

# NATIONAL Assessment Centre Services

(wef 1 Jan 2005)

Date In: 10/08/2018 17:52	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: NA/INC18014545/24	E-mail (within 8hrs, AIC 2hrs):		
Veh No: SLP6133J	i-Motor Claim Form	MT/1006769-001	11/8/18 12:21
DOA: 09/08/2018 21:00	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
OD: TP Reporting Only	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
Ass't Report by Fax / Hand to Owner/Wksp			

Preferred Wksp / INC Assign Wksp / QW: (

TP Particulars:	Ych No: SKH6512C	INC ( ) / Non-INC ( )	Tel: ( )	Fax: ( )
Owner / Driver: (				
Policy No: (	Period: (	Cover Type: (		
Confirmed by: (	Date: (	Time: (		
Insured/Driver Liability: (	% [Note-Est. Status (WO): N: 0-20%; P: 21-79%; P: 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)

1) Apply for Transport Allowance ( ) / Courtesy Car ( )	Date/Time Completed	Done by
2) QC Check / Post Repair Inspection ( )		
3) Upload Resurvey Photo [Repair Cost > \$3000] ( )		

Injury:

Date/Time	Actions

Claimant's Particulars:	Invoice Preparation Checklist	Amc (\$)	Amc (\$)
Driver/Owner:	1) AR: Accident Reporting (\$30);	In Bill	Add. Bill
Contact No:	2) DA: Damage Assessment (\$100); INC (\$50)		
Damaged Portion:	3) TP: Towing Fee \$40/\$45		
QC Checked by (Engr-In-Charge):	4) PT: Follow-Through Survey \$120		
Auditors' Comments:	5) PT: Follow-Through Survey (Resurvey) \$30		
	For claiming against INC Only (wef 10 Jan 2005)		
	6) TR: Re-inspection \$75		
	7) N1: Idav DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	ON*		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
	TP (N11): TP (N'n INC) against INC \$20		
	9) N12: Idav 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	10/08/2018 17:52
Date Of Accident	09/08/2018 21:00
Exact Location Of Accident	NICOLL HIGHWAY ENTRANCE TO KPE ( TPE )
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP6133J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	METRO CAR LEASING PTE LTD
Co Reg No	201810490D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83223162
Alternative Phone No	OFFICE-83223162

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER EX 1.6 AT LED TAIL LAMP
Exact Purpose for which vehicle was being used at time of accident	WORK
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	5100798968
Cover Note Number	

### Driver

Name of Driver	LOW HOCK LENG RICHARD (LIU FULONG )
NRIC No	S7735926E
Date Of Birth	20/12/1977
Occupation	OUTDOOR
Date Of Driving Pass	08/09/2003
Driving Experience	14 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97970724
Fax Number	
Contact Number	OTHERS-97970724
Email Address	NOEMAIL

Address	BLK 118 SERANGOON NORTH AVENUE 1 #11-231
Postcode	550118
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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)	5
Passenger 1	NAME: : NIL GENDER: : FEMALE
Passenger 2	NAME: : NIL GENDER: : FEMALE
Passenger 3	NAME: : NIL GENDER: : FEMALE
Passenger 4	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?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKH6512C
Vehicle Make/Model/Colour	FORD
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)



## 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:

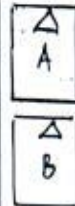
*[Signature]*  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

*[Signature]* 10/8/2018  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

# SKETCH PLAN

Vehicle A: SLP6133J

Vehicle B: SKH 6512C



NICOLL HIGHWAY ENTRANCE  
TO KPE(TPE)

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date & time, I, Vehicle 'A', SLP6133J, was travelling straight along the stated venue. Due to front vehicle made an emergency brake, I immediately braked as well. About 1 - 2 seconds later, vehicle 'B', SKH 6512C, hit onto my stationary vehicle's rear portion.

