

NATIONAL Assessment Centre Services

(Ref: 1 Jan 2005)

Date In: 25/07/2018 17:05	Job description	Date & Time Completed	Done by
Ref No. NA/INC18013566/K4	SAS e-filing		
Veh No. SKV4295T	E-mail (within 8hrs, AIC 2hrs)		
D.O.A. 24/07/2018 19:40	i-Motor Claim Form	MT/1004643-001	26/7/18 09:45
OD (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer:	i-Photo Uploaded		
	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No:

JMS2802

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

NA1804701

Invoice Preparation Checklist

Amf (\$)

Amf (\$)

Int. Bill

Add. Bill

1) AR: Accident Reporting (\$30);

2) DA: Damage Assessment (\$100); INC (\$80)

3) TF: Towing Fee \$40/\$45

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: Idac DA + SMRT Survey \$160

8) NTUC Additional Services:-

ON:

*N5: Courtesy Car / Tpt Allowance \$3

*N6: Repair Co-ordination \$10

*N7: Post Repair Inspection \$25

*N8: DV / Collect Excess Coordination \$5

TP (N11): TP (Non INC) against INC \$20

9) N12: Idac Mobile \$30

Invoice dated

Fee Charged

Invoice dated

Fee Charged

Claimant's Particulars:-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

at 1:

at 2/3:

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT	
Date Of Report	25/07/2018 17:05
Date Of Accident	24/07/2018 19:40
Exact Location Of Accident	SLIP ROAD TWDS PUNGGOL WAY
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKV4295T
Insured/Policyholder	
Name Of Registered Owner	ONG CHEE SEN (WANG ZHISHENG)
NRIC No	S7426087Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98231236
Alternative Phone No	OTHERS-98231236
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL 1.5X CVT
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	5094173042
Cover Note Number	
Driver	
Name of Driver	ONG CHEE SEN (WANG ZHISHENG)
NRIC No	S7426087Z
Date Of Birth	09/08/1974
Occupation	INDOOR
Date Of Driving Pass	02/07/1999
Driving Experience	19 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98231236
Fax Number	
Contact Number	OTHERS-98231236
Email Address	NOEMAIL

Address	BLK 270B PUNGGOL FIELD #15-227
Postcode	822270
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	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	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	4
Passenger 1	NAME: : NIL GENDER: : FEMALE
Passenger 2	NAME: : NIL GENDER: : FEMALE
Passenger 3	NAME: : NIL 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

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	JMS2802
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SHING BOON PIEW
NRIC/Passport Number	G7009986T
Contact Number	96888702

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
2. This Form must be **completed by the Policyholder and/or the Authorised Driver**.
3. Information provided must be as **truthful and accurate as possible**. Any wilful misrepresentation or withholding of material facts may allow insurance companies to **repudiate policy liability**.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

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

25/7/2018

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

SKETCH PLAN

← Pls Refer to the Attached

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

← Pls Refer to the Attached

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:

