

# NATIONAL Assessment Centre Services

(wef 1 Jan 2005)

Date In	11/03/2019 10:10	Job description	Date & Time Completed	Done by
Ref No	NBA/INC19004316/KY	SAS e-filing		
Veh No	SLJ 6269H	E-mail (within 8hrs, AIC 2hrs)		
DOA	08/03/2019 12:30	i-Motor Claim Form	MT/1035644-001	12/31/19 1748
OD TP Reporting Only		i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
TP Insurer		i-Photo Uploaded		
		Assessment/Survey Report		
		Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (

Tel:

Fax:

TP Particulars:

Veh No: SKM 162S 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

NA1901923

## Invoice Preparation Checklist

Am't (\$)

Am't (\$)

1st Bill

Add Bill

Claimant's Particulars:-

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

Driver/Owner:

Contact No:

Damaged Portion:

C Checked by (Engr-In-Charge):

Auditors' Comments:-

1:

2/3:



## 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	11/03/2019 10:10
Date Of Accident	08/03/2019 12:30
Exact Location Of Accident	SINGAPORE CRICKET CLUB ( CARPARK )
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ6269H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HARPAL SINGH
NRIC No	S0245406H
Email Address	HARPALSI@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-96374759
Alternative Phone No	OTHERS-96374759

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E 200CGI
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 CAR

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5094821570-01
Cover Note Number	

### Driver

Name of Driver	HARPAL SINGH
NRIC No	S0245406H
Date Of Birth	12/09/1953
Occupation	INDOOR
Date Of Driving Pass	31/12/1982
Driving Experience	36 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96374759
Fax Number	
Contact Number	OTHERS-96374759
Email Address	HARPALSI@SINGNET.COM.SG

Address	33 BUTTERWORTH LANE #04-02 BUTTERWORTH 33
Postcode	439442
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	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?	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)	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

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	SKM162S
Vehicle Make/Model/Colour	MERCEDES / 230
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MR. TAY
NRIC/Passport Number	
Contact Number	96310683
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.:

8/3/19  
5:15pm

11/3/2019

# Singapore Cricket Clubs (Carpark)

Singapore Cricket Clubs



SKM 1625 (Mercedes)



A 345 62694 (Mercedes)

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was moving to park my car, when another car from the opposite direction was driving ~~out~~ of the car-park. In order to avoid contacting that car, I slowly drove to the left and it was then that I grazed the SKM 1625 that was parked. There was a very slight damage to the paint work of the said car on the right. I have taken the photographs of the damage. My car was also slightly damaged on the left, and only the paint work was affected with slight scratch marks.

## DECLARATION

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

Policyholder's Signature

Date & Time: 8/3/19, 5.15pm

Driver's Signature

(If driver is not the policyholder)

Date & Time: 8/3/19, 5.15pm

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

11/3/2019



(Bulkit Merah)

Reported on 8/3/2019

@ 1715 HRS

## ACCIDENT STATEMENT

ACCIDENT DATE: (8/3/19) (DD/MM/YYYY), TIME: (12:30) (HH:MM) <sup>PM</sup>

LOCATION: SINGAPORE CRICKET CLUB CAR-PARK

### 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLJ 62694 ✓  
b) INSURANCE COMPANY: \_\_\_\_\_  
c) POLICY NUMBER: \_\_\_\_\_  
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)  
e) MAKE & MODEL: \_\_\_\_\_  
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)  
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)  
h) PURPOSE OF USING AT ACCIDENT TIME: \_\_\_\_\_  
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: HARPAL SINGH (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_  
c) ADDRESS: \_\_\_\_\_

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

#### DRIVER

- a) NAME: HARPAL SINGH (MALE / FEMALE)  
b) NRIC/FIN/PASSPORT: S024540614 CONTACT: 96374259 ✓  
c) ADDRESS: 33, BUTTERWORTH LANE  
# 04-02 SINGAPORE 439442.

\* d) DATE OF BIRTH: (12/9/52) (DD/MM/YYYY) ✓

e) OCCUPATION: (INDOOR / OUTDOOR) ✓

f) DATE OF DRIVING PASS

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

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: SKM 1625 MODEL: Mercedes 230  
b) DRIVER'S NAME: Mr. Tay  
c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: 96310683

### 9. THIRD PARTY VEHICLE

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

email = harpalsi@singnet.com.sg

VIDEO

harpalsi@singnet.com.sg ✓

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0245406H



Name  
HARPAL SINGH

Race  
INDIAN  
Date of birth  
12-09-1953  
Country of birth  
SINGAPORE  
Sex  
M

