

NATIONAL Assessment Centre Services.

[part 1 Jan 2003]

MMA 119040597

Date In: 28/13/19 15:45	Job description: SAS e-filing	Date & Time Completed:	Done by:
Ref No: MA/INC19005549/64	E-mail (within 2hrs, AIC 2hrs)		
Veh No: GBE 76602	I-Motor Claim Form	MT/103786 ⁰⁰¹	28/3/19 16:04
D.O.A: 18/13/19 22:00	I-Motor W/O (within: OD 2hrs, TP 4hrs)		
OD / TP / Repeating Only	I-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / GW: (Tel:	Fax:
TP Particulars:	Veh No: Unknown	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 Module 367896016)	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

MA1902267	Invoice Rep/Repairation Checklist	Am (\$)	Stable (\$)
Claimant's Particulars:	1) AR: Accident Reporting (\$30)	30.00	
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TP: Towing Fee \$40/\$45		
Damaged Portion:	4) PT: Follow-Through Survey \$120		
QC Checked by (Engr-In-Charge):	5) PT: Follow-Through Survey (Resurvey) \$30		
Auditors' Comments:	For retaining against INC Only (ver 10 Jan 2003)		
	6) TR: Re-inspection \$75		
	7) NI: Idan DA + SMRT Survey \$160		
	8) NTUC Additional Services:		
	ON:		
	*N5: Courtesy Car / Tpt Allowance \$5		
	*N6: Repair Coordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Receipt Coordination \$5		
	TP (N11): TP (Inc-INC) against INC \$20		
	9) N12: Idan Mobile \$0		
	Invoice dated	Fee Charged	
	Invoice dated	Fee Charged	

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy 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	28/03/2019 15:45
Date Of Accident	18/03/2019 22:00
Exact Location Of Accident	ALONG GEYLANG RD LOT 22 NEAR LOR 21
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBE7660Z
Insured/Policyholder	
Name Of Registered Owner	LOUIS AIR CONDITION & ENGINEERING
Co Reg No	53095698E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-94879917
Vehicle Particulars	
Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	PARKED
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5088021537-02
Cover Note Number	-
Driver	
Name of Driver	HUI CHEE GUAN
NRIC No	F7616684Q
Date Of Birth	25/10/1970
Occupation	OUTDOOR
Date Of Driving Pass	10/12/2015
Driving Experience	3 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91693043
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 22 LORONG 23 GEYLANG
Postcode	388362
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ALJUNIED NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 13 JOO SENG ROAD , POSTCODE: 360013 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2809999 - FAX NO: 62815960
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

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

No. Of Passenger (Including Driver)

SKETCH PLAN

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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

Please Refer to Police Report

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: 18/3/19 (DD/MM/YYYY), TIME: (22:00) (HH:MM)

LOCATION: Along Sims Ave near to Lor 21 Geylang
Lot no 22.

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GBE 76602
b) INSURANCE COMPANY: IUC
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: Parked
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: Louis Air Condition & engineering (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: 94879917
c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Hui Chee Guan (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: 91693043
c) ADDRESS: _____

* d) DATE OF BIRTH: (____/____/____) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: _____

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
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: Aljunied NPP.

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: Unknown. 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: _____

Waiting chop.

Email = Louis - aircon @ hotmail . com .

fax =

VIDEO = No.



SINGAPORE POLICE FORCE



T/20190319/2091

Police Station Of Origin:
Aljunied NPP
13 Joo Seng Road #01-69 SINGAPORE
360013
Tel No: 1800-2809999

1 of 3

Report No. T/20190319/2091

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/03/2019 15:46		Vide Report No.:		Station Diary No.: 18	
Informant's Particulars					
Name of Informant: HUI CHEE GUAN			Address: C/O APT BLK 22 Lorong 23 Geylang SINGAPORE 388362		
ID Type / ID No.: FIN NO / F7616684Q			Contact No.: Home/Office: Mobile: 91693043		
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 48	Date of Birth: 25/10/1970	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: CONSTRUCTION WORKER			Driving Licence Information: Class: 2B,3 Date of Expiry: 27/10/2020		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 18/03/2019 22:00	Type of Location: Straight Road
Location: Along Road 1 SIMS AVENUE Along Sims Ave near to Lor 21 Geylang, lot number 22.				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBE7660Z	Lorry	TOYOTA		Grey	Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