My passengers:

- 1) Tan Mei Fong Jean (NRIC: S01179076) [wife]
- 2) Hla Hla Ohn (WP: 094016193) [helper]
- 3) Low En Kai Rayden (ID: T0515937C) [son]
- 4) Low Zhi Yu Jayne (ID: T06234866) [daughter]

## 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:

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

10/8/2018



## ACCIDENT STATEMENT

ACCIDENT DATE: 09/08/2018 (DD/MM/YYYY), TIME: 21:00 (HH:MM)

LOCATION: Nicola Highway Entrance to KPE (TPE)

### 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLP6133J  
b) INSURANCE COMPANY: NTUC  
c) POLICY NUMBER: 5100748966  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: Mitsubishi Lancer  
f) TYPE: (SEDAN / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: Private  
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

### 2. INSURED / POLICY HOLDER

- a) NAME: Metro Car Leasing Pte Ltd (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: 201810490P CONTACT: 83223162  
c) ADDRESS: \_\_\_\_\_

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

#### DRIVER

- a) NAME: Low Hock Leng Richard (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S7735926E CONTACT: 9797 0724  
c) ADDRESS: 11B Serangoon North Avenue 1, #11-231  
S(550116)

\* No of passengers  
(including driver)  
(05)

3 female,

1 male passenger

d) DATE OF BIRTH: 20/12/1977 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 14 years

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: None

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)  
b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: \_\_\_\_\_

### 8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: SEH 6512C MODEL: Ford

b) DRIVER'S NAME: \_\_\_\_\_ CONTACT: \_\_\_\_\_

c) NRIC/FIN/PASSPORT: \_\_\_\_\_

9. THIRD PARTY VEHICLE MODEL: \_\_\_\_\_

d) VEHICLE NUMBER: \_\_\_\_\_

e) DRIVER'S NAME: \_\_\_\_\_ CONTACT: \_\_\_\_\_

f) NRIC/FIN/PASSPORT: \_\_\_\_\_

\* No of passenger  
(including driver)  
(UNKNOWN)

\* No of passenger  
(including driver)  
( )

email =

fax =



REPUBLIC OF SINGAPORE



Licence Number: **S77359**

Name:

**LOW HOCK LENG RICHARD  
(LIU FULONG)**

Birth Date: **20 Dec 1977**

Issue Date: **09 Mar 2011**



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7735926E**



Name

**LOW HOCK LENG RICHARD  
(LIU FULONG)**

**刘 福 龙**

Race

**CHINESE**

Date of birth

**20-12-1977**

Sex

**M**

Country of birth

**SINGAPORE**





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

EFFECTIVE DATE

- Class 2B Motorcycles  $\leq$  200 CC  
Class 3 Motor cars  $\leq$  3000 kg with  $\leq$  7 passengers, exclusive of the driver; and motor tractors/vehicles  $\leq$  2500 kg  
Class 4 Heavy motor cars and motor tractors  $>$  2500 kg  
Class 5 Motor vehicles  $>$  7250 kg not constructed to carry any load

18 Sep 1995

08 Sep 2003

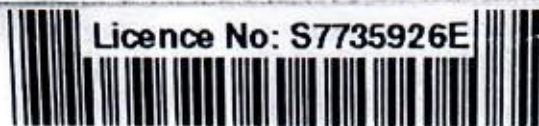
13 Jun 2011

28 Jul 2011

S7735926E

S / No. 9000148516

NP 428A



Licence No: S7735926E

4158147



NRIC No. S7735926E



Date of Issue

10-01-2008

APT BLK 118 SERANGOON NORTH AVENUE 1 #11-231  
SINGAPORE 550118

NRIC No: S7735926E

Date: 22/10/2011

No: 6982069

eBaoTech

GeneralClaim

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="09/08/2018 21:00"/>
Vehicle No. (For Motor)	<input type="text" value="SLP61333"/>	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"/>	5100798968		METRO CAR LEASING PTE LTD	2018104900	GPC	drive CLASSIC	SLP61333	SLP61333	17/05/2018	16/05/2019



### Policy Information

Policy No.	5100798968	Policyholder Name	METRO CAR LEASING PTE LTD	Policyholder NRIC	201810490D				
Certificate No.									
Address	210 TURF CLUB ROAD #LOTA8 THE GRANDSTAND SINGAPORE 287995								
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N				
Policy issue Date	18/05/2018	Effective Date	17/05/2018 00:00	Expiry Date	16/05/2019 23:59				
Third Party Excess	1500	Own damage Excess	1500	Windscreen Excess	100				
Additional Excess	0	OS Premium	0						
Outside Singapore OD Excess	1500	Outside Singapore TP Excess	1500						
Agent	TECK WEI CREDIT PTE. LTD.	Agent Tel.	64650020 null	GST Flag	Y				
Co-insurance Flag	No								
Open Policy Info									
Certificate Info									

