11 11 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Jcb description	Date & Time Completed	Done by	
Date In 11/04/2018 15:42		- 1		
Res No NA/INC18006692 K4	SAS e-filing			-
Veh No SGT9390B	E-mail (within 8hrs, AIC 2hrs)		N. I. I. I. I.	17-2
DOA 11/04/2018 14:15	i-Motor Claim Form	mt/0989983	1114/18	(1,)
OD TP Reporting Only	i-Motor W/O (Within: OD 2	thrs. TP 4hrs)		18 72
OD / TP : Reporting Only	i-Photo Uploaded			
TP Insurer:	Assessment/Survey Report			
TP Illisuro	Ass't Report by Fax / Han			
Preferred Wksp / INC Assign Wksp / QW: (701.	ax:)
TP Particulars: Veh No: 5	CB 4904A . INC	()/ Non-INC ()		
Owner / Driver: (Tel:		
Policy No: () Perio) Cover Type: (
Confirmed by : (Date:	Time:	r.00/.1	
The state of the s		-20%; P: 21-79%. F: 80-1	90%]	
Tear of respondent				
Excess: (\$) Loading: \$1,000	7 ()7 \$2,000 ()	15-927/2011 VERN ENT		
General Remarks:-	· · · · · · · · · · · · · · · · · · ·	A-14 - 14 - 14 - 14 - 14 - 14 - 14 - 14		
() Walk-In Customer: Customer's inform		Strictly 110 15to d. tops.		
() Total Loss Case : to e-mail Insurer		; Towing Co. ()
Drive-In () / Towed-In (); Invoice:	YES()/NO()	, towing co. (
Remarks:- (INC horline: 6788 6616)		Date&Time Completed	Done b	У
1) Apply for Transport Allowance ()/ Co	urtesy Car ()			
2) QC Check / Post Repair Inspection	()			
3) Upload Resurvey Photo [Repair Cost > \$30	00] ()			
Injury:				
	Samuella area cross de la saci			
Date/Time Actions	i Cap Serigi di di di desemble di Serie	pgy#55 x53400;81 x582.41-37 56665.52 x	CARREST	
	The state of the s			
~NA 1803	258 Invoice	Preparation Checklist	Anit (S)	Amt (5)
	1) AR : Acc	ident Reporting (\$30);	Anit (S)	
	1) AR : Acc 2) DA : Dar	ident Reporting (\$30); mage Assessment (\$100); INC (\$	lst Bill	
Claimant's Particulars :-	1) AR : Acc 2) DA : Dar 3) TF : Tow 4) FT : Foll	ident Reporting (\$30); usge Assessment (\$100); INC (\$30); ing Fee \$30 ow-Through Survey	1st Bill 30) 60/543 \$120	
Claimant's Particulars :- Oriver/Owner:	1) AR : Acc 2) DA : Dar 3) TF : Tow 4) FT : Foli 5) FT : Foli For claim	ident Reporting (\$30); nage Assessment (\$100); INC (\$100); INC (\$20); ing Fee S4 ow-Through Survey ow-Through Survey (Resurvey) ing against INC Only (wef 10 Jan 200)	. 1st Bill 180) 10/545 \$120 \$30 15)	
Claimant's Particulars :- Oriver/Owner: Contact No:	1) AR : Acc 2) DA : Dar 3) TF : Tow 4) FT : Foli 5) FT : Foli For claim 6) TR : Re-	ident Reporting (\$30); nage Assessment (\$100); INC (\$100); INC (\$20); ing Fee S4 ow-Through Survey ow-Through Survey (Resurvey) ing against INC Only (wef 10 Jan 200) inspection	1st Bill 180) 10/\$45 \$120 \$30	
Claimant's Particulars :- Oriver/Owner: Contact No:	1) AR : Acc 2) DA : Das 3) TF : Tow 4) FT : Foll 5) FT : Foll For claim 6) TR : Re- 7) N1 : Idac 8) NTUC A	ident Reporting (\$30); nage Assessment (\$100); INC (\$100); INC (\$20); ing Fee S4 ow-Through Survey ow-Through Survey (Resurvey) ing against INC Only (wef 10 Jan 200)	. 1st Bill 1800 10/345 5120 \$30 15) \$75	
