

# NATIONAL Assessment Centre Services. [wef 1 Jan'05] MNA118089247

Date In: 11/2/18-12:16	Job description	Date & Time Completed	Done by
Ref No: NA/INC 10265674	SAS e-filing		
Veh No: JAS787L	E-mail (within Shrs, AIC 2hrs)		
D.O.A: 10/2/18-14:45	i-Motor Claim Form	M7/1007604-201	11/2/18 17:51
OD: TP Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (	Tel:	Fax:
TP Particulars:	Veh No: J1K4714X	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: (INC hotline: 6788 6616)	Date & Time Completed	Done by
1) Apply for Transport Allowance ( ) / Courtesy Car ( )		
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

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

Date/Time	Actions

NA1804387	<b>Invoice Preparation Checklist</b>	Am't (\$) Int Bill	Am't (\$) Add Bill
Claimant's Particulars :-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	4) FT: Follow-Through Survey \$120		
	5) FT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
QC Checked by (Engr-In-Charge):	ON*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
Auditors Comments :-	TP (N11): TP (N-in INC) against INC \$20		
Dat. 1:	9) N12: Idao Mobile 30		
Dat. 2 / 3:	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	11/07/2018 10:16
Date Of Accident	10/07/2018 19:45
Exact Location Of Accident	PIE (CHANGI) BEFORE JALAN EUNOS EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJA8787L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN GUANG YONG, GENESIS
NRIC No	S9406481C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96507000
Alternative Phone No	OFFICE-96507000

### Vehicle Particulars

Manufacturer	JAGUAR
Model	XE 2.0 I4D TSS
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5096279234
Cover Note Number	

### Driver

Name of Driver	TAN GUANG YONG, GENESIS
NRIC No	S9406481C
Date Of Birth	21/02/1994
Occupation	INDOOR
Date Of Driving Pass	29/07/2013
Driving Experience	4 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96507000
Fax Number	
Contact Number	OFFICE-96507000
Email Address	NOEMAIL

Address	28 FLORA DRIVE #06-59 FERRARIA PARK
Postcode	506951
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	4
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: : - GENDER: : MALE

#### 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

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?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJK4714X
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)	2

Passenger 1

NAME: :

GENDER: :

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKL9233S  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver) 1

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SLS1847A  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver) 1

#### DETAILS OF INJURED PERSON 1

Name TAN GUANG YONG, GENESIS  
Approximate Age  
Injuries Sustain BODY  
Injured person in which vehicle? SJA8787L  
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:

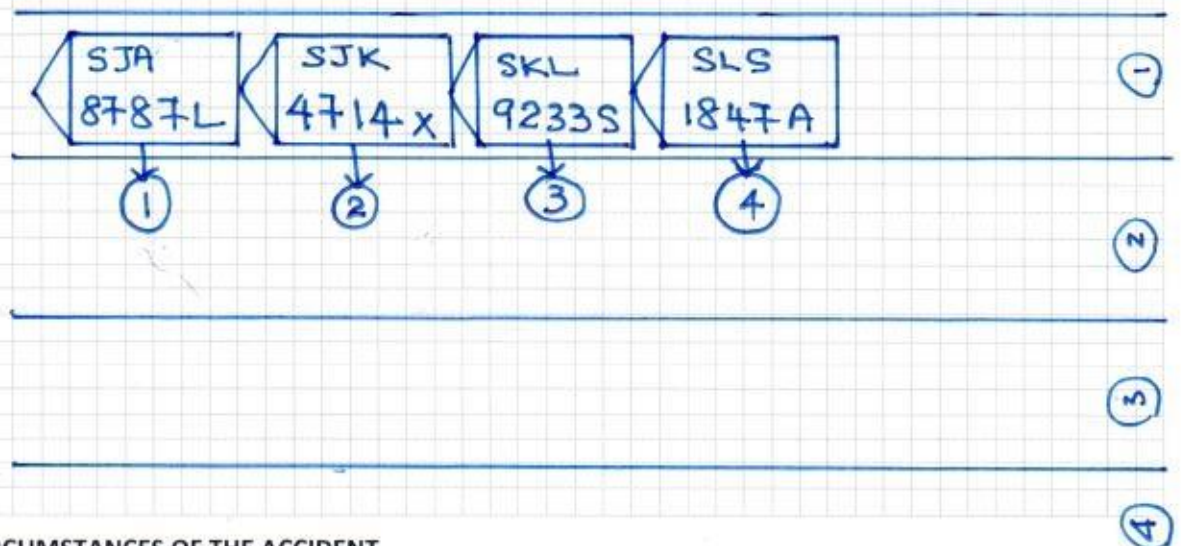
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

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

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON THE 10<sup>TH</sup> JULY 2018 as I was travelling on PIE towards Changi Airport b/t Jalan Eunos at 7.45pm the vehicle in front of me slow down and I follow said suddenly without warning I hear a loud noise from behind.


