

# NATIONAL Assessment Centre Services

[wef 1 Jan 2003] **MA11814594**

Date In: <b>12/11/18-18:55</b>	Job description	Date & Time Completed	Done by
Ref No: <b>NA/14C18020409/14</b>	SAS e-filing		
Veh No: <b>583716</b>	E-mail (within Shrs, AIC 2hrs)		
D.O.A: <b>12/11/18-17:45</b>	i-Motor Claim Form	<b>MT1019449-001</b>	<b>12/11/18 20:48</b>
OD: <b>TP</b> 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: <b>583716</b>	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% 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)	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

<b>NA1807385</b>	<b>Invoice Preparation Checklist</b>	Amt (\$) Est. 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 2003)		
	6) TR: Re-inspection \$75		
	7) N1: Idao DA + SMRT Survey \$160		
	8) NTUC Additional Services:-		
QC Checked by (Engr-In-Charge):	QD:		
	*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		
Pat 1:	9) N12: Idac Mobile 30		
Pat 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 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. 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	12/11/2018 18:55
Date Of Accident	10/11/2018 17:45
Exact Location Of Accident	JUNC MOUNTBATTEN RD & TANJONG KATONG RD SOUTH
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFJ701L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN SECK YEOW
NRIC No	S6834437I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96378931
Alternative Phone No	OFFICE-96378931

### Vehicle Particulars

Manufacturer	BMW
Model	X3 XDRIVE20I ABS 4WD SR HID DSC NAV
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	5059566769-05
Cover Note Number	

### Driver

Name of Driver	TAN SECK YEOW
NRIC No	S6834437I
Date Of Birth	24/09/1968
Occupation	INDOOR
Date Of Driving Pass	26/06/1986
Driving Experience	32 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96378931
Fax Number	
Contact Number	OFFICE-96378931
EMail Address	NOEMAIL

Address	48 MEYER ROAD #16-48
Postcode	437872
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 - CROSS JUNCTION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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	SGX9476S
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)	3

Passenger 1

NAME: :

GENDER: :

Passenger 2

NAME: :

GENDER: :



## 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:

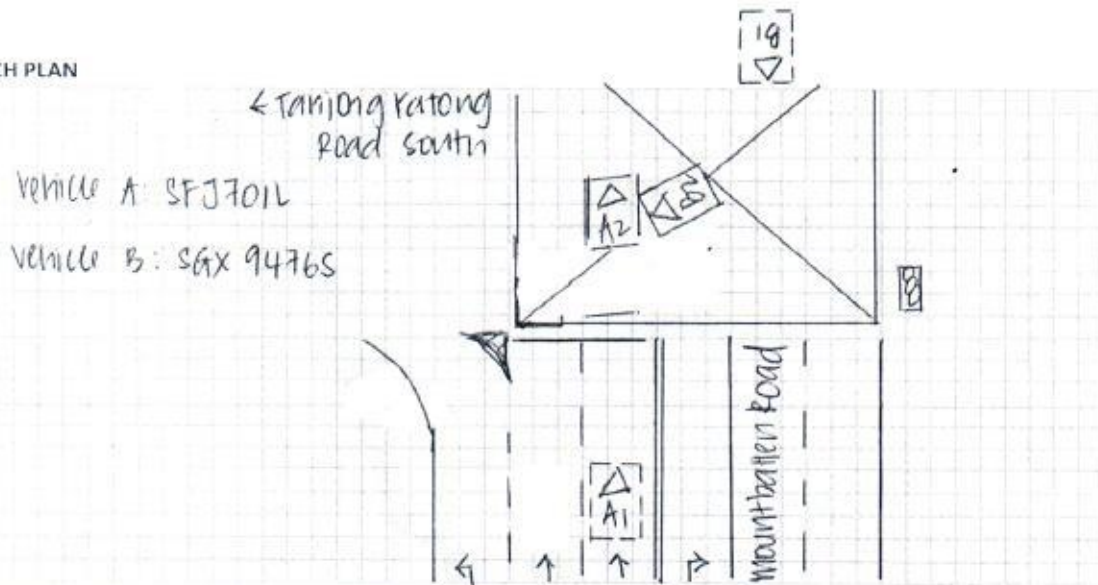
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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