Police Station Of Origin:
Aljunied NPP
13 Joo Seng Road #01-69 SINGAPORE
360013
Tel No: 1800-2809999

Report No. T/20190319/20

CONTINUATION OF REPORT

Driver			
Name	HUI CHEE GUAN	ID No.	F7616684Q
Related Vehicle	GBE7660Z (Lorry)	Contact No.	91693043
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: 27/10/2020
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 18/03/2019 at about 2200hrs, I parked my company lorry bearing registration GBE7660Z along Sims Ave near to Lorong 21 Geylang, lot number 22. That was the last time I saw everything intact. On 19/03/2019 at about 0730hrs, I retrieved my lorry and discovered that there was a dent on the left passenger door area and there was debris of vehicle parts on the road. I believed that my lorry was involved in a hit and run accident. I have an in-vehicle camera installed however there was no memory card in the camera. I am unsure if there is any CCTV focusing on the parking lot.



**SINGAPORE
POLICE FORCE**



T/20190319/2091

Police Station Of Origin:
Aljunied NPP
13 Joo Seng Road #01-69 SINGAPORE
360013
Tel No: 1800-2809999

3 of 3

Report No. T/20190319/2091

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:
E /
Staff Sgt MUHAMMAD AFIQ BIN SAIFUL
BAHRY

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / HRT /
Sr Staff Sgt TAN JEOK LENG
Contact No.: 65476144

SINGAPORE
POLICE FORCE

Signature Of Informant:

Date/Time:
19/03/2019 15:46

Classification Of Case:

SN 029

Authentication Stamp
NP168

SIGN

WORK PERMIT
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer
LOUIS AIR CONDITION & ENGINEERING

Sector: **CONSTRUCTION**

Name
HUI CHEE GUAN

Occupation
CONSTRUCTION WORKER

Work Permit No.
S 17109509

Date of Application
06-04-2015

Date of Issue
12-04-2017

Date of Expiry
13-04-2019

L7824671

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **F7616684Q**

Name: **HUI CHEE GUAN**

Birth Date: **25 Oct 1970**

Issue Date: **28 Oct 2015**

Valid Till: **27/10/2020**

002487868J

SG 50

VISIT PASS
Immigration Regulations

Name
HUI CHEE GUAN

Date of Birth: **25-10-1970** Sex: **M** Nationality: **MALAYSIAN**

Pin: **F7616684Q** Date of Issue: **12-04-2017** Date of Expiry: **13-04-2019**

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.

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

Class	Vehicle Class	Effective Date
Class 2B	MOTORCYCLES NOT EXCEEDING 200 CC	28 Oct 2015
Class 3	MOTOR CARS AND MOTOR TRACTORS THE WEIGHT OF WHICH UNLADEN DOES NOT EXCEED 2000 KILOGRAMS	10 Dec 2015

F7616684Q

S / No. 9000226653

Licence No: F7616684Q

NP 428A

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="18/03/2019 14:17"/>
Vehicle No.(For Motor)	<input type="text" value="GBE7660Z"/>	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"/>	5088021537-02		LOUIS AIR CONDITION & ENGINEERING	53095698E	GCV	Comprehensive	GBE7660Z	GBE7660Z	17/03/2019	16/03/2020

Claim Handling

The premium on this policy has not been collected.