Claimant's Particulars :- Driver/Owner: Contact No: Damaged Portion:	1) AR : Acc 2) DA : Das 3) TF : Tow 4) FT : Foll 5) FT : Foll For claim 6) TR : Re- 7) N1 : Idac 8) NTUC A	ident Reporting (\$30); nege Assessment (\$100); INC (\$30); ing Fee \$40 ow-Through Survey ow-Through Survey (Resurvey) ing against INC Only (wef 10 Jan 200 inspection DA + SMRT Survey	1st Bill 1st Bi	
Claimant's Particulars :- Driver/Owner: Contact No: Damaged Portion: QC Checked by (Engr-In-Charge):	1) AR : Acc 2) DA : Das 3) TF : Tow 4) FT : Folio 5) FT : Folio For claim 6) TR : Re- 7) N1 : Idac 8) NTUC A OD.* *N5: Coo *N6: Re-	ident Reporting (\$30); nage Assessment (\$100); INC (\$30); ing Fee See ow-Through Survey (Resurvey) ow-Through Survey (Resurvey) ing against INC Only (wef 10 Jan 200) inspection DA + SMRT Survey dditional Services; artesy Car / Tpt Allowance bair Co-ordination	1st Bill 1st Bi	
Claimant's Particulars :- Driver/Owner: Contact No: Damaged Portion:	1) AR : Acc 2) DA : Das 3) TF : Tow 4) FT : Folio 5) FT : Folio For claim 6) TR : Re- 7) N1 : Idac 8) NTUC A OD* *N5: Cw *N6: Re- *N7: Foc *N8: DV	ident Reporting (\$30); nage Assessment (\$100); INC (\$30); ing Fee See ow-Through Survey (Resurvey) ow-Through Survey (Resurvey) ing against INC Only (wef 10 Jan 200) inspection DA + SMRT Survey dditional Services; outcay Car / Tpt Allowance to air Co-ordination It Repair Inspection / Collect Excess Coordination	\$30) \$007345 \$120 \$30 \$55 \$160 \$5 \$10 \$25 \$5	
Claimant's Particulars :- Oriver/Owner: Contact No: Damaged Portion: QC Checked by (Engr-In-Charge):	1) AR : Acc 2) DA : Das 3) TF : Tow 4) FT : Folio 5) FT : Folio For claim 6) TR : Re- 7) N1 : Idac 8) NTUC A OD* *N5: Cw *N6: Re- *N7: Foc *N8: DV	ident Reporting (\$30); mage Assessment (\$100); INC (\$30); ing Fee \$40 ow-Through Survey (Resurvey) ow-Through Survey (Resurvey) ing against INC Only (wef 10 Jan 200) inspection DA + SMRT Survey dditional Services: artesy Car / Tpt Allowance oair Co-ordination It Repair Inspection / Collect Excess Coordination): TP (Nora INC) against INC	\$30) \$10/345 \$120 \$30 \$55 \$160 \$5 \$10 \$25	
Claimant's Particulars :- Oriver/Owner: Contact No: Damaged Portion: OC Checked by (Engr-In-Charge): Auditors' Comments :-	1) AR : Acc 2) DA : Dar 3) TF : Tow 4) FT : Foll 5) FT : Foll For claim 6) TR : Re- 7) N1 : Idac 8) NTUC A OD* *N5: Co *N6: Rej *N7: Foll *N8: DV TP (N1)	ident Reporting (\$30); Inage Assessment (\$100); INC (\$100); Ing Fee See See See See See See See See See	\$30) \$00/\$45 \$120 \$30 \$35 \$75 \$160 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5 \$5	

