

NATIONAL Assessment Centre Services

(Ref: 1 Jan 2005)

Date In: 28/07/2018 15:06	Job description	Date & Time Completed	Done by
Ref No: NA/INC18013768/K4	SAS e-filing		
Veh No: SJR6435B	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 28/07/2018 13:45	i-Motor Claim Form	MT/1005133-001	30/7/18 16:10
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: SKJ21624	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

NA1804763	Invoice Preparation Checklist	Amt (\$) Int. Bill	Amt (\$) 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: Idno 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 (Non INC) against INC \$20		
at 1:	9) N12: Idno Mobile \$0		
at 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	28/07/2018 15:06
Date Of Accident	28/07/2018 13:45
Exact Location Of Accident	THE GATE @ 79 SOMMERVILLE PARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJR6435B
Insured/Policyholder	
Name Of Registered Owner	LIM SWEE HUAT
NRIC No	S0108906D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98166740
Alternative Phone No	OTHERS-98166740

Vehicle Particulars

Manufacturer	HONDA
Model	FREED 1.5G A
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	REPORTING ONLY
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	5101629597
Cover Note Number	

Driver

Name of Driver	LIM SWEE HUAT
NRIC No	S0108906D
Date Of Birth	05/06/1954
Occupation	OUTDOOR
Date Of Driving Pass	18/09/1974
Driving Experience	43 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98166740
Fax Number	
Contact Number	OTHERS-98166740
EMail Address	NOEMAIL

Address	BLK 314 UBI AVENUE 1 #06-425
Postcode	400314
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	NO 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?	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)	2
Passenger 1	
	NAME: : NIL
	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

PLS REFER TO THE ATTACHED 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	SKJ2162U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	YONG KIM CHONG (YANG JINCHANG)
NRIC/Passport Number	S7406851J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

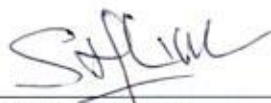
SKETCH PLAN

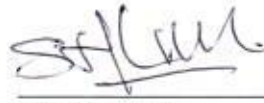
IMPORTANT NOTICE

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:

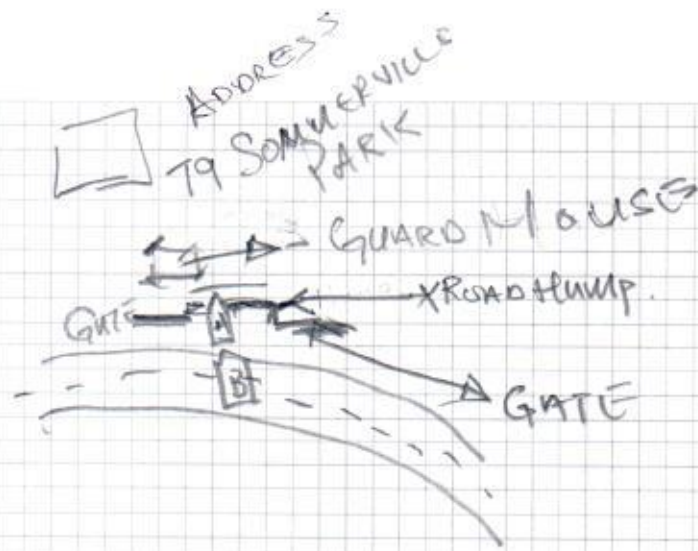
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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


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

SKETCH PLAN



A - SJR 6435B
B - SKJ 2162U

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ADDRESS : 79 SOMMERVILLE PARK
FARRER DRIVE 259283

Time : 13.45 pm

A - VEHICLE No : - SJR 6435B

B - VEHICLE No : - SKJ 2162U

I WAS APPROACHING THE GATE @ 79 SOMMERVILLE PARK. AS THE DRIVE WAY WAS NARROW I STOP TO ~~BE~~ BACK UP TO AVOID GUARD HOUSE.

HOWEVER I NOTICE VEHICLE No SKJ 2162U

HE INSIST THAT I HAVE BACK UP ~~AND~~ AND

I HIT HIS CAR IN FACT THERE NO ACCIDENT

~~AND~~ THERE WERE NOT DAMAGES OR DENT ON

THIS FRONT BUMPER NOT A SINGLE SCRATCH. (REFER TO PHOTO)

TWO GUARDS ON DUTY WHEN ASK THEM THERE NOT ACCIDENT

HOWEVER DRIVER YONG KIM GILONG INSIST THAT

I HIT HIS CAR I TOLD HIM TO CHECK THE THERE

NOT DAMAGE. HE IS DRIVE TO FAST AND

FOLLOW TO CLOSE TAIL ~~GATE~~ GATE INC.

