

NATIONAL Assessment Centre Services (wef 1 Jan 05)

Date In: 08/01/19	Job description	Date & Time Completed	Done by
Ref No: NA/INC19000410/13	SAS e-filing		
Veh No: SJR8710F	E-mail (w/tn 8hrs, AIC 2hrs)		
DOA: 05/01/19 0245	i-Motor Claim Form	MT/1026835 - 002	
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: SHC750PX	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

NA190053

Invoice Preparation Checklist

Ant (\$)	Ant (\$)
1st Bill	Add Bill

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

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:-		
OD:		
*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 (Non INC) against INC \$20		
9) N12: Idac Mobile 30		

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	07/01/2019 12:30
Date Of Accident	05/01/2019 02:45
Exact Location Of Accident	JUNC OF BRADDELL RD & BISHAN RD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJR8710T
Insured/Policyholder	
Name Of Registered Owner	WHEELS EXPRESS RENTAL & LEASING PTE LTD
Co Reg No	201810594C
Email Address	WHEELEXPRESSRENTAL@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-90603343
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	I30 CW
Exact Purpose for which vehicle was being used at time of accident	GRAB
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	THIRD PARTY
Fleet Policy	YES
Policy Number	5100897742
Cover Note Number	
Driver	
Name of Driver	SIEW WEI LI,VILLY
NRIC No	S8542346J
Date Of Birth	31/12/1985
Occupation	OUTDOOR
Date Of Driving Pass	24/08/2006
Driving Experience	12 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94300154
Fax Number	
Contact Number	
Email Address	SWWILI@HOTMAIL.COM

Address	BLK 819 TAMPINES ST 81 #06-644
Postcode	520819
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JOO CHIAT NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: 267 ONAN ROAD , POSTCODE: 424773 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-3459999 - FAX NO: 64474181
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20190105/2063

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	SHC7508X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	SIEW WEI LI,VILLY
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	SJR8710T
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
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: 7 JAN 19

 08/01/19
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

BISHAN RD

A - SJR8710T

B - SHC7508X

BRANDELL RD

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

P/s refer to the police report: T/00190105/0063

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: 7 JAN 19

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



SINGAPORE POLICE FORCE



T/20190105/2063

1 of 3

Police Station Of Origin:
Joo Chiat NPP
267 Onan Road SINGAPORE 424773
Tel No: 1800-3459999

Report No. T/20190105/2063

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/01/2019 12:58	Vide Report No.:	Station Diary No.: 9
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Informant's Particulars

Name of Informant: SIEW WEI LI, VILLY			Address: APT BLK 819 TAMPINES STREET 81 #06-644 SINGAPORE 520819	
ID Type / ID No.: NRIC NO / S8542346J			Contact No.: Home/Office: Mobile: 94300154	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 33	Date of Birth: 31/12/1985	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: PRIVATE HIRE DRIVER			Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 05/01/2019 02:45	Type of Location:
Location: BRADDELL ROAD BISHAN ROAD JUNCTION OF BRADDELL ROAD AND BISHAN ROAD				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHC7508X	Car				Seriously Damaged	0
SJR8710T	Car				Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20190105/2063

Police Station Of Origin:
Joo Chiat NPP
267 Onan Road SINGAPORE 424773
Tel No: 1800-3459999

2 of 3

Report No. T/20190105/2063

CONTINUATION OF REPORT

Brief Details.

On 05/01/2018 at about 0245hrs, I was driving along Braddell Road towards CTE. As I was approaching the traffic light junction of Braddell Road and Bishan Road, I slowed down. As the traffic light was green, I picked up some speed.

Suddenly, one taxi travelling from Braddell Road below Bishan flyover which was from my right beat the red light and hit onto my driver's door. Due to the impact, my car landed on the pavement below the flyover.

As the damage to my driver's door was very bad and could not be open, I came out from my front passenger door. One motorcyclist came to my aid. I then asked the taxi driver in Hokkien, are you too tired. The taxi driver then told me that he was trying to avoid one cyclist. The taxi driver was not apologetic at that point of time even after he had beaten the red light.

A few minutes later, police and ambulance came and attended to us. I was then conveyed to Tan Tock Seng Hospital. I was then given 3 days Medical Leave.

I wish to state that I do not have any in-car camera in my vehicle.

The motorcyclist told me that he could be my witness for the accident as he saw that the taxi was beating the red light. The motorcyclist is Wei Liang, 98755641, motorcycle plate number is FBL7428S.



**SINGAPORE
POLICE FORCE**



T/20190105/2063

Police Station Of Origin:
Joo Chiat NPP
267 Onan Road SINGAPORE 424773
Tel No: 1800-3459999

3 of 3

Report No. T/20190105/2063

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
G /
Sgt 3 MUHAMMAD IDRIS BIN MOHD ISMAIL

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
05/01/2019 12:58

Officer In Charge Of Case:
TP / GIT /
Sgt 3 MOHAMED RIZWAN BIN IBRAHIM
Contact No.: 93265045

Classification Of Case:

Authentication Stamp
NP168

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S8542346J**

Name **SIEW WEI LI, VILLY**

Birth Date **31 Dec 1985**

Issue Date **24 Aug 2006**

001440877K



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

PASS DATE

Class 2B	Motorcycles <= 200 CC	05 Oct 2006
Class 3	Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	24 Aug 2006

