

# NATIONAL Assessment Centre Services

Date In: 17/06/19	Job description	Date & Time Completed	Done by
Ref No: NA/INC19010245/13	SAS e-filing		
Veh No: SJR 7027P	E-mail (within 8 hrs. A/C 2hrs)		
D.O.A: 15/06/19 2000	i-Motor Claim Form	17/06/2019 - 001	
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: ( HUP 5000 )	Tel: ( )	Fax: ( )
TP Particulars:	Veh No: 4M6932D	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

NA1904317	<b>Invoice Preparation Checklist</b>	Amt (\$) 1st Bill	Amt (\$) Add Bill
<b>Claimant's Particulars :-</b>	1) AR : Accident Reporting (\$30);		
<b>Driver/Owner:</b>	2) DA : Damage Assessment (\$100); INC (\$80)		
<b>Contact No:</b>	3) TF : Towing Fee \$40/\$45		
<b>Damaged Portion:</b>	4) FT : Follow-Through Survey \$120		
<b>QC Checked by (Engr-In-Charge):</b>	5) FT : Follow-Through Survey (Resurvey) \$30		
<b>Auditors' Comments :-</b>	For claiming against INC Only (wef 10 Jan 2005)		
<b>Cat 1:</b>	6) TR : Re-inspection \$75		
<b>Cat 2 / 3:</b>	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 (N-on 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 17/06/2019 10:23  
 Date Of Accident 15/06/2019 20:00  
 Exact Location Of Accident ONAN RD TWDS GEYLANG RD  
 Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SJR7027P  
**Insured/Policyholder**  
 Name Of Registered Owner NI XIANGRONG  
 NRIC No S2737461A  
 Email Address NOEMAIL  
 Mobile Phone No (LOCAL) +65-98523140  
 Alternative Phone No OTHERS-98523140

### Vehicle Particulars

Manufacturer TOYOTA  
 Model ALLION  
 Exact Purpose for which vehicle was being used at time of accident GOING HOME  
 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 5050162103-07  
 Cover Note Number

### Driver

Name of Driver XU FEI  
 Passport No/FIN G6600512M  
 Date Of Birth 12/10/1983  
 Occupation OUTDOOR  
 Date Of Driving Pass 02/03/2017  
 Driving Experience 2 YEARS AND 3 MONTHS  
 Gender MALE  
 Mobile Number (LOCAL) +65-90698566  
 Fax Number  
 Contact Number  
 EMail Address NOEMAIL

Address	BLK 119B RIVERVALE DRIVE #11-320
Postcode	542119
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	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	YM6933D
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:

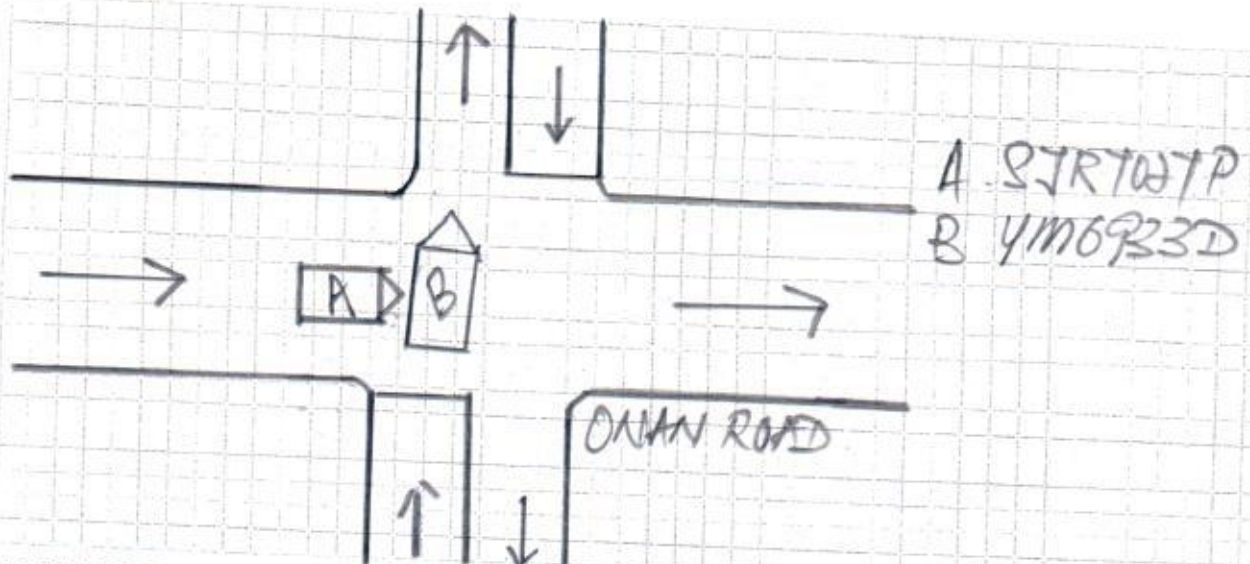
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

Policyholder's Signature  
Date & Time:

  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

 17/06/19  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELING ALONG ONAN ROAD TOWARDS GEYLANG ROAD. OUT OF SUDEN VEH B DASH OUT FROM MY RH MINOR ROAD AND HIT ONTO MY VEH FRONT PORTION.