S0245406H



4921381



NRIC No S0245406H

Date of issue  
09-01-2013

Address  
APT BLK 33 CLUB STREET  
#04-20  
SINGAPORE 069415



New Address: 33 BUTTERWORTH LANE  
#04-02 BUTTERWORTH 33  
SINGAPORE 439442





## 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:** 5094821570-01

**Cover :** drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SLJ6269H**  
 Chassis Number : **WDD2120482A392258**
2. Name of Policyholder : **HARPAL SINGH**
3. Effective Date of Insurance : **23 Dec 2018**
4. Expiry Date of Insurance : **22 Dec 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	: YES (FREE)
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: HARPAL SINGH
NAMED DRIVER (1)	: AMARDEEP SINGH GREWAL
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
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)

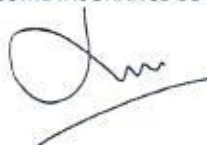
Agency : LQ INSURANCE AGENCY PTE LTD (00000613125)  
 Date of Issue : 12 Dec 2018 12:12 hrs

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.

Date of Accident

08/03/2019 12:30

Vehicle No.(For Motor)

SLJ6269H

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"/>	5094821570-01		HARPAL SINGH	S0245406H	GPC	drive CLASSIC	SLJ6269H	SLJ6269H	23/12/2018	22/12/2019

## ▼ Policy Information

Policy No.	5094821570-01	Policyholder Name	HARPAL SINGH	Policyholder NRIC	S0245406H				
Certificate No.									
Address	33 BUTTERWORTH LANE #04-02 BUTTERWORTH 33 SINGAPORE 439442								
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N				
Policy issue Date	12/12/2018	Effective Date	23/12/2018 00:00	Expiry Date	22/12/2019 23:59				
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						
Agent	LQ INSURANCE AGENCY PTE LTI	Agent Tel.	63340783	GST Flag	Y				
Co-insurance Flag	No								
Open Policy Info									
Certificate Info									

## ▼ Policyholder Mailing Address

Address 1	33 BUTTERWORTH LANE	Address 2	#04-02 BUTTERWORTH 33	Address 3	SINGAPORE 439442
Address 4		Address Type	Singapore address	Post Code	439442
Unit No.		Related Policy Number	5094821570-01		

## ► Insured Object: SLJ6269H

## ▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
<div>Continue Cancel</div>				



Claim Handling

Accident MT/1035644

Policy No.	5094821570-01	Vehicle No.	SLJ6269H	GST Registration No.
Certificate No.				
Policyholder Name	HARPAL SINGH			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading
Contact No.(Mobile)	96374759	Contact No.(Office)	0	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	Yes	NCD Entitlement(%)	50	Private Hire

▼ Accident Details

Report Date	12/03/2019 17:40	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	08/03/2019	Time of Accident hh:mm	12:30	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	SINGAPORE CRICKET CLUB ( CARPARK )			

▼ Excess

Own damage Excess	600.00	Additional Excess	0	Windscreen Excess
Unnamed Driver Excess	0.00	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	33 BUTTERWORTH LANE	Address 2	#04-02 BUTTERWORTH 33	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5094821570-01	

▼ OI Driver Info

Driver Name	HARPAL SINGH	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	S0245406H	Driver DOB
Register Date of Driver License	31/12/1986	Driver Age	65	Driving Experience
Contact No.(Mobile)	96374759	Contact No.(Office)	0	Contact No.(Home)
Address 1	33 BUTTERWORTH LANE	Address 2	BUTTERWORTH 33	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	#04-02			
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	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 001 OD-MX New

Claim Type *	OD-MX	Insured Name	HARPA
Contact No.(Mobile)	96374759	Contact No.(Home)	623833
Email Address	harpalsi@singnet.com.sg	Vehicle Number	SLJ626
Claim Description	SLJ6269H / SKM162S ON 8 Mar 2019		
Preferred Workshop	<input type="text"/>	Insured Liability	Partially at Fault
Report No.	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Finalisation		GIA report	Received
Date Registered			12/03/2019 17:49
Report Taken By			
<input checked="" type="checkbox"/> Print AK letter			

Claim Close Date

Workshop Repairer

Save

Submit

Attachment

Accident No.

MT/1035644

Claim No.

001

Last Doc. Received

☒ Yes

☐ No

Upload Date

12/03/2019 17:45

Path \*

Category \*

Confidential

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

Choose File

No file chosen

Choose File

No file chosen

Message Read

Clear

Please Select

NO

Clear

Please Select

NO

Clear

Please Select

NO

Clear

Please Select

NO

Clear

Please Select

NO

Clear

Please Select

NO

Clear

Please Select

NO

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Des
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:48	NRIC/ Driving License	Normal	NRIC/ Driving I
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:47	SAS	Normal	SAS 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:46	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:46	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:46	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:46	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:46	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:46	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:45	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:45	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:45	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:45	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:45	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:45	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:44	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:44	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:44	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:44	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 12 Mar 2019 17:44	Photos	Normal	Photos