 25/7/2018

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

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streetdirectory.com

Punggol Way

Location of Company

Punggol Way

Map Directions

Map

Building Directory

What's Nearby

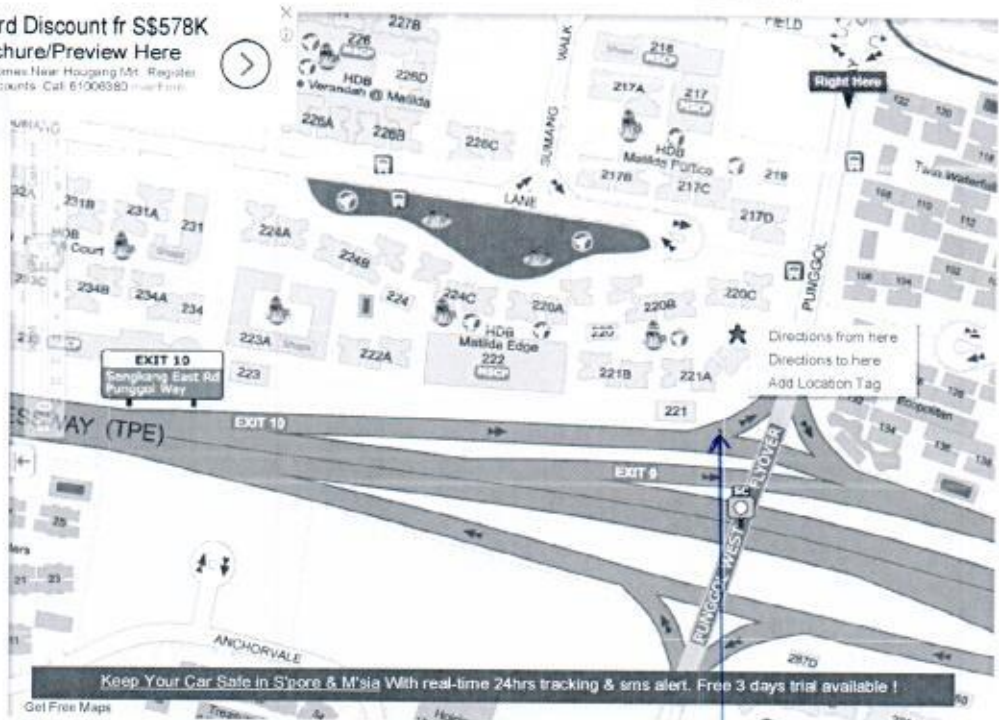
Get Tips

Getting Here



5 Things You Shouldnt Do If Hes Cheating On You

Save 10% rd Discount fr S\$578K
- E-Brochure/Preview Here
Riverfront Homes Near Hougang Mt. Regatta
Early for Discounts. Call 61006380