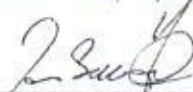
## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date & time, I, vehicle A, SFJ701L, was travelling straight along the stated venue. As I passed and have entered the yellow box the stopline, it turned amber. Suddenly, vehicle B, SGX9476S, turned from the opposite direction and collided onto my vehicle's right portion.

## 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.:



# ACCIDENT STATEMENT

ACCIDENT DATE: 10 / 11 / 2018 (DD/MM/YYYY), TIME: 17 : 45 (HH:MM)

LOCATION: Junction of Mountbatten Road X Tanjong Katong Rd South

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SFJ701L  
 b) INSURANCE COMPANY: NTUC  
 c) POLICY NUMBER: \_\_\_\_\_  
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
 e) MAKE & MODEL: BMW X3  
 f) TYPE: (SALOON / 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: Tan Seck Yeow (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S60344371 CONTACT: 96378931  
 c) ADDRESS: 48 Meyer Road #16-48 S(437872)

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

### DRIVER

- a) NAME: \_\_\_\_\_ (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
 c) ADDRESS: \_\_\_\_\_

\* d) DATE OF BIRTH: 24 / 09 / 1968 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 32 years

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: owner

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: Sfx 9476S MODEL: \_\_\_\_\_  
 b) DRIVER'S NAME: \_\_\_\_\_  
 c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

## 9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
 e) DRIVER'S NAME: \_\_\_\_\_  
 f) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

14 No of passenger  
 (including driver)  
(02)  
 male passenger

15 No of passenger  
 (including driver)  
(03) females

16 No of passenger  
 (including driver)  
( )

email =

fax =

**REPUBLIC OF SINGAPORE DRIVING LICENCE**



Licence Number: **S 6 8 3 4 4 3 7 1**

Name:

**TAN SECK YEOW**

Birth Date: **24 Sep 1968**

Issue Date: **12 May 2003**



000473838K

**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. **S68344371**



Name

**TAN SECK YEOW**



**陳 錫 耀**

Race

**CHINESE**

Date of Birth

**24-09-1968**

Sex

**M**

Country of Birth

**SINGAPORE**



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

PASS DATE

**Class 3** Motor Cars and Motor Tractors the weight of  
which unladen does not exceed 2500 kilograms

26 Jun 1986

NP 428A



Licence No: S68344371

3029167



NRIC No. S68344371

Blood Group

B+

Date of issue

09-06-1998

48 MEYER ROAD #16-48  
SINGAPORE 437872

NRIC No: S68344371

Date: 10/10/2012 (R)

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="10/11/2018 17:45"/>
Vehicle No.(For Motor)	<input type="text" value="SFJ701L"/>	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"/>	5059566769-05		TAN SECK YEOW	S6834437I	GPC	drivo PREMIUM	SFJ701L	SFJ701L	22/05/2018	21/05/2019



### Policy Information

Policy No.	5059566769-05	Policyholder Name	TAN SECK YEOW	Policyholder NRIC	S6834437I
Certificate No.					
Address	48 MEYER ROAD #16-48 EQUATORIAL SINGAPORE 437872				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	27/04/2018	Effective Date	22/05/2018 00:00	Expiry Date	21/05/2019 23:59
Third Party Excess	0.0	Own damage Excess	0.0	Windscreen Excess	100.0
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	0.0	Outside Singapore TP Excess	0.0		
Agent	DIRECT BUSINESS DEPT	Agent Tel.	NIL	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

### Policyholder Mailing Address

Address 1	48 MEYER ROAD	Address 2	#16-48 EQUATORIAL	Address 3	SINGAPORE 437872
Address 4		Address Type	Singapore address	Post Code	437872
Unit No.		Related Policy Number	5059566769-05		

