NATIONAL Assessment Centre Services (wef 1 Jan'06) MNA 11900459.

Date In: 12/11/19 - 17:34	Job description	Date & Time Completed	Done by
Ref No: NA/INC/1900653/24	SAS e-filing		
Veh No: SJV9416R.	E-mail (within 8hrs, AIC 2hrs)		
D.O.A : 4/11/18 - 12:00	i-Motor Claim Form	MY/10027280-001	12/11/19 20:08.
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: YP 3957X. 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

NA/900304

Claimant's Particulars :-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments :-

Cat. 1:

Cat. 2 / 3:

Invoice Preparation Checklist		Amt ($) 1st Bill	Amt ($) 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:-			
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*		

Your NCD will be affected due to late reporting
Actual e-Filling Submission Date & Time: 10/01/2019 17:49

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 witholding 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	10/01/2019 17:32
Date Of Accident	11/11/2018 12:00
Exact Location Of Accident	JUNC PAYA LEBAR RD & UBI AVE 2
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJV9416R
Insured/Policyholder	
Name Of Registered Owner	LIM JUN HONG, LINCOLN
NRIC No	S9017537H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91392423
Alternative Phone No	OFFICE-91392423
Vehicle Particulars	
Manufacturer	KIA
Model	CERATO FORTE KOUP 1.6 AT SX ABS D/AB SR
Exact Purpose for which vehicle was being used at time of accident	WORKING
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 CAR
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5102228156
Cover Note Number	
Driver	
Name of Driver	TAN ZE XUAN
NRIC No	S9635955A
Date Of Birth	10/10/1996
Occupation	OUTDOOR
Date Of Driving Pass	05/07/2018
Driving Experience	0 YEAR AND 4 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91004960
Fax Number	
Contact Number	OFFICE-91004960
EMail Address	NOEMAIL

Address	BLK 602 ELIAS ROAD #09-242
Postcode	510602
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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 (including own vehicle) 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)	1

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	YP2957X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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.

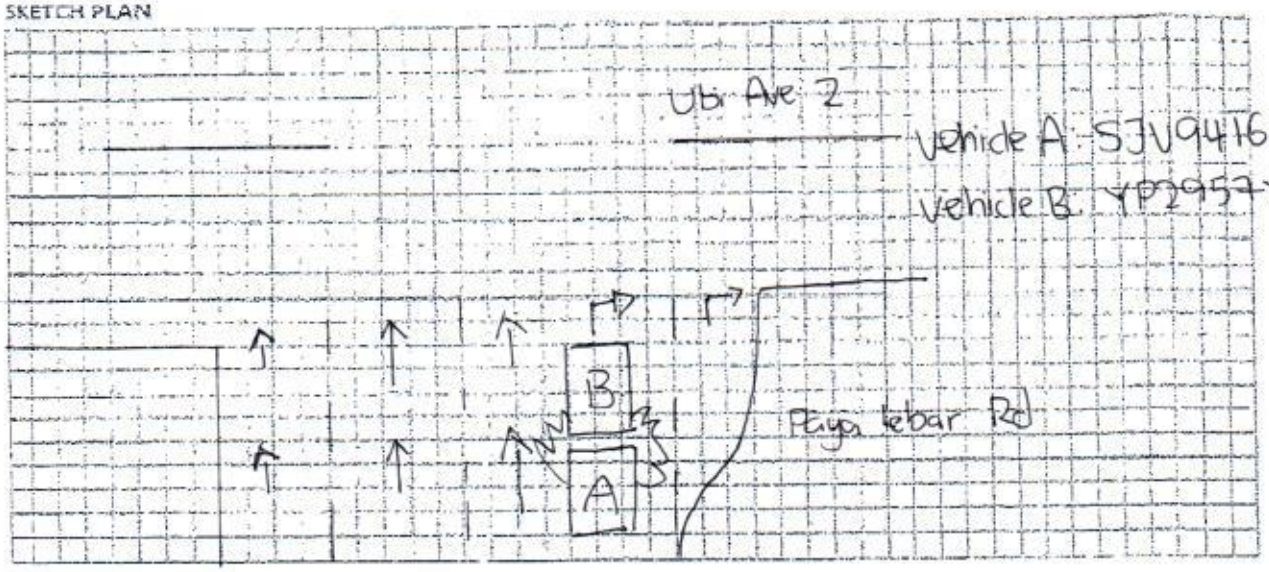
林俊鴻

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 14 Nov 2018, 12:00PM, Along Junction of Paya Lebar Road & Ubi Avenue 2, Vehicle A was approaching foward. Vehicle B came to a stop on Red Traffic Light, Vehicle A could not notice the Brake lights on Vehicle B and rear-ended vehicle B.