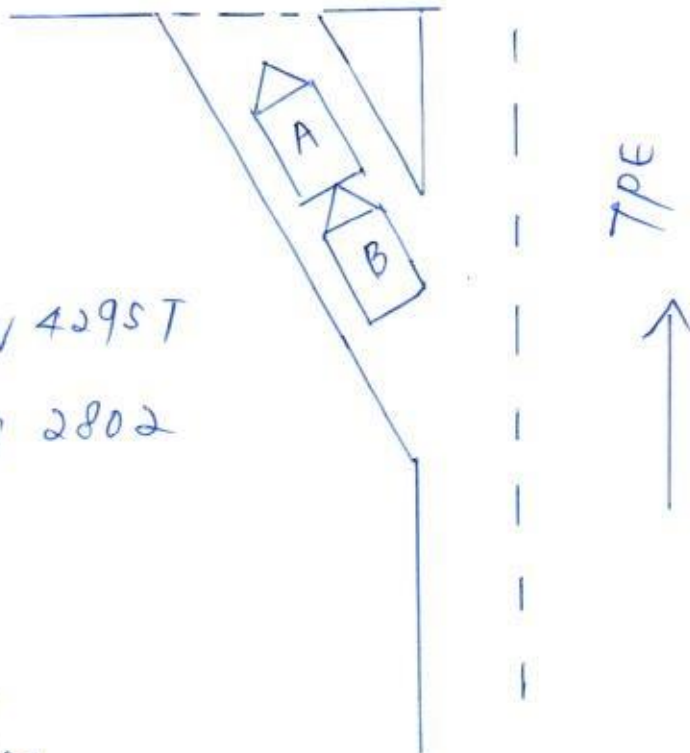
Punggol Way

Accident site

A - SKV 4295T

B - JMS 2802

Handwritten signature

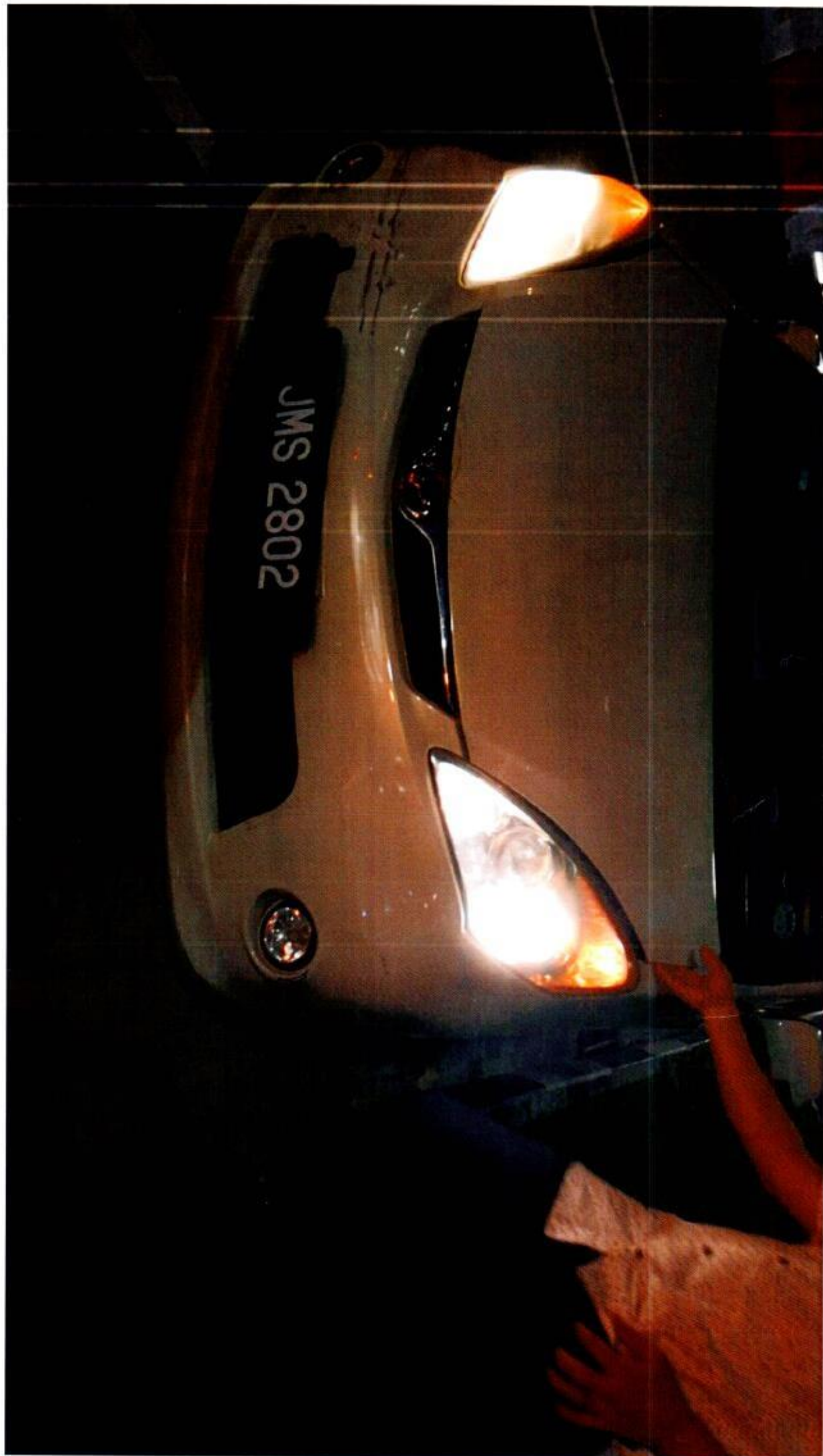


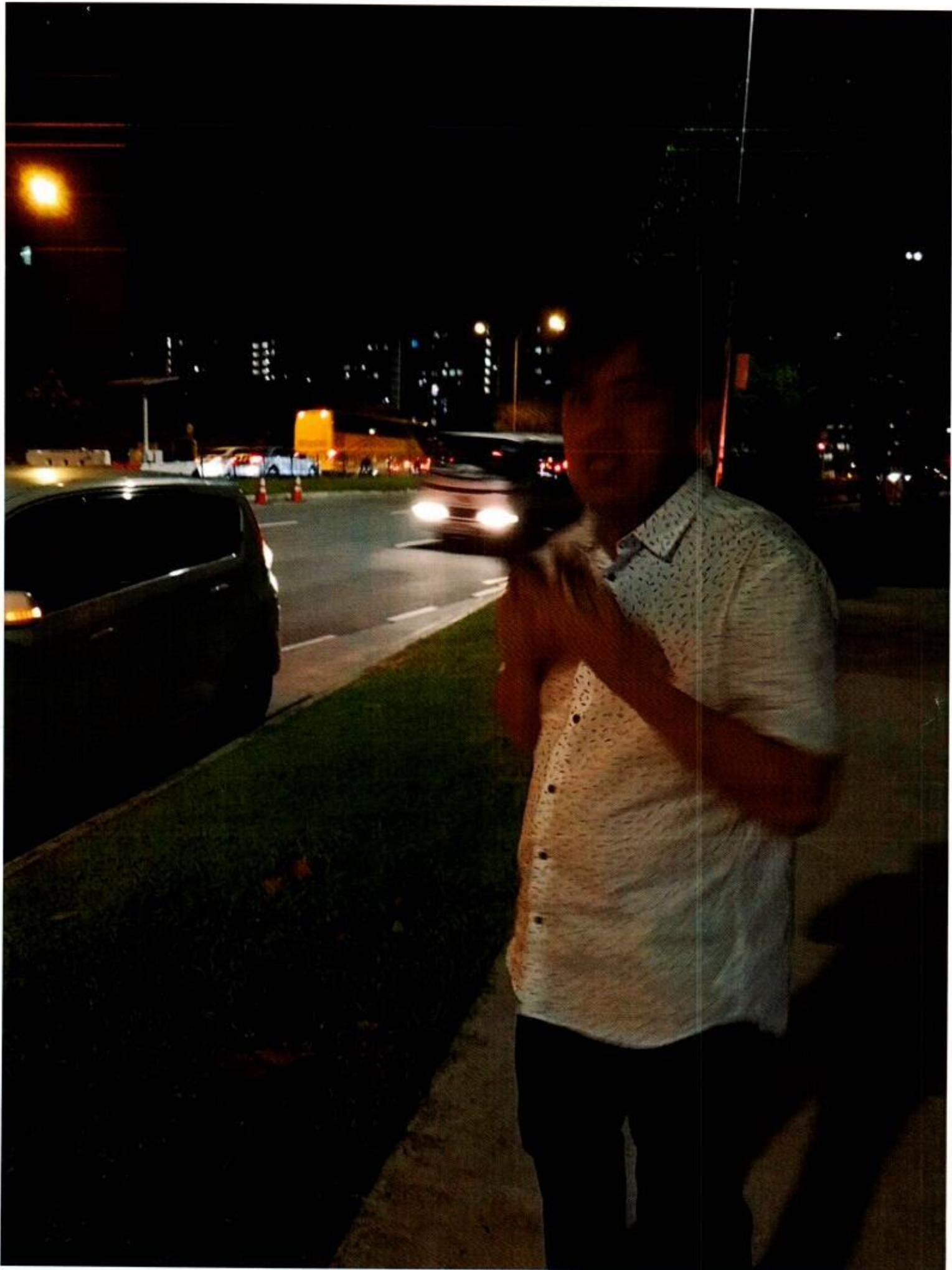
Accident Statement

On 24th July 2018, at around 1940 Hrs, I was driving my vehicle (SKV4295T) at the slip road towards Punggol Way. While waiting for oncoming vehicle to clear, suddenly a vehicle (JMS2802) hit onto the rear of my vehicle. I am making claims against third party.



Name: Ong Chee Sen
NRIC: S7426087Z







EMPLOYMENT PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer
INNOVATE INTERIOR DESIGN PTE. LTD.



Name
SHING BOON PIEW
Occupation
MANAGER

FIN
G7009986T



Date of Application
13-05-2017
Date of Issue
30-05-2017
Date of Expiry
30-05-2019



L7979150

VISIT PASS
Immigration Regulations

Name
SHING BOON PIEW



Date of Birth	Sex	Nationality
24-07-1972	M	MALAYSIAN
FIN	Date of Issue	Date of Expiry
G7009986T	30-05-2017	30-05-2019

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.



KAD PENGENALAN
MALAYSIA
IDENTITY CARD



720724-07-5127



REPRODUCTION PROHIBITED

Handwritten signature

KETUA PENGARAH
PENDAFTARAN NEGARA

720724-07-5127-05-01

(A220684)



SN: D366481443







REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7426087Z



Name
ONG CHEE SEN
(WANG ZHISHENG)
王 志 胜

Race
CHINESE

Date of birth
09-08-1974

Sex
M

Country of birth
SINGAPORE

SINGAPORE DRIVING LICENCE



Identification Number S7426087Z

ONG CHEE SEN
(WANG ZHISHENG)

Birth Date 09 Aug 1974