### Policyholder Mailing Address

Address 1	210 TURF CLUB ROAD	Address 2	#LOTA8 THE GRANDSTAND	Address 3	SINGAPORE 287995
Address 4		Address Type	Singapore address	Post Code	287995
Unit No.	LOTA8	Related Policy Number	5102924206		

Insured Object: SLP6133J

### Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
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## Claim Handling

Accident MT/1006769

Policy No.	5100798968	Vehicle No.	SLP6133J	GST Registration No.	
Certificate No.					
Policyholder Name	METRO CAR LEASING PTE LTD			Policyholder NRIC	2018
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	83223162	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	11/08/2018 12:13	Accident Report Within 24 hrs	Yes	Accident Type	Collis
Date of Accident	09/08/2018	Time of Accident hh:mm	21:00	Country of Accident	Singa
Reporting Centre		Orange Force		ICM No.	
Accident Location	NICOLL HIGHWAY ENTRANCE TO KPE ( TPE )				

## ▼ Benefits

## ▼ Excess

Own damage Excess	1,500.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess	1,500.00		
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	No
Modification History			

## ▼ Policyholder Mailing Address

Address 1	210 TURF CLUB ROAD	Address 2	#LOTAS THE GRANDSTAND	Address 3	SING
Address 4		Address Type	Singapore address	Post Code	2879
Unit No.	LOTAS	Related Policy Number	5102924206		

## ▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	20/1
Unnamed Driver Name	LOW HOCK LENG RICHARD (LIU)	Driver NRIC	S7735926E	Driving Experience	14
Register Date of Driver License	08/09/2003	Driver Age	40	Contact No.(Home)	0
Contact No.(Mobile)	97970724	Contact No.(Office)	0	Address 3	
Address 1	BLK 118	Address 2	SERANGOON NORTH AVENUE 1	Post Code	5501
Address 4		Address Type	Singapore address		
Unit No.	#11-23J				
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	METRO CAR LEASING PTE LTD	Insured NRIC	2018
Contact No.(Mobile)	81119294	Contact No.(Home)		Contact No.(Office)	NIL
Email Address		OI Vehicle Number	SLP6133J	TP Vehicle Number	SKH
Claim Description	SLP6133J / SKH6512C ON 9 Aug 2018				Name of Preferred Workshop
Preferred Workshop Contact No.		Insured Liability *	Not at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Rece
Date Registered	11/08/2018 12:21	Claim Close Date		Date Received	11/0
Report Taken By	KRISHNASAMY	Workshop Repairer		Total Loss but Repaired	

☒ Print AX letter

Save Submit

## Attachment

Accident No.	MT/1006769	Claim No.	001
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Last Doc. Received

☒ Yes ☐ No

Upload Date

11/08/2018 12:20

Path \*

Category \*






















Confidential

Urgency \*

	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal
	Browse...	Clear	Please Select	NO	Normal

Message Read

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICE) on 11 Aug 2018 12:21	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-8-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICE) on 11 Aug 2018 12:21	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-8-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICE) on 11 Aug 2018 12:20	SAS	Normal	SAS 2018-8-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICE) on 11 Aug 2018 12:19	Photos	Normal	Photos 2018-8-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICE) on 11 Aug 2018 12:19	Photos	Normal	Photos 2018-8-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICE) on 11 Aug 2018 12:19	Photos	Normal	Photos 2018-8-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICE) on 11 Aug 2018 12:19	Photos	Normal	Photos 2018-8-11
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	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICE) on 11 Aug 2018 12:19	Photos	Normal	Photos 2018-8-11
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	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICE) on 11 Aug 2018 12:18	Photos	Normal	Photos 2018-8-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICE) on 11 Aug 2018 12:18	Photos	Normal	Photos 2018-8-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICE) on 11 Aug 2018 12:18	Photos	Normal	Photos 2018-8-11
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	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICE) on 11 Aug 2018 12:18	Photos	Normal	Photos 2018-8-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICE) on 11 Aug 2018 12:18	Photos	Normal	Photos 2018-8-11
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICE) on 11 Aug 2018 12:18	Photos	Normal	Photos 2018-8-11

## Video List

Uploaded By/Date	Folder Date	File Name	Source
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