Accident MT/1037860

Policy No.	5088021537-02	Vehicle No.	GBE7660Z	GST Registration No.	NA
Certificate No.					
Policyholder Name	LOUIS AIR CONDITION & ENGINEERING	Cover Type	Comprehensive	Policyholder NRIC	53095698E
Product Code	COMMERCIAL VEHICLE INSURANCE	Contact No.(Office)		Loading	0
Contact No.(Mobile)	94879917	Special Remark		Contact No.(Home)	
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	No
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	No			Private Hire	No

▼ Accident Details

Report Date	28/03/2019 16:00	Accident Report Within 24 hrs	Yes	Accident Type	Damage
Date of Accident	18/03/2019	Time of Accident hh:mm	22:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG GEYLANG RD LOT 22 NEAR LOR 21				

▼ Excess

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

▼ Benefits

▼ GST Registered Information

GST Registered	Yes	GST Registration Date	01/03/2015
GST Registration No.	53095698E	GST Status Verified	Yes
Modification History	28/03/2019 16:02:37 System changed GST Registration No. from NA to 53095698E 28/03/2019 16:02:37 System changed GST Registration Date from 01/01/2015 to 01/03/2015 28/03/2019 16:02:37 System changed GST Status Verified from No to Yes		

▼ Policyholder Mailing Address

Address 1	22 LORONG 23 GEYLANG	Address 2	SINGAPORE 388362	Address 3	
Address 4		Address Type	Singapore address	Post Code	388362
Unit No.		Related Policy Number	5088021537-02		

▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	HUI CHEE GUAN	Driver NRIC	F7616684Q	Driver DOB	25/10/
Register Date of Driver License	10/12/2015	Driver Age	48	Driving Experience	3
Contact No.(Mobile)	91693043	Contact No.(Office)		Contact No.(Home)	
Address 1	22 LORONG 23 GEYLANG	Address 2	# TACPLAS HOUSE	Address 3	SINGAPORE
Address 4		Address Type	Singapore address	Post Code	388362
Unit No.					
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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Modification History

Claim 001

New

Claim Type *

Contact No.(Mobile)

Email Address

Claim Description

Preferred Workshop	<input type="radio"/> Yes <input checked="" type="radio"/> No	Insured Liability	Not at Fault	GIA report	Received	Claim Close Date	
Preferred Workshop, Name unknown							
Date Registered						28/03/2019 16:03	
Report Taken By						LIEW SHAN HUI	

☒ Print AK letter

Save

Submit

Attachment

Accident No.

Claim No.

MT/1037860

001

Last Doc. Received

* Yes ☐ No ☐

Upload Date

28/03/2019 16:04

Path *

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

Category *

Please Select ▼

Confidential

NO ▼

Urgency *

Normal ▼

Clear

Please Select ▼

NO ▼

Normal ▼

Clear

Please Select ▼

NO ▼

Normal ▼

Clear

Please Select ▼

NO ▼

Normal ▼

Clear

Please Select ▼

NO ▼

Normal ▼

Clear

Please Select ▼

NO ▼

Normal ▼

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Mar 2019 16:04	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-3-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Mar 2019 16:04	SAS	Normal	SAS 2019-3-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Mar 2019 16:04	Photos	Normal	Photos 2019-3-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Mar 2019 16:04	Photos	Normal	Photos 2019-3-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Mar 2019 16:03	Photos	Normal	Photos 2019-3-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Mar 2019 16:03	Photos	Normal	Photos 2019-3-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Mar 2019 16:03	Photos	Normal	Photos 2019-3-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Mar 2019 16:03	Photos	Normal	Photos 2019-3-28
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Mar 2019 16:03	Photos	Normal	Photos 2019-3-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Mar 2019 16:03	Photos	Normal	Photos 2019-3-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Mar 2019 16:03	Photos	Normal	Photos 2019-3-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Mar 2019 16:03	Photos	Normal	Photos 2019-3-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Mar 2019 16:03	Photos	Normal	Photos 2019-3-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Mar 2019 16:03	Photos	Normal	Photos 2019-3-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 Mar 2019 16:03	Photos	Normal	Photos 2019-3-28

Video List

Uploaded By/Date

Folder Date

File Name

Source

Display in New Window

Scan and uploading