The vehicle behind me had hit my vehicle and there were 4 cars collision.

I have my body not feeling well after the accident.

## DECLARATION

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

x   
Policyholder's Signature  
Date & Time: 10/07/18

x   
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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



Date of Accident : 10/7/18 Accident Time: 1945 21:55 (24-HR-Format)  
Accident Place : PIE (chang) before Jalan Tunas Bx.f  
Vehicle. No. (Car Plate No.) : 5JA8787L Make/Model: \_\_\_\_\_  
Insurance Company : NTUC Policy No: 5096279234  
Owner or Company Name /IC No. : Tan Guan Yang, Genesis  
Owner or Company Contact No. : 96507000 Owner's Hp \_\_\_\_\_ Company Tel \_\_\_\_\_  
DRIVER'S Name / IC No. : As above  
DRIVER'S Date Of Birth : 21/2/1994 DRIVER'S License Pass Date 29/7/2013  
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: owner  
DRIVER'S Address : 28 Ploeg Drive #06-59 (506951)  
DRIVER'S Contact No./ Alt No. : 1) \_\_\_\_\_ 2) \_\_\_\_\_  
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)  
Email Address : \_\_\_\_\_  
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET  
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance  
Number of Passengers (Including Driver): 2 (m)  
Was there any video Captured by car camera: YES \ NO  
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose  
Any Injury (If YES, Pls state): Body

**Other Party Driver's Particular (if any)**

Vehicle. No: 51C4714X (B)	Vehicle. No: SKL92335 C1
Vehicle Make\Model: _____	Vehicle Make\Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

(D) SL51847A

\* NEW - Passenger's name & gender:

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S9406481C



Name

TAN QUANG YONG, GENESIS

陈光荣

Race

CHINESE

Date of birth

21-02-1994

Sex

M

Country/Place of birth

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S9406481C

Name:

TAN QUANG YONG, GENESIS

Birth Date: 21 Feb 1994

Issue Date: 29 Jul 2013



NRIC No. S9406481C



Date of issue

03-11-2014

28 FLORA DRIVE #08-58  
FERRARIA PARK SINGAPORE 608051  
NRIC No: S9406481C

Date: 14/11/2017

5383345

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS

EFFECTIVE DATE

Class 2B Motorcycles <= 200 CC  
Class 2 Motor cars <= 3000 kg with <= 7 passengers, exclusive of the  
driver, and motor tractors/vehicles <= 2500 kg

05 Jun 2017

29 Jul 2013

S9406481C

S / No. 9000300591

NP 428A





eBaoTech

GeneralClaim

Hello, NAC\_PAYA\_UBI\_800601

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

## Policy Query

Policy No.  Date of Accident

Vehicle No. (For Motor)

Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5096279234	TAN GUANG YONG, GENESIS	S9406481C	GCV	Preferred Workshop Plan	SJA8787L	SJA8787L	27/11/2017	26/11/2018

Policy Information					
Policy No.	5096279234	Policyholder Name	TAN GUANG YONG, GENESIS	Policyholder NRIC	S9406481C
Address	28 FLORA DRIVE #06-59 FERRARIA PARK CONDOMINIUM SINGAPORE 506951				
Product Name	COMMERCIAL VEHICLE INSURAI Plan	Group Policy Flag	N		
Policy issue Date	27/11/2017	Effective Date	27/11/2017 00:00	Expiry Date	26/11/2018 23:59
Excess Type		All Claim Excess			
Third Party Excess	2000	Own damage Excess	2000	Windscreen Excess	100
Additional Excess		OS Premium	0		
Outside Singapore OD Excess		Outside Singapore TP Excess		Young/Inexperience Driver Excess	
Agent	GRABCAR PTE. LTD.	Agent Tel.	65703925	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					
Policyholder Mailing Address					
Address 1	28 FLORA DRIVE	Address 2	#06-59 FERRARIA PARK CONDC	Address 3	SINGAPORE 506951
Address 4		Address Type	Singapore address	Post Code	506951
Unit No.	06-59	Related Policy Number	5096279234		
Insured Object: SJA8787L					
Endorsements					
Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content	
1	19/12/2017 00:00	Basic Information Endorsement	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that from 19 Dec 2017, the Vehicle Number is amended as follows: VEHICLE REGISTRATION NUMBER: SJA8787L	



- Exit.