Issue Date 25 Jun 2003

000598137G

Barcode

NRIC No: S7426087Z



Date of issue
14-08-2004

APT BLK 270B PUNGGOL FIELD #15-227
SINGAPORE 822270
NRIC No: S/426087Z

Date: 09/09/2012

No: 7137083

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 3500 kilograms

PASS DATE
07/09/2012

NP 428A

Licence No: S7426087Z



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: 5094173042

Cover : drive CLASSIC

- | | |
|--|--------------------------------|
| 1. Index mark and Registration Number of Vehicle | : SKV4295T |
| Chassis Number | : RU11101148 |
| 2. Name of Policyholder | : ONG CHEE SEN (WANG ZHISHENG) |
| 3. Effective Date of Insurance | : 17 Sep 2017 |
| 4. Expiry Date of Insurance | : 16 Sep 2018 |

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 business or profession.

This Policy does not cover

- (a) Use for hire or reward.
(b) Use for racing, pace-making, reliability trial or speed-testing.
(c) Use for the carriage of goods (other than samples) in connection with any trade or business.
(d) 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)	: N/A
EXCESS (SECTION 2)	: N/A
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	: YES
PRIMARY DRIVER	: ONG CHEE SEN
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: HL BANK
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 : HO SEET PENG (00000573521)
Date of Issue : 14 Sep 2017 11:08 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

Hello, NAC_PAYA_UBI_800601

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

Policy No.