DECLARATION

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

林俊鸿

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.:

Date of Accident : 11 NOV 2018 Accident Time: 12:00 PM (24-HR-Format)

Accident Place : Along Junction of Paya Lebar Road & Ubi Ave 2

Vehicle Reg. No. (Car Plate No.) : SJV9416R

Vehicle Make/Model : KIA CERATO FORTE

Insurance Company : NTUC Policy No. _____

Owner or Company Name /IC No. : LIM JUN HONG, LINCOLN S9017537H

Owner or Company Contact No. : 9139 2423 Owner's Hp _____ Company Tel

DRIVER'S Name / IC No. : TAN ZE XUAN S9635955A

DRIVER'S Date Of Birth : 10 Oct 1996 DRIVER'S License Pass Date 05 Jul 2018

Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ (Employee) Others: _____

DRIVER'S Address : APT BLK 602 ELIAS ROAD, #09-242, S 510602

DRIVER'S Contact No./ Alt No. :1) 9100 4960 2) _____

DRIVER'S Occupation : INDOOR \ (OUTDOOR) (e.g. working inside or outside office)

Email Address : weiyuan0312@gmail.com

Weather & Road Surface : (CLEAR & DRY) \ RAINING & WET \ AFTER RAIN & WET

Reporting Type : (Reporting Only) \ Claim Other Party \ Claim Own Insurance

Number of Passengers (Including Driver): 01

Was there any video Captured by car camera: YES \ (NO)
Exact purpose for which vehicle was being used at the time of accident: Private use \ (Work purpose)

Other Party Driver's Particular (if any)

Vehicle Reg. No: YP 2957X

Vehicle Make\Model: _____

Name Driver: _____

IC No. Driver: _____

Driver's Contact & Add: _____

Vehicle Reg. No: _____

Vehicle Make\Model: _____

Name Driver: _____

IC No. Driver: _____

Driver's Contact & Add: _____

OWNER


3999680
NRIC No. S9017537H
Date of issue
22-01-2007
APT BLK 147 PASIR RIS STREET 13 #08-16
SINGAPORE 510147
NRIC No: S9017537H
Date: 12/02/2016


REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9017537H
Name
LIM JUN HONG, LINCOLN
林 俊 鴻
Race
CHINESE
Date of birth
21-05-1990
Sex
M
Country of birth
SINGAPORE

Driver

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9635955A

Name

TAN ZE XUAN

陈 泽 轩

Race

CHINESE

Date of birth

10-10-1996

Sex

M

Country/Place of birth

SINGAPORE

9385563

NRIC No. S9635955A

Nationality

MALAYSIAN

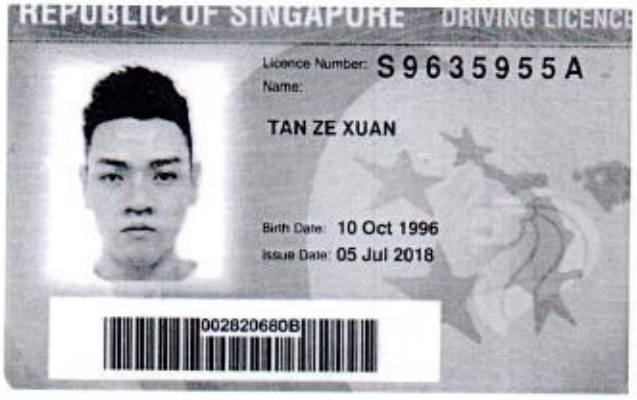
Date of issue

14-10-2015

Address

APT BLK 602 ELIAS ROAD
#09-242
SINGAPORE 510602

Driver



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

		EFFECTIVE DATE
Class 3A	Motor cars without clutch pedals (Auto) with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight =< 2500kg	05 Jul 2018

NP 428A

Licence No:S9635955A

13-07-18 10:46 ;KA-HUP VEHICLES TRADING P/L AML 05-17 ;64531234 # 1/ 2

income
made different

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: 5102228156 Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : SJV9416R
   Chassis Number : KNAFW611MA5204186
2. Name of Policyholder : LIM JUN HONG, LINCOLN
3. Effective Date of Insurance : 13 Jul 2018
4. Expiry Date of Insurance : 12 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 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)	: S$600
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	: NO
PRIMARY DRIVER	: LIM JUN HONG LINCOLN
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: HONG LEONG FINANCE LTD
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 : KA-HUP VEHICLES TRADING (00000572059)
Date of Issue : 13 Jul 2018 10:44 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

eBaoTech GeneralClaim

Hello, NAC_PAYA_UBI_800601 · Change Language · Change Password · Log Out

My Desktop
Notice of Loss

Policy Query

Policy No.
Vehicle No.(For Motor) SJV9416R
Date of Accident 11/11/2018 12:00
Certificate Number

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
○	5102228156		LIM JUN HONG, LINCOLN	S9017537H	GPC	drivo CLASSIC	SJV9416R	SJV9416R	13/07/2018	12/07/2019