Policy No.	5096279234	Vehicle No.	SJA8787L	GST Registration No.	
Policyholder Name	TAN GUANG YONG, GENESIS			Policyholder NRIC	59406481C
Product Code	COMMERCIAL VEHICLE INSURAN	Cover Type	Preferred Workshop Plan	Loading	0
Contact No.(Mobile)	96507000	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	<div>T4</div>
KFK	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No
<div>🔍 Accident Details</div>					
Report Date	11/07/2018 17:49	Accident Report Within 24 hrs	Yes	Accident Type	Chain Collision
Date of Accident	10/07/2018	Time of Accident hh:mm	19:45	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	PIE (CHANGI) BEFORE JALAN EUNDS EXIT				
<div>🔍 Benefits</div>					
<div>🔍 Excess</div>					
Own damage Excess	2,000.00	Additional Excess		Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	2,000.00	Outside Singapore TP Excess			
<div>🔍 GST Registered Information</div>					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified	No		
Modification History					

Address 1	28 FLORA DRIVE	Address 2	#06-59 FERRARIA PARK CONDO	Address 3	SINGAPORE 506951
Address 4		Address Type	Singapore address	Post Code	506951
Unit No.	06-59	Related Policy Number	5095275234		
<b>OT Driver Info</b>					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	TAN GUANG YONG, GENESIS	Driver NRIC	S9406481C	Driver DOB	21/02/1994
Register Date of Driver License	29/07/2013	Driver Age	24	Driving Experience	4
Contact No.(Mobile)	96507000	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	28 FLORA DRIVE	Address 2	FERRARIA PARK CONDOMINIUM	Address 3	SINGAPORE 506951
Address 4		Address Type	Singapore address	Post Code	506951
Unit No.	06-59				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	
<b>Declaration</b>					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No		
Modification History					

Claim Type *	OD-MX	Insured Name	TAN GUANG YONG, GENESIS	Insured NRIC	S9406481C
Contact No. (Mobile)	97738964	Contact No. (Home)		Contact No. (Office)	*
Email Address	omfgcagen@gmail.com	OI Vehicle Number	SDA8787L	TP Vehicle Number	SDK4714X
Claim Description	SDA8787L / SDK4714X DN 10 Jul 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	11/07/2018 17:51	Claim Close Date		Date Received	11/07/2018 00:00
Report Taken By	Jackson				
<input checked="" type="checkbox"/> Print AK letter					

Attachment

Accident No.	MT/1002604	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	11/07/2018 17:52

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

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? Action (CO)
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jul 2018 17:52	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-7-11	<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jul 2018 17:52	SAS	Normal	SAS 2018-7-11	<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jul 2018 17:52	Photos	Normal	Photos 2018-7-11	<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jul 2018 17:52	Photos	Normal	Photos 2018-7-11	<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jul 2018 17:51	Photos	Normal	Photos 2018-7-11	<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jul 2018 17:51	Photos	Normal	Photos 2018-7-11	<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jul 2018 17:51	Photos	Normal	Photos 2018-7-11	<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jul 2018 17:51	Photos	Normal	Photos 2018-7-11	<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jul 2018 17:51	Photos	Normal	Photos 2018-7-11	<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jul 2018 17:51	Photos	Normal	Photos 2018-7-11	<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jul 2018 17:51	Photos	Normal	Photos 2018-7-11	<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jul 2018 17:51	Photos	Normal	Photos 2018-7-11	<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jul 2018 17:51	Photos	Normal	Photos 2018-7-11	<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jul 2018 17:51	Photos	Normal	Photos 2018-7-11	<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 11 Jul 2018 17:51	Photos	Normal	Photos 2018-7-11	<a href="#">Edit</a>
<a href="#">Video List</a>					
Uploaded By/Date	Folder Date	File Name		Source	Action
<div>Display in new window</div> <div>Scan and uploading</div>					