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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.
- Any false reporting may be referred to the Police for investigation.
- 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, 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:
 - 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.

UEN: 53362199B

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

Nam

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

Policyholder's Signature Date & Time:

Date & Time:

GEYLANG EAST AVENUE 2 TOWARDS CHEYLANG EAST CENTRAL.

SKETCH PLAN	and the second s
A - SGT 9390B	The state of the s
B- SIEB 4904 A	
	GOYLANG EAST AVENUE 2
Feb. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
DESCRIBE CIRCUMSTANCES OF THE ACC	IDENT
I was oldiving Man GI	FYLANG EAST AVENUE 2 TOWARDS GEYLANG EAST CENTRAL.

I was	driving along GEYLANG EAST AVENUE 2 TOWARDS GEYLANG EAST CENTRAL,
Somentere	before GEYLANG EAST CENTRAL X- JUNCTION, I was Stationary
Stopen	due to red light truttic. Suddenly, I felt an impact that
the read	due to red light trustic. Suddenly, I felt an impact that and I aliqued. I realised Neh (B) front portion collided to
my vehic	ite and damaged my vehicle new portion. Threfore, we exclude
porticulars	

DECLARATION

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

LHP SERVICES UEN: 53362199B

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

NRIC/FIN No.:

ACCOUNTING AND CORPORATE REGULATORY AUTHORITY



INCOMMATION RESOURCES

The Following Are The Brief Particulars of :

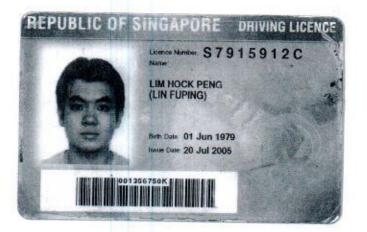
WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

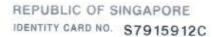
Business Profile (Business) of LHP SERVICES (53362199B)

Date: 08/05/2017

lame of Business		LHP SERVICES			
ormer Name(s) if any					
ate of Change of Name					
egistration No.		53362199B			
egistration Date		08/05/2017			
ommencement Date		08/05/2017			
tatus of Business		Live			
tatus Date		08/05/2017			
tenewal Date		E)			
xpiry Date		08/05/2018			
tenewal via GIRO		: NO			
onstitution of Business		Sole-Proprietor			
rincipal Place of Business		119 POTONG PAS #09-1020 SINGAPORE (350			
ate of Change of Address		2			
rincipal Activities					
ctivities (I)		PASSENGER LAN	D TRANSPORT N.E.C. (EG (49219)	PRIVATE CARS FOR HIRE	WITH OPERATO
escription		49219			
ctivities (II)		1			
escription		:			
articulars of Authorised	Representati	ve(s)			
lame	ID	Nationality	Address	Address Source	Date of Appointment
xisting Sole-Proprietor(s) / Partner(s)				
lame	ID	Nationality/Place of		Address Source	Date of Entry
		incorporation/Origin		Source	Position

THIRD PARTY Third Party / Fire /Theft
CHEYLANG EACH AVENUE 2 TOWARDS GRELLAND EACH CENTRAL IN PERSONNEL USE. LHP SERVICES /P: 9023 2227 Home: Office: 5336219913 IN Dotong Pasir Avenue 1 #09-1020 S(350119) D (THIRD PARTY) REPORTING ONLY NTUC
CHEYLANG TERM AVENTIC 2 TOWARDS GRYLAND EAST CENTRAL IN PERSONNEL USE. LHP SERVICES /P: 9023 2227 Home: Office: 5336219913 IN Dotong Pasir AVENUE 1 #09-1020 S(350119) D (THIRD PARTY) REPORTING ONLY NTUC
LHP SERVICES + /P: 9023 2227 Home: Office: 5336 219913 119 Dotong Pasir AVENUE 1 #09-1020 S(350119) D (THIRD PARTY) REPORTING ONLY NTUC
LHP SERVICES /P: 9023 2227 Home: Office: 5336 219913 119 Dating Pasir AVENUE 1 #09-1020 S(350119) D (THIRD PARTY) REPORTING ONLY NTUC
/P: 9023 2227 Home: Office: 5336 219913 119 Datong Pasir AVENUE 1 #09-1020 S(350119) D (THIRD PARTY) REPORTING ONLY NTUC
D (THIRD PARTY) REPORTING ONLY NTUC
D THIRD PARTY REPORTING ONLY
NTUC
omprehensive Third Party Third Party / Fire /Theft
5/9/04/200
s Above If No, LIM HOCK PENG
ST915912 Any Passengers: 1 (MALE)
010611979
Outdoor / Indoor
20/10/2003 Nale / Female
11.
The Joseph Company of the Company of
lo, If yes, Reg No.
Imployee, If no, state OWER
Clear Raining Other
Ory Wet Other
No, If Yes, Who?
7
No, If Yes, Where? SKB 4904 A Any Passengers: NZL
SKB 4904 A Any Passengers: WZL Contact No.: 9009 8254
Contact No.
Any Passengers :
Any Passengers : Any Passengers :
Any Passengers :
Any Passengers :
Witness Contact :
Yes (No)
) / I









Name

LIM HOCK PENG (LIN FUPING)

林福

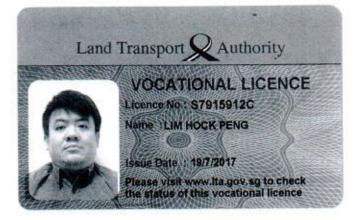
CHINESE

te of birth Ser

01-06-1979 M

Country of birth
SINGAPORE

579159120







This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type Description

02

TAXI VL

Issue Date 19/07/2017





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)

Cover : drivo CLASSIC Certificate Number: 5091004200

1. Index mark and Registration Number of Vehicle

Chassis Number

2. Name of Policyholder

3. Effective Date of Insurance

4. Expiry Date of Insurance

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.

