

NATION 11 Assessment Centre services

Date In: 11/04/18	Job description	Date & Time Completed	Phone No.
Ref No: NA/INC18006672/13	SAS e-filing		
Vehicle: SJ440354	E-mail (within 8hrs, AP 2hrs)		
DDA: 11/04/18 1030	i-Motor Claim Form	22/6990007	
OD: (10) Reporting Only	i-Motor W/O (Within OD) 2hrs, TP 4hrs		
TP Inmate:	i-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (		N-51		Tel:	Fax:
IP Particulars:	Veh No:	SLP6586K 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:-

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: 2

[illegible]

		Invoice Preparation Checklist	Am't (\$) 1st Bill	Am't (\$) Add'l
NA1802254		1) AR : Accident Reporting (\$30);		
Claimant's Particulars :-		2) DA : Damage Assessment (\$100); INC (\$80)		
Driver/Owner:		3) TP : Towing Fee \$40/\$45		
Contact No.:		4) FT : Follow-Through Survey \$120		
Damaged Portion:		5) RT : Follow-Through Survey (Resurvey) \$30		
QC Checked by (Engr-In-Charge):		For claiming against INC Only (wef 10 Jan 2005)		
Auditors' Comments :-		6) TR : Re-inspection \$75		
Cat. 1		7) NI : Idac DA + SMRT Survey \$160		
Cat. 2/3		8) NTUC Additional Services :-		
		OD*		
		*N5: Courtesy Car / Tpt Allowance \$5		
		*N6: Repair Co-ordination \$10		
		*N7: Post Repair Inspection \$25		
		*N8: DV / Collect Excess Coordination \$5		
		TP (\$11) : TP (\$5 on INC) against INC \$20		
		9) N12: Idac Mobile \$0		
		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	11/04/2018 14:49
Date Of Accident	11/04/2018 10:30
Exact Location Of Accident	SLE TWDS CTE B4 MANDAI EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJU4035U
Insured/Policyholder	
Name Of Registered Owner	TAN LEE FEI
NRIC No	S8206682I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96509599
Alternative Phone No	OTHERS-96509599

Vehicle Particulars

Manufacturer	SUBARU
Model	IMPREZA
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5098635927
Cover Note Number	

Driver

Name of Driver	TAN LEE FEI
NRIC No	S8206682I
Date Of Birth	09/02/1982
Occupation	OUTDOOR
Date Of Driving Pass	30/04/2012
Driving Experience	5 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96509599
Fax Number	
Contact Number	OTHERS-96509599
Email Address	NOEMAIL

Address	BLK 886D WOODLANDS DRIVE 50
	#07-539
Postcode	734886
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	CHAIN COLLISION
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?	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)	2
Passenger 1	NAME: : UNKNOWN
	GENDER: : FEMALE

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

I WAS DRIVING ALONG SLE TWDS CTE ON THE EXTREME RIGHT LANE OF A3-LANES EXPRESSWAY. SOMEWHERE B4 MANDAI EXIT, IT WAS HEAVY TRAFFIC AHEAD I COMPLETELY STOPPED DUE TO THE TRAFFIC INFRT. AFTER A WHILE, I FELT A GREAT IMPACT FROM THE REAR. I ALIGHTED AND REALISED THAT I'M INVOLVED IN A CHAIN COLLISION ACCIDENT.

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	SLP6586K
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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLG7548L
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)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SKN2897L
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)

DETAILS OF INJURED PERSON 1

Name TAN LEE FEI
Approximate Age
Injuries Sustain SLIGHT
Injured person in which vehicle? SJU4035U
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
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:

11/04/18

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

SLE TOWARDS CTE BEFORE MANDAZ EXIT.

A- SJU 4035 U
B- SLP 6586 K
C- SLG 7548 L
D- SKU 2897 L

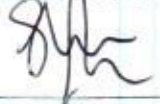


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

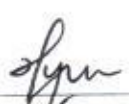
I was driving along SLE Towards CTE on the extreme right lane at 3 lanes, expressway. Somewhere before MANDAZ EXIT, I was in heavy traffic ahead so I completely stopped due to the traffic. After a while, I felt a great impact from the rear, therefore I alighted and realised I am involved in a 4 vehicles chain collision accident.

