 2004135222 97430498 SK660712 Ferkshop Received 09/04/2018 00:00 Normal | 10 |

| Attachment | | Uploaded By/Date | Category | P | Urgency | Description | Sent? Actio (CO) |
|--------------|---------------------------|-------------------------------------------------------------|-----------------------|---|---------|--------------------------------|---------------------|
| 近鹽 | NAC_PAYA_UBI_800601(NAT | IONAL ASSESSMENT CENTRE SERVICES) on 09 Ap , 3018 30:03 | NR3C/ Driving License | | Normal | NRIC/ Driving License 2018-4-9 | Edi |
| 79 | NAC_RAYA_UBI_ECOSCI_ NAT | COMM. ASSESSMENT CENTRE SERVICES) on 09 Ap y 2018 20:03 | SAS | | Normal | SAS 2018-4-9 | Edi |
| | NAC_PAYA_UBI_BOOKOLI NAT | IONAL ASSESSMENT CENTRE SERVICES) on 09 Ap y 2018 20:03 | Photos | | Normal | Photos 2018-4-9 | Ed |
| | NAC_PAYA_UBI_800601(NAT | IONAL ASSESSMENT CENTRE SERVICES) on 09 Ap + 2018 20:01 | Photos | | Normal | Photos 2018-4-9 | Edi |
| 16 | | IONAL ASSESSMENT CENTRE SERVICES) on 09 Ap + 2018 20:03 | Photos | | Normal | Photos 2018-4-9 | Ed |
| 10 | NAC_PAYA_UB1_800601(NAT | IONAL ASSESSMENT CENTRE SERVICES) on 09 Ap 7 2018 20:03 | Photos | | Normal | Photos 2018-4-9 | Ed |
| 9 | NAC_PAYA_UBI_B00601(NAT | IONAL ASSESSMENT CENTRE SERVICES) on 09 Ap + 2018 20:03 | Photos | | Normal | Photos 2018-4-9 | Ed |
| 2 | NAC PAYA JIBL 800603(NAT | TONAL ASSESSMENT CENTRE SERVICES) on 09 Apr + 2018 20:03 | Photos | | Normal | Photos 2018-4-9 | Ed |
| 1 | NAC_PAYA_UBI_800603(NAT | (DNAL ASSESSMENT CENTRE SERVICES) on 09 Ap + 2018 20:03 | Photos | | Normal | Photos 2018-4-9 | Ed |
| 1 | NAC_PAYA_UBI_800601(NAT | TIONAL ASSESSMENT CENTRE SERVICES) on 09 Ap + 2018 20:03 | Photos | | Normal | Photos 2018-4-9 | Ed |
| - | NAC_PAYA_UBI_BOOSOL(NAT | CONAL ASSESSMENT CENTRE SERVICES) on 09 Ap. r 2018 20:03 | Photos | | Normal | Photos 2018-4-9 | Ed |
| 63 | NAC_PAYA_UBI_800603(NA | TIONAL ASSESSMENT CENTRE SERVICES) on 09 Ap r 2018 20:03 | Photos | | Normal | Photos 2018-4-9 | Ed |
| 4 | NAC_PAYA_UBI_800603(NA | FIONAL ASSESSMENT CENTRE SERVICES) on 09 Ap + 2018 20:03 | Photos | | Normal | Photos 2018-4-9 | Ed |
| ⊕ Video List | | | | | | | |
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