: SGT9390B

: RN61025606

: LHP SERVICES

: 12 May 2017

: 11 May 2018

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.

: \$\$2,000 EXCESS (SECTION 1) : \$\$1,500 EXCESS (SECTION 2) : \$\$100 WINDSCREEN EXCESS : N/A ADDITIONAL EXCESS : PLEASE REFER OVERLEAF UNNAMED DRIVER EXCESS - NO REPAIR AT OWNER'S PREFERRED WORKSHOP : YES INSURE WITH COE : NO NCD PROTECTION · NO TRANSPORT ALLOWANCE : NO EXCESS WAIVER : N/A PRIMARY DRIVER - N/A NAMED DRIVER (1) : 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)

: WAH SOON HENG VEHICLE TRADING

: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

Agency

: WAH SOON HENG VEHICLE TRADING (00000570909)

Date of Issue

NAMED DRIVER (2)

SUM INSURED

HIRE PURCHASE COMPANY

: 12 May 2017 09:58 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

Continue

eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI	_800601					3.	Change Lan	guage '	Change Passwor	d · Log Out
My Desktop	Polic	cy Query								
Notice of Loss	Policy N	lo.				Date of Ac	cident	11/04/2	2018 14:15	
	Vehicle	No.(For Motor)	SGT9390B							
						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
		5091004200	LHP SERVICES	53362199B	GPC	drive CLASSIC	5GT9390B	SGT9390B	12/05/2017	11/05/2018

Policyholder Policyholder 53362199B LHP SERVICES 5091004200 Policy No. NRIC Name BLK 119 #09-1020 POTONG PASIR AVENUE 1 SINGAPORE 350119 Address Group Product Plan N PRIVATE CAR INSURANCE Policy Flag Name Policy Effective Expiry Date 11/05/2018 23:59 12/05/2017 00:00 issue 12/05/2017 Date Date Own Third Windscreen 100 damage 2000 1500 Party Excess Excess Excess os Additional 0 Premium Excess Outside Outside Singapore Singapore 2000 1500 OD TP Excess Excess GST Flag Y WAH SOON HENG VEHICLE TRA Agent Tel. NIL Agent Coinsurance No Flag Open Policy Info Certificate Info Policyholder Mailing Address POTONG PASIR AVENUE 1 Address 3 SINGAPORE 350119 Address 2 Address 1 BLK 119 #09-1020 Address Post Code 350119 Singapore address Address 4 Type Related Policy 5091004200 Unit No. 09-1020 Number Insured Object: SGT9390B **▽** Endorsements

Sequence Date of Endorsement Endorsement Type Endorsement Status Endorsement Content