DECLARATION

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

[Signature]

[Signature]

[Signature] 28/7/2018

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.:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0108906D



Name
LIM SWEE HUAT
林瑞發
Race
CHINESE
Date of Birth
05-06-1954 Sex
M
Country of Birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number
Number **S0108906D**
LIM SWEE HUAT
Birth Date **05 Jun 1954**
Issue Date **08 Jan 2003**

000095656K

0823



NIC No. **S0108906D**



Blood Group Date of issue
O+ **12-03-1993**

APT BLK 314 UBI AVENUE 1 #08-425.
SINGAPORE 400314
IC No: **S0108906D** Date: **01/01/2015**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

	PASS DATE
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	18 Sep 1974
Class 4A Omnibuses	25 Mar 1970
Class 4 Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	17 Jul 1978
Class 5 Motor Vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7250 kilograms	20 Aug 1979

426A

Licence No: S0108906D

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: 5101629597

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SJR6435B**
Chassis Number : GB31039811
2. Name of Policyholder : LIM SWEE HUAT
3. Effective Date of Insurance : 21 Jun 2018
4. Expiry Date of Insurance : 01 Jul 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	: LIM SWEE HUAT
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A

SUM INSURED

(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 : KHC HOLDINGS PTE LTD (00000613534)
Date of Issue : 21 Jun 2018 09:51 hrs

KHC HOLDINGS PTE LTD
361A SALESTOWN ROAD SINGAPORE 329796
TEL: 62737777

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.	<input type="text"/>	Date of Accident	<input type="text" value="28/07/2018 13:45"/>							
Vehicle No.(For Motor)	<input type="text" value="SJR6435B"/>	Certificate Number	<input type="text"/>							
<input type="button" value="Search"/>										
Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5101629597		LIM SWEE HUAT	S0108906D	GPC	drivo CLASSIC	SJR6435B	SJR6435B	21/06/2018	01/07/2019
<input type="button" value="Continue"/>										

▼ Policy Information

Policy No.	5101629597	Policyholder Name	LIM SWEE HUAT	Policyholder NRIC	S0108906D
Certificate No.					
Address	BLK 314 #06-425 UBI AVENUE 1 SINGAPORE 400314				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	21/06/2018	Effective Date	21/06/2018 00:00	Expiry Date	01/07/2019 23:59
Third Party Excess	1500	Own damage Excess	2000	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	2000	Outside Singapore TP Excess	1500		
Agent	KHC HOLDINGS PTE LTD	Agent Tel.	62538288	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	BLK 314 #06-425	Address 2	UBI AVENUE 1	Address 3	SINGAPORE 400314
Address 4		Address Type	Singapore address	Post Code	400314
Unit No.	06-425	Related Policy Number	5101629597		

► Insured Object: SJR6435B

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
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Continue

Cancel

Claim Handling

Accident MT/1005133

Policy No.	5101629597	Vehicle No.	SJR6435B	GST Registration No.	
Certificate No.					
Policyholder Name	LIM SWEE HUAT			Policyholder NRIC	S010
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	98166740	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	No
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes

Accident Details

Report Date	30/07/2018 14:50	Accident Report Within 24 hrs	Yes	Accident Type	No cc
Date of Accident	28/07/2018	Time of Accident hh:mm	13:45	Country of Accident	Sing
Reporting Centre		Orange Force		ICM No.	
Accident Location	THE GATE @ 79 SOMMERVILLE PARK				

Benefits

Excess

Own damage Excess	2,000.00	Additional Excess	0	Windscreen Excess	100.00
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 Registration No.		GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	BLK 314 #06-425	Address 2	UBI AVENUE 1	Address 3	SING
Address 4		Address Type	Singapore address	Post Code	4003
Unit No.	06-425	Related Policy Number	5101629597		

OI Driver Info

Driver Name	LIM SWEE HUAT	Driver Type	Main Driver		
Unnamed driver Name		Driver NRIC	S0108906D	Driver DOB	05/0
Register Date of Driver License	01/01/1978	Driver Age	64	Driving Experience	40
Contact No.(Mobile)	98166740	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 314	Address 2	UBI AVENUE 1	Address 3	
Address 4		Address Type	Singapore address	Post Code	4003
Unit No.	#06-425				
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	LIM SWEE HUAT	Insured NRIC	S010
Contact No.(Mobile)	98166740	Contact No.(Home)	67473837	Contact No.(Office)	NIL
Email Address		OI Vehicle Number	SJR6435B	TP Vehicle Number	SKJ2
Claim Description	SJR6435B / SKJ2162U ON 28 Jul 2018				Name of Preferred Workshop
Preferred Workshop Contact No.		Insured Liability *	Partially at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Rece
Date Registered	30/07/2018 16:12	Claim Close Date		Date Received	30/0
Report Taken By	KRISHNASAMY	Workshop Repairer		Total Loss but Repaired	

☒ Print AK letter

Save Submit

Attachment

Accident No.	MT/1005133	Claim No.	001
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Last Doc. Received

☒ Yes ☐ No

Upload Date

30/07/2018 16:10

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

Message Read

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:12	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:08	SAS	Normal	SAS 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:08	Photos	Normal	Photos 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:08	Photos	Normal	Photos 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:08	Photos	Normal	Photos 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:08	Photos	Normal	Photos 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:08	Photos	Normal	Photos 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:07	Photos	Normal	Photos 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:07	Photos	Normal	Photos 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:07	Photos	Normal	Photos 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:07	Photos	Normal	Photos 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:07	Photos	Normal	Photos 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:07	Photos	Normal	Photos 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:06	Photos	Normal	Photos 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:06	Photos	Normal	Photos 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:06	Photos	Normal	Photos 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:06	Photos	Normal	Photos 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:06	Photos	Normal	Photos 2018-7-30
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 30 Jul 2018 16:06	Photos	Normal	Photos 2018-7-30

Video List

Uploaded By/Date	Folder Date	File Name	Source
<input type="button" value="Display in New Window"/> <input type="button" value="Scan and uploading"/>			