Date of Accident

24/07/2018 19:40

Vehicle No.(For Motor)

SKV4295T

Select	Policy No.	Policyholder Name	Policyholder NRJC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5094173042	ONG CHEE SEN (WANG ZHISHENG)	S7426087Z	GPC	drivo CLASSIC	SKV4295T	SKV4295T	17/09/2017	16/09/2018

▼ Policy Information

Policy No.	5094173042	Policyholder Name	ONG CHEE SEN (WANG ZHISHEI	Policyholder NRIC	S7426087Z
Address	BLK 270B #15-227 PUNGGOL FIELD SINGAPORE 822270				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	14/09/2017	Effective Date	17/09/2017 00:00	Expiry Date	16/09/2018 23:59
Third Party Excess	0	Own damage Excess	0.0	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	0.0	Outside Singapore TP Excess	0		
Agent	HO SEET PENG	Agent Tel.	90089510	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	BLK 270B #15-227	Address 2	PUNGGOL FIELD	Address 3	SINGAPORE 822270
Address 4		Address Type	Singapore address	Post Code	822270
Unit No.		Related Policy Number	5094173042		

► Insured Object: SKV4295T

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
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Continue

Cancel

Claim Handling

Accident MT/1004643

Policy No.	5094173042	Vehicle No.	SKV4295T	GST Registration No.	
Policyholder Name	ONG CHEE SEN (WANG ZHISHENG)			Policyholder NRIC	S74
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	98231236	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
KFK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	30	Private Hire	No

▼ Accident Details

Report Date	26/07/2018 09:38	Accident Report Within 24 hrs	Yes	Accident Type	Colli
Date of Accident	24/07/2018	Time of Accident hh:mm	19:40	Country of Accident	Sing
Reporting Centre		Orange Force		ICM No.	
Accident Location	SLIP ROAD TWDS PUNGGOL WAY				

▼ Benefits

Coverage	Sum Insured
Excess Waiver	999999999.99

▼ Excess

Own damage Excess	0.00	Additional Excess	0	Windscreen Excess	100.
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	0.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

▼ GST Registered Information

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

▼ Policyholder Mailing Address

Address 1	BLK 270B #15-227	Address 2	PUNGGOL FIELD	Address 3	SINGAPORE
Address 4		Address Type	Singapore address	Post Code	822
Unit No.		Related Policy Number	5094173042		

▼ OI Driver Info

Driver Name	ONG CHEE SEN	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S74260872	Driver DOB	09/11
Register Date of Driver License	01/01/1994	Driver Age	43	Driving Experience	24
Contact No.(Mobile)	98231236	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 270B	Address 2	PUNGGOL FIELD	Address 3	
Address 4		Address Type	Singapore address	Post Code	822
Unit No.	#15-227				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Declaration

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

Claim 001 OD-MX

New

Claim Type *	OD-MX	Insured Name	ONG CHEE SEN (WANG ZHISHE)	Insured NRIC	S74
Contact No.(Mobile)	98231236	Contact No.(Home)	62989674	Contact No.(Office)	
Email Address	ocs0809@gmail.com	OI Vehicle Number	SKV4295T	TP Vehicle Number	JMS
Claim Description	SKV4295T / JMS2802 ON 24 Jul 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	Rec
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	26/11
Date Registered	26/07/2018 09:49	Claim Close Date		Total Loss but Repaired	
Report Taken By	KRISHNASAMY	Workshop Repairer			

☒ Print AK letter

Save Submit

Attachment

Accident No. MT/1004643 Claim No. 001
 Last Doc. Received ☒ Yes ☐ No Upload Date 26/07/2018 09:45

Path *

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Message Read

Category *

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Clear Please Select

Clear Please Select

Confidential

Urgency *

NO

Normal

NO

Normal

NO

Normal






















NO

Normal

NO

Normal

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Descrip
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jul 2018 09:48	NRIC/ Driving License	Normal	NRIC/ Driving License
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jul 2018 09:43	SAS	Normal	SAS 2018
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jul 2018 09:42	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jul 2018 09:42	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jul 2018 09:42	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jul 2018 09:42	Photos	Normal	Photos 20:
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jul 2018 09:42	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jul 2018 09:42	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jul 2018 09:42	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jul 2018 09:42	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jul 2018 09:42	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jul 2018 09:42	Photos	Normal	Photos 20:
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 26 Jul 2018 09:42	Photos	Normal	Photos 20:

Video List

Uploaded By/Date Folder Date File Name Source

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