Continue Cancel

Claim Handling(accident reporting Claim Task 001 OD-MX) 4/11/2018 Claim Handling Accident MT/0989983 GST Registration No. Vehicle No. SGT9390B Policy No. 5091004200 Policyholder NRIC 5330 LHP SERVICES Policyholder Name Loading 0 drivo CLASSIC PRIVATE CAR INSURANCE Cover Type Product Code Contact No.(Home) Contact No.(Mobile) 90232227 Contact No.(Office) eCode No Special Remark Email Address eCode Reason . No Yes No Yes TCA Private Hire Yes NCD Entitlement(%) 0 NCD Protection No Accident Details Accident Type Colli Accident Report Within 24 hrs 11/04/2018 17:27 Yes Report Date Sing Country of Accident Time of Accident hh:mm 14:15 Date of Accident 11/04/2018 ICM No. Orange Force Reporting Centre Accident Location GEYLANG EAST AVE 2 TWDS GEYLANG EAST CENTRAL **▽** Benefits **♥** Excess Additional Excess 0,00 Windscreen Excess 2,000,00 Own damage Excess 2,000.00 Outside Singapore OD Excess Linnamed Driver Excess Outside Singapore TP Excess 1,500.00 1.500.00 Third Party Excess GST Registration Date No GST Status Verified No GST Registration No. Modification History Policyholder Mailing Address Address 3 SING Address 2 POTONG PASIR AVENUE 1 Address 1 BLK 119 #09-1020 350 Post Code Address Type Singapore address Address 4 Related Policy Number 5091004200 09-1020 Unit No. Unnamed Driver Driver Name Unnamed Driver Driver Type Driver DOB 01/0 Driver NRIC 57915912C Unnamed driver Name LIM HOCK PENG (LIN PUPING) Driving Experience 14 Register Date of Driver License 20/10/2003 Driver Age 38 Contact No.(Office) Contact No.(Home) 0 Contact No.(Mobile) 90232227 Address 2 ANCHORVALE CRESCENT Address 3 Address 1 BLK 338A Post Code 541 Address Type Singapore address Address 4 #08-87 Does he own a Singapore Registered car? Driver Insurer Company Driver Vehicle No. Yes - No Declaration Breathalyser or Blood Test Reading? Yes No Any injury? Modification History Claim 001 OD-MX 5330 7 Insured Name LHP SERVICES Insured NRIC OD-MX Claim Type * Contact No.(Office) Contact No.(Home) Contact No.(Mobile) NIL TP Vehicle Number SKB OI Vehicle Number SGT9390B Email Address Name of Preferred Workshop Claim Description SGT9390B / SKB4904A ON 11 Apr 2018 Preferred Workshop Contact Insured Liability * Not at Fault * GIA report Rec Preferered Repair Option Preferred Workshop, Name unknown Require Finalisation Date Received 11/0 Claim Close Date 11/04/2018 17:37

Workshop Repairer

Save Submit

http://giclaim.income.com.sg/gcs/icm/eclaim/claimantSave.do

KRISHNASAMY

Date Registered

Report Taken By Print AK letter

Attachment

Total Loss but Repaired

Accident No.

MT/0989983

Claim No.

Last Doc. Received

Yes No

Upload Date

11/04/2018 17:35

		Path *
Choose File	No file chosen	
Choose File	No file chosen	
Choose File	No file chosen	
Choose File	No file chosen	
Choose File	No file chosen	
Choose File	No file chosen	
Message Read		

	Category *		Confide	ential	Urgency	*
Clear	Please Select	•	NO		Normal	
Clear	Please Select	٠	NO	*	Normal	-
Clear	Please Select	Ψ.	NO		Normal	- 8
Clear	Please Select	*	NO	*	Normal	
Clear	Please Select	*	NO	•	Normal	-
Clear	Please Select	•	NO	•	Normal	

100		taci	hen	ant	- 1	ict
100	AL	LaC.	nm	em		121

Video List	Uploaded By/Date	Folder Date	File Name		9	Source
Widee List		Apr 2018 17:34	ODVESTO		52203120	
	NAC_PAYA_UB1_800601	(NATIONAL ASSESSMENT CENTRE SERVICES) on 11	Photos		Normal	Photos 2
	NAC_PAYA_UBI_800601	(NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 17:34	Photos		Normal	Photos 2
	NAC_PAYA_UBI_B00601	(NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 17:34	Photos		Normal	Photos 2
C	NAC_PAYA_UBI_800601	(NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 17:34	Photos		Normal	Photos :
***	NAC_PAYA_UB1_800601	NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 17:34	Photos		Normal	Photos
1	NAC_PAYA_UB1_800601	NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 17:34	Photos		Normal	Photos
D	NAC_PAYA_UBI_800601	NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 17:35	Photos		Normal	Photos
	NAC_PAYA_UBI_800601	NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 17:35	Photos		Normal	Photos
95	NAC_PAYA_UBI_800601	NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 17:35	Photos		Normal	Photos
	NAC_PAYA_UBI_800601	NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 17:35	Photos		Normal	Photos :
J	NAC_PAYA_UBI_B00601	NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 17:35	Photos		Normal	Photos :
宣	NAC_PAYA_UBI_800601	NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 17:35	Photos		Normal	Photos 2
E.	NAC_PAYA_UBI_800601	NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 17:35	Photos		Normal	Photos 2
702	NAC_PAYA_UBI_800601	NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 17:35	Photos		Normal	Photos 2
60	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 17:36	SAS		Normal	SAS 20
NoN Thed	NAC_PAYA_UBI_800601	NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Apr 2018 17:37	NRIC/ Driving License		Normal	NRIC/ Driving Li
ttachment		Uploaded By/Date	Category	9	Urgency	Descr

Display in New Window Scan and uploading