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:

 11/04/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Vehicle No.	SJM 4035 U		Model / Make	SUBARU IMPREZA
Date of Accident	11/04/2018			
Time of Accident	1030 AM HRS			
Location of Accident	SLE TOWARDS CTE BEFORE MANDALAY EXIT.			
Exact purpose use during accident	WORKING HOUR			
Name of Owner	TAN LEE FEL			
Telephone No.	H/P : 91650 9599		Home :	Office :
NRIC	S 8206682 I			
Address	API Bldg 886D WOODLANDS DRIVE 50 #07-539 S(734886)			
Claim type	OD	THIRD PARTY	REPORTING ONLY	
Insurance Company	NTUC			
Type of Coverage	Comprehensive	Third Party	Third Party / Fire / Theft	
Policy No.	5198635927			
Name of Driver	As Above If No,			
NRIC	Any Passengers : 1 (FEMALE)			
Date of birth	09/02/1982			
Occupation	Outdoor	/	Indoor	
Driving License Pass Date	30/04/2012			
Gender	Male	/	Female	
Contact No.	H/P :		Home :	Office :
Address				
Driver have any own vehicle	No,	If yes, Reg No.	OWNER	
Relationship	Employee,	If no, state	OWNER	
Weather condition	Clear	Raining	Other	
Road Surface	Dry	Wet	Other	
Any Injuries	No,	If Yes, Who?		
Name And Contact No.	TAN LEE FEL			
Name And Contact No.				
Police Report	No,	If Yes, Where?		
Vehicle B No.	SLD 6586 K	Any Passengers : 1 (FEMALE)		
Name of Driver	Contact No. :			
Vehicle C No.	SLG 7542 L	Any Passengers : 2. 1 (MALE), 1 (FEMALE)		
Vehicle D No.	SKN 2897 L	Any Passengers : UNKNOWN		
Vehicle E no.	Any Passengers :			
Vehicle F No.	Any Passengers :			
Vehicle G No.	Any Passengers :			
Witness Name	Witness Contact :			
Accident Portion	REAR PORTION			
Camera Recorder	Yes / No			
Email Address				
HAVE YOU BEEN APPROACH BY UNKNOWN PERSON SOLICITING / OFFERING ACCIDENT CLAIMS ASSISTANCE?				
				Yes / No
PARTICULAR WORKSHOP	N51 AUTOMOTIVE PTE LTD			
CONTACT NO.	6842 0051 / 6744 0510			
CONTACT PERSON				
FAX NO	6741 0510			
WORKSHOP EMAIL ADDRESS	sales@n51.com.sg			