Insured Object: SFJ701L

### Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
----------	---------------------	------------------	--------------------	---------------------

## Claim Handling

Exit

## Accident MT/1019449

Policy No.	S059566769-05	Vehicle No.	SFJ701L	GST Registration No.	
Certificate No.					
Policyholder Name	TAN SECK YEW			Policyholder NRIC	S68344371
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive PREMIUM	Loading	0
Contact No. (Mobile)	96378931	Contact No. (Office)	0	Contact No. (Home)	0
Email Address		Special Remark		eCode	No
KFK	<input type="checkbox"/> No <input type="checkbox"/> Yes	TCA	<input type="checkbox"/> No <input type="checkbox"/> Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	No

## Accident Details

Report Date	12/11/2018 20:45	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Cross Junction
Date of Accident	10/11/2018	Time of Accident hh:mm	17:45	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	JUNC MOUNTBATTEN RD & TANJONG KATONG RD SOUTH				

## Excess

Own damage Excess	0.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	0.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

## Benefits

Coverage		Sum Insured	
Excess Waiver		9999999.99	
Transport Allowance		9999999.99	

## GST Registered Information

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

## Policyholder Mailing Address

Address 1	48 MEYER ROAD	Address 2	#16-48 EQUATORIAL	Address 3	SINGAPORE 437872
Address 4		Address Type	Singapore address	Post Code	437872
Unit No.		Related Policy Number	S059566769-05		

## OT Driver Info

Driver Name	TAN SECK YEW	Driver Type	Main Driver	Driver DOB	24/09/1968
Unnamed driver Name		Driver NRIC	S68344371	Driving Experience	32
Register Date of Driver License	26/05/1986	Driver Age	50	Contact No. (Home)	0
Contact No. (Mobile)	96378931	Contact No. (Office)	0	Address 1	SINGAPORE 437872
Address 1	48 MEYER ROAD	Address 2	EQUATORIAL	Address 3	SINGAPORE 437872
Address 4		Address Type	Singapore address	Post Code	437872
Unit No.	15-4B				
Does he own a Singapore Registered car?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Driver Vehicle No.		Driver Insurer Company	

Declaration			
Breathalyser or Blood Test reading?	0 mg	Any injury?	Yes <input type="checkbox"/> No <input type="checkbox"/>

## Modification History

Claim 001 New

Claim Type *	OD-MK	Insured Name	TAN SECK YEW	Insured NRIC	S68344371
Contact No. (Mobile)	96378931	Contact No. (Home)	63459290	Contact No. (Office)	
Email Address		Vehicle Number	SFJ701L	TP Vehicle Number	SGX9476S
Claim Description	SFJ701L / SGX9476S ON 10 Nov 2018				
Preferred Workshop		Insured Liability	Not at Fault	Name of Preferred Workshop	
Assessment No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown		
Date Registered		GIA report	Received	Claim Close Date	12/11/2018 20:48
Report Taken By	JACKSON	Date Received			12/11/2018 00:00

Print AX letter























Save Submit

## Attachment

Accident No.	MT/1019449	Claim No.	001
Last Doc. Received	<input type="checkbox"/> Yes <input type="checkbox"/> No	Upload Date	12/11/2018 20:51
Path *		Category *	Confidential
Choose File No file chosen		Urgency *	Normal
Choose File No file chosen		Description *	
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			
Attachment List			

Send Message Upload



Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	Action
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:51	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:51	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:51	SAS	Normal	SAS 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:51	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:51	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:51	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:50	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:50	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:50	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:50	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:50	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) @ 12 Nov 2018 20:49	Photos	Normal	Photos 2018-11-12		<a href="#">Edit</a>
	Video List					
Uploaded By/Date	Folder Date	File Name		Source		Action
<div>Display in New Window    Scan and uploading</div>						