Continue

Policy Information

Policy No.	5102228156	Policyholder Name	LIM JUN HONG, LINCOLN	Policyholder NRIC	S9017537H
Certificate No.					
Address	BLK 147 #08-16 PASIR RIS STREET 13 SINGAPORE 510147				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	13/07/2018	Effective Date	13/07/2018 00:00	Expiry Date	12/07/2019 23:59
Excess Type		All Claims Excess			
Third Party Excess	0	Own damage Excess	600	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	600	Outside Singapore TP Excess	0		Young/Inexperience Driver Excess
Agent	KA-HUP VEHICLES TRADING	Agent Tel.	64589997	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

Policyholder Mailing Address

Address 1	BLK 147 #08-16	Address 2	PASIR RIS STREET 13	Address 3	SINGAPORE 510147
Address 4		Address Type	Singapore address	Post Code	510147
Unit No.	07-123	Related Policy Number	5102228156		

Insured Object: SJV9416R

Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content

Continue Cancel

Claim Handling

Accident MT/1027280

‹ Exit

Policy No.	5102228156	Vehicle No.	SJV9416R	GST Registration No.	
Certificate No.					
Policyholder Name	LIM JUN HONG, LINCOLN			Policyholder NRIC	S9017537H
Product Code	PRIVATE CAR INSURANCE	Cover Type	drivo CLASSIC	Loading	0
Contact No.(Mobile)	91392423	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	
KFK	◉ No ○ Yes	TCA	◉ No ○ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	No

Accident Details

Report Date	10/01/2019 20:08	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	11/11/2018	Time of Accident hh:mm	12:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	JUNC PAYA LEBAR RD & UBI AVE 2				

Excess

Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	2,500.00	Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

Benefits

GST Registered Information

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

Policyholder Mailing Address

Address 1	BLK 147 #08-16	Address 2	PASIR RIS STREET 13	Address 3	SINGAPORE 510147
Address 4		Address Type	Singapore address	Post Code	510147
Unit No.	07-123	Related Policy Number	5102228156		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	TAN ZE XUAN	Driver NRIC	S9635955A	Driver DOB	10/10/1996
Register Date of Driver License	05/07/2018	Driver Age	22	Driving Experience	0
Contact No.(Mobile)	91004960	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 602	Address 2	ELIAS ROAD	Address 3	ELIAS VIEW
Address 4	SINGAPORE 510602	Address Type	Singapore address	Post Code	510602
Unit No.	09-242				
Does he own a Singapore Registered car?	○ Yes ◉ No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	○ Yes ◉ No

Modification History

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	LIM JUN HONG, LINCOLN	Insured NRIC	S9017537H
Contact No.(Mobile)	93668262	Contact No.(Home)	66891860	Contact No.(Office)	
Email Address		OI Vehicle Number	SJV9416R	TP Vehicle Number	YP2957X
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select		
Claimant Name *	>>	Claimant NRIC *			
Claimant Address					
Claim Description	SJV9416R / YP2957X ON 11 Nov 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Fully at Fault		
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	10/01/2019 20:08	Claim Close Date		Date Received	10/01/2019 00:00
Report Taken By	Jackson				

☑ Print AK letter

Save Submit

Attachment

Accident No.	MT/1027280	Claim No.	001
Last Doc. Received	◉ Yes ○ No	Upload Date	10/01/2019 20:09

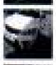
Path *			Category *	Confidential	Urgency *	Description *
	Browse...	Clear	Please Select	NO	Normal	
	Browse...	Clear	Please Select	NO	Normal	
	Browse...	Clear	Please Select	NO	Normal	
	Browse...	Clear	Please Select	NO	Normal	

Browse... Clear Please Select | NO | Normal

Browse... Clear Please Select | NO | Normal

Send Message Upload

▽ **Attachment List**

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CD)	Action
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jan 2019 20:09	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-1-10		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jan 2019 20:09	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-1-10		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jan 2019 20:08	SAS	Normal	SAS 2019-1-10		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jan 2019 20:08	Photos	Normal	Photos 2019-1-10		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jan 2019 20:08	Photos	Normal	Photos 2019-1-10		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jan 2019 20:08	Photos	Normal	Photos 2019-1-10		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jan 2019 20:08	Photos	Normal	Photos 2019-1-10		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jan 2019 20:08	Photos	Normal	Photos 2019-1-10		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jan 2019 20:08	Photos	Normal	Photos 2019-1-10		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jan 2019 20:08	Photos	Normal	Photos 2019-1-10		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jan 2019 20:08	Photos	Normal	Photos 2019-1-10		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jan 2019 20:08	Photos	Normal	Photos 2019-1-10		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jan 2019 20:08	Photos	Normal	Photos 2019-1-10		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 10 Jan 2019 20:08	Photos	Normal	Photos 2019-1-10		Edit

▽ **Video List**

Uploaded By/Date	Folder Date	File Name	Source	Action

Display in New Window | Scan and uploading