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8206682I



Name

TAN LEE FEI

陈丽妃

Race

CHINESE

Date of birth

09-02-1982

Sex

F

Country of birth

SINGAPORE



4823058



NRIC No. S8206682I

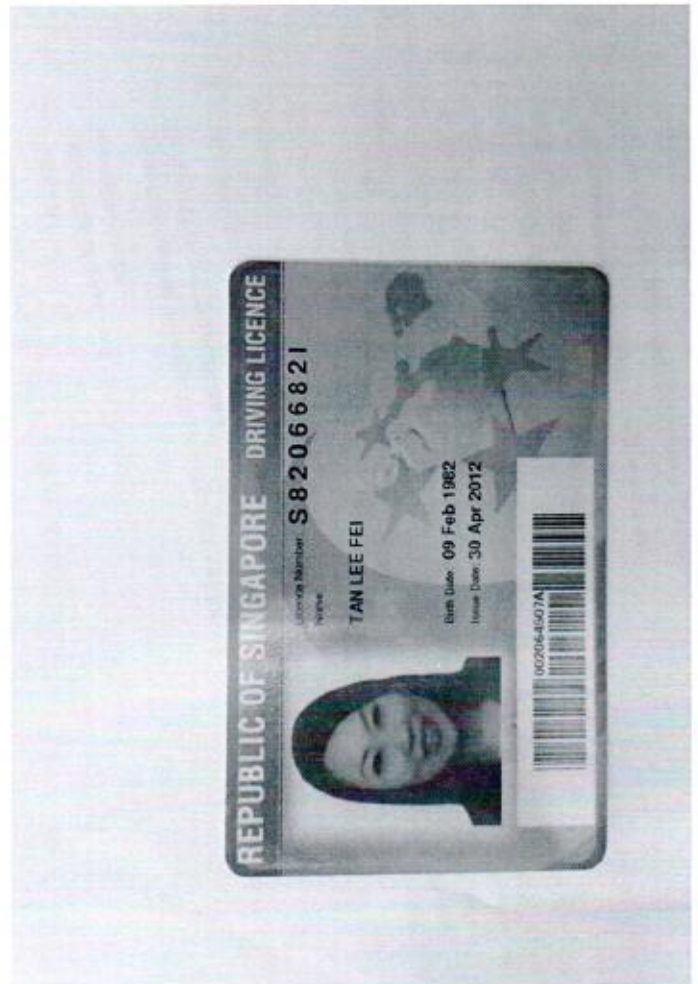
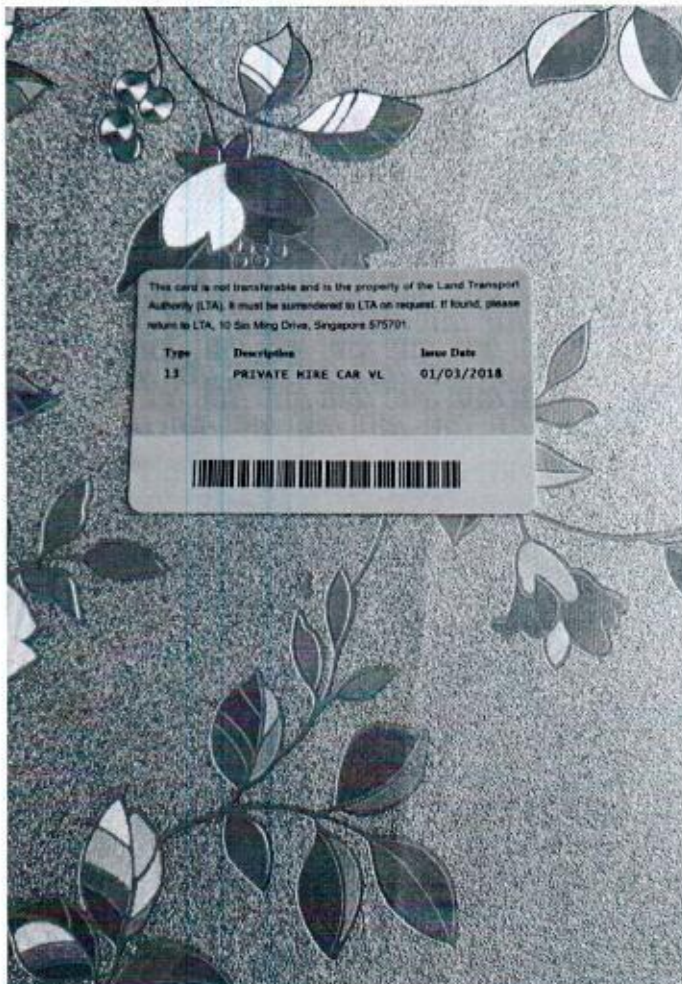
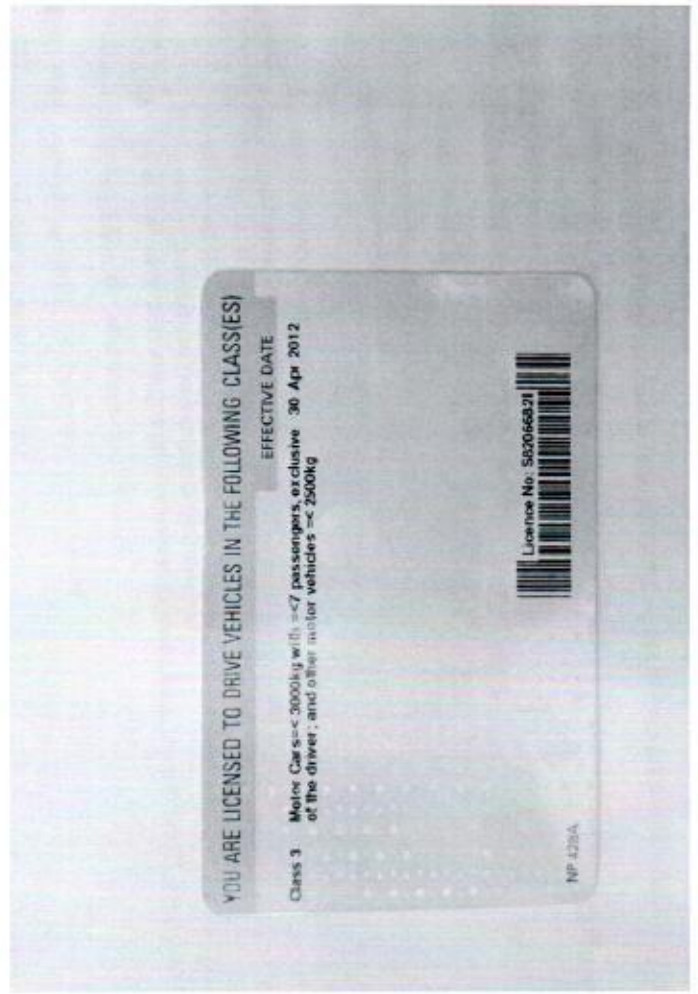
Date of issue