S8542346J

S / No. 9000055955

Licence No: S8542346J

NP 428A



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8542346J

Name **SIEW WEI LI, VILLY**

蕭伟历

Race **CHINESE**

Date of birth **31-12-1985**

Country/Place of birth **SINGAPORE**

Sex **M**





5595809

NRIC No. **S8542346J**

Date of issue **05-05-2016**

Address **APT BLK 819 TAMPINES STREET 81
#06-644
SINGAPORE 520819**




Land Transport Authority


VOCATIONAL LICENCE

Licence No : **S8542346J**

Name : **SIEW WEI LI, VILLY**

Card Issue Date : **21/11/2017**

Please visit www.lta.gov.sg to check the status of this vocational licence



This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
12	TAXI VL	21/11/2017



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) Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5100897742		WHEELS EXPRESS RENTAL & LEASING PTE LTD	201810594C	GFT	Third Party	SJR8710T	SJR8710T	28/08/2018	

▼ Policy Information

Policy No.	5100897742	Policyholder Name	WHEELS EXPRESS RENTAL & LE	Policyholder NRIC	201810594C
Certificate No.					
Address	61 UBI AVENUE 2 #05-04 AUTOMOBILE MEGAMART SINGAPORE 408898				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	22/05/2018	Effective Date	22/05/2018 00:00	Expiry Date	21/05/2019 23:59
Third Party Excess	1500	Own damage Excess	0	Windscreen Excess	0
Additional Excess	0	OS Premium	419.70		
Outside Singapore OD Excess	0	Outside Singapore TP Excess	1500		
Agent	BENEFIT AUTO INSURANCE AGE	Agent Tel.	64445313	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	61 UBI AVENUE 2	Address 2	#05-04 AUTOMOBILE MEGAMAR	Address 3	SINGAPORE 408898
Address 4		Address Type	Singapore address	Post Code	408898
Unit No.	05-04	Related Policy Number	5103793723		

► Insured Object: SJR8710T

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	22/05/2018 00:00	Basic Information Endorsement	000001286822487	Endorsement Take Effective	<p>Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover the following vehicle(s) as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. SJP2145A 23-05-2018 \$1,099.08 In view of this amendment, an additional premium of \$1,099.08 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque in favour of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash or NETS.</p>

Claim Handling

The premium on this policy has not been collected.

Accident MT/1026835

Policy No.	5100897742	Vehicle No.	SJR8710T	GST Registration No.
Certificate No.				
Policyholder Name	WHEELS EXPRESS RENTAL & LEASING PTE LTD			Policyholder NRIC
Product Code	FLEET INSURANCE	Cover Type	Third Party	Loading
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
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
▼ Accident Details				
Report Date	08/01/2019 12:31	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	05/01/2019	Time of Accident hh:mm	02:45	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	JUNC OF BRADDELL RD & BISHAN RD			
▼ Excess				
Own damage Excess	0.00	Additional Excess	0	Windscreen Excess
Unnamed Driver Excess		Outside Singapore OD Excess	0.00	
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00	
▼ Benefits				
▼ GST Registered Information				
GST Registered	No	GST Registration Date		
GST Registration No.		GST Status Verified		Yes
Modification History				
▼ Policyholder Mailing Address				
Address 1	61 UBI AVENUE 2	Address 2	#05-04 AUTOMOBILE MEGAMAR	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	05-04	Related Policy Number	5103793723	
▼ OI Driver Info				
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	SIEW WEI LI,VILLY	Driver NRIC	S8542346J	Driver DOB
Register Date of Driver License	24/08/2006	Driver Age	33	Driving Experience
Contact No.(Mobile)	94300154	Contact No.(Office)		Contact No.(Home)
Address 1	BLK 819 #06-644	Address 2	TAMPINES STREET 81	Address 3
Address 4	SINGAPORE 520819	Address Type	Singapore address	Post Code
Unit No.	06-644			
Does he own a Singapore Registered car?	Yes <input checked="" type="radio"/> No <input type="radio"/>	Driver Vehicle No.		Driver Insurer Com
Declaration				
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No	

Modification History

Claim 002 OD-MX New

Claim Type *	OD-MX	Insured Name	WHEELS EXPRESS
Contact No.(Mobile)	90603343	Contact No. (Home)	
Email Address		Vehicle Number	SJR871
Claim Description	SJR8710T / SHC7508X ON 5 Jan 2019		
Preferred Workshop	Insured Liability	Not at Fault	
Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	08/01/2019 17:26	Claim Close Date	
Report Taken By	ROSLINDA	Workshop Repairer	

[Print AK letter](#)[Save](#) [Submit](#)

Attachment

Accident No.	MT/1026835	Claim No.	002
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	08/01/2019 00:00
Path *		Category *	Confidential
Choose File No file chosen	Clear	Please Select ▼	NO *
Choose File No file chosen	Clear	Please Select ▼	NO *
Choose File No file chosen	Clear	Please Select ▼	NO *
Choose File No file chosen	Clear	Please Select ▼	NO *
Choose File No file chosen	Clear	Please Select ▼	NO *
Choose File No file chosen	Clear	Please Select ▼	NO *
Message Read			

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Jan 2019 17:25	NRIC/ Driving License	Normal	NRIC/ Driving
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Jan 2019 17:25	SAS	Normal	SAS
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Jan 2019 17:24	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Jan 2019 17:24	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Jan 2019 17:24	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Jan 2019 17:24	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Jan 2019 17:24	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Jan 2019 17:24	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Jan 2019 17:24	Photos	Normal	Photos
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Jan 2019 17:24	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Jan 2019 17:23	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Jan 2019 17:23	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Jan 2019 17:23	Photos	Normal	Photos
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 08 Jan 2019 17:23	Photos	Normal	Photos



NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on
08 Jan 2019 17:23

Photos

Normal

Photos

Video List

Uploaded By/Date

Folder Date

File Name



Display in New Window

Scan and uploading