09-02-2012

APT BLK 886D WOODLANDS DRIVE 50 #07-539
SINGAPORE 734886

S8206682I

11/09/2013



Hello, NAC_PAYA_UBI_800601

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

Policy Query

Policy No.

Date of Accident

11/04/2018 10:30

Vehicle No.(For Motor)

SJU4035U

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5098635927	TAN LEE FEI	S82066821	GPC	drive CLASSIC	SJU4035U	SJU4035U	08/03/2018	07/03/2019

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: 5098635927

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle

SUJ4035U

Chassis Number

JF1GH3K559G034581

2. Name of Policyholder

TAN LEE FEI

3. Effective Date of Insurance

08 Mar 2018

4. Expiry Date of Insurance

07 Mar 2019

5. Persons or Classes of Persons entitled to drive#

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his/her permission.

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 for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

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

(b) Use for the carriage of goods (other than samples) in connection with any trade or business.

(c) Use for any purpose in connection with the Motor Trade.

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.

EXCESS (SECTION 1)	: S\$2,000
EXCESS (SECTION 2)	: S\$1,500
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: TAN LEE FEI
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: SKL AUTOMOBILE PTE. LTD.
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

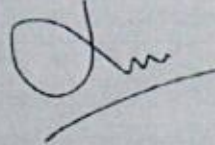
I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : LQ INSURANCE AGENCY PTE LTD (00000613125)

Date of Issue : 06 Mar 2018 16:35 hrs

LQ INSURANCE AGENCY PTE LTD
 180B BENCOOLEN STREET
 #04-01 THE BENCOOLEN
 SINGAPORE 150048
 TEL: 6334-XXXXX FAX: 6334-0624
 Co. Reg. No: 19900550W

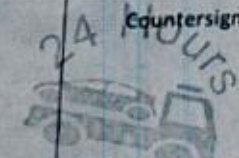
For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer

Chief Executive



6444-2555

Claim Handling

Accident MT/0990007

Policy No.	5098635927	Vehicle No.	SJU4035U	GST Registration No.	
Policyholder Name	TAN LEE FEI	Cover Type	drive CLASSIC	Policyholder NRIC	S82066821
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)	0	Loading	0
Contact No.(Mobile)	96509599	Special Remark		Contact No.(Home)	0
Email Address		TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode	No
KFK	<input type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No			Private Hire	Yes
▼ Accident Details					
Report Date	12/04/2018 09:15	Accident Report Within 24 hrs	Yes	Accident Type	Chain Collision
Date of Accident	11/04/2018	Time of Accident hh:mm	10:30	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	SLE TWOS CTE B4 MANDAI EXIT				
▼ Benefits					
▼ Excess					
Own damage Excess	2,000.00	Additional Excess	0.00	Windscreen Excess	1
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	2,000.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		
▼ GST Registered Information					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History					
▼ Policyholder Mailing Address					
Address 1	BLK 886D #07-539	Address 2	WOODLANDS DRIVE 50	Address 3	SINGAPORE 734886
Address 4		Address Type	Singapore address	Post Code	734886
Unit No.		Related Policy Number	5098635927		
▼ O1 Driver Info					
Driver Name	TAN LEE FEI	Driver Type	Main Driver	Driver DOB	09/02/1982
Unnamed driver Name		Driver NRIC	S82066821	Driving Experience	5
Register Date of Driver License	30/04/2012	Driver Age	36	Contact No.(Home)	0
Contact No.(Mobile)	96509599	Contact No.(Office)	0	Address 3	SINGAPORE 734886
Address 1	BLK 886D	Address 2	WOODLANDS DRIVE 50	Post Code	734886
Address 4		Address Type	Singapore address		
Unit No.	#07-539			Driver Insurer Company	
Does he own a Singapore Registered car?	Yes <input type="radio"/> No <input type="radio"/>	Driver Vehicle No.			
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any Injury?	<input type="radio"/> Yes <input type="radio"/> No		
Modification History					

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	TAN LEE FEI	Insured NRIC	S82066821
Contact No.(Mobile)	96509599	Contact No.(Home)		Contact No.(Office)	
Email Address		O1 Vehicle Number	SJU4035U	TP Vehicle Number	SLP6586K
Claim Description	SJU4035U / SLP6586K ON 11 Apr 2018				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	12/04/2018 09:22	Claim Close Date		Date Received	12/04/2018 00:00
Report Taken By	ROSILINDA	Workshop Repairer		Total Loss but Repaired	
<input checked="" type="checkbox"/> Print AK letter					
<div>Save</div> <div>Submit</div>					

Attachment

Accident No.	MT/0990007	Claim No.	001			
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	12/04/2018 00:00			
Path *		Category *	Confidential	Urgency *	Descr	
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

Choose File No file chosen





Choose File No file chosen

Message Read

Clear	Please Select	NO	Normal	
Clear	Please Select	NO	Normal	
Clear	Please Select	NO	Normal	

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Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Apr 2018 09:20	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-4-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Apr 2018 09:20	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-4-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Apr 2018 09:20	SAS	Normal	SAS 2018-4-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Apr 2018 09:20	Photos	Normal	Photos 2018-4-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Apr 2018 09:20	Photos	Normal	Photos 2018-4-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Apr 2018 09:20	Photos	Normal	Photos 2018-4-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Apr 2018 09:19	Photos	Normal	Photos 2018-4-12
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Apr 2018 09:19	Photos	Normal	Photos 2018-4-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Apr 2018 09:19	Photos	Normal	Photos 2018-4-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Apr 2018 09:18	Photos	Normal	Photos 2018-4-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Apr 2018 09:18	Photos	Normal	Photos 2018-4-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Apr 2018 09:18	Photos	Normal	Photos 2018-4-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Apr 2018 09:18	Photos	Normal	Photos 2018-4-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Apr 2018 09:18	Photos	Normal	Photos 2018-4-12
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Apr 2018 09:18	Photos	Normal	Photos 2018-4-12

Video List

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