I NEEDED TO CLARIFY MY VEH NUMBER IS SJRTWTP NOT SJRTJOTP BECAUSE I JUST DONE MY VEH BODY WORK AND REPAIR 3 DAYS AGO I DID NOT DISCOVER WORKSHOP INSTALLED WRONG NUMBER PLATE ON MY CAR UNTILL THE ACCIDENT HAPPENED LAST NITE WHEN I NOTICE MY CAR PLATE NUMBER IS WRONG.

## 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.:





# HS AUTOMOTIVES PTE LTD

Blk 2 KAKI BUKIT AVE 2 @ KAKI BUKIT AUTOHUB #02-25 SINGAPORE 417921.

TEL: 6538 1368 FAX: 6538 1367 Email add: hsautomotivespl@gmail.com

VEHICLE NO: SJR 7027D

MAKE/MODEL: TOYOTA ALLION

DATE OF ACCIDENT 15/6/2019  
DAY/MONTH/YEAR

TIME 20 HR 00 MIN AM/PM

LOCATION OF ACCIDENT GOMOH HOUSE

EXACT PURPOSE USE DURING ACCIDENT ONWAY ROAD TOWARDS GIZYLANG ROAD

## CAR OWNER

NAME OF CAR OWNER NI XIANG RONG

CONTACT NO 98523140

NRIC 82737461A

CLAIM TYPE ☐ OD ☒ THIRD PARTY ☐ REPORTING ONLY

INSURANCE COMPANY NTUC

TYPE OF COVERAGE ☒ COMPREHENSIVE ☐ THIRD PARTY ☐ THIRD PARTY FIRE & THEFT

POLICY NO 5050162103-07

## ACCIDENT DRIVER

NAME OF DRIVER XU ZE1

NRIC 816600512M

DATE OF BIRTH 12-OCT-1983

OCCUPATION

DATE OF DRIVING PASS 02 MAR 2017

GENDER

CONTACT NO 90698566

ADDRESS BLK 119B RIVERVALE DRIVE #11-320 S5A2119

NO OF PASSENGER/S 0

☒ OUTDOOR ☐ INDOOR

☒ MALE ☐ FEMALE

DRIVER OWN ANY VEHICLE NO/ IF YES- REGISTRATION NO

RELATIONSHIP EMPLOYEE/SPOUSE IF NOT:

WEATHER CONDITION

ROAD SURFACE

ANY INJURIES

CONTACT NO

POLICE REPORT

VIDEO FOOTAGE

## 3RD PARTY INFO

VEHICLE B NO YM6933D

NAME

CONTACT NO

VEHICLE C NO

VEHICLE D NO

VEHICLE E NO

VEHICLE F NO

ANY WITNESS

WITNESS CONTACT NO

NO OF PASSENGER/S 0

NO OF PASSENGER/S

NO OF PASSENGER/S

NO OF PASSENGER/S

NO OF PASSENGER/S

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **G6600512M**

Name: **XU FEI**

Birth Date: **12 Oct 1983**

Issue Date: **02 Mar 2017**

Valid Till: **01/03/2022**

002662116B

**For LKK/NAC Use Only**

EMPLOYMENT PASS

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

Employer:  
**XINLIANHE CONSTRUCTION ENGINEERING (S) PTE LTD**

Name:  
**XU FEI**

FIN:  
**G6600512M**

K0492543

**For LKK/NAC Use Only**

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

	EFFECTIVE DATE
Class 3 Motor cars with unladen weight $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq$ 2500kg	02 Mar 2017

NP 428A



VISIT PASS

Immigration Regulations

18-08-2018

Name:  
**XU FEI**

FIN:  
**G6600512M**

Date of Birth:  
**12-10-1983**

Sex:  
**M**

Nationality:  
**CHINESE**

MULTIPLE JOURNEY VISA ISSUED

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

Download SGWorkPass App to check status

**For LKK/NAC Use Only**



## 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:** 5050162103-07

**Cover :** drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SJR7027P**  
Chassis Number : NZT2603038877
2. Name of Policyholder : NI XIANGRONG
3. Effective Date of Insurance : 10 Jul 2018
4. Expiry Date of Insurance : 09 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	: NI XIANGRONG
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: MAYBANK
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 : HUA YANG CREDIT PTE LTD (00000613824)  
Date of Issue : 02 Jul 2018 11:11 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:



Authorised Officer



Chief Executive



> Back to OneMotoring

## Enquire Transfer Fee

### Vehicle Details

Vehicle No.:	SJR7027P
Vehicle Type:	P10 - Passenger Motor Car
Vehicle Attachment 1:	No Attachment
Vehicle Scheme:	Normal
Vehicle Make:	TOYOTA
Vehicle Model:	ALLION 1.5 A
Chassis No.:	NZT2603038877
Propellant:	Petrol
Engine No.:	1NZD308253
Engine Capacity:	1496 cc
Maximum Power Output:	81.0 kW (108 bhp)
Maximum Laden Weight:	1475 kg
Unladen Weight:	1200 kg
Year Of Manufacture:	2008
Original Registration Date:	09 Jul 2009
Lifespan Expiry Date:	-
COE Category:	E - Open Category
Quota Premium:	\$12,901.00
COE Expiry Date:	08 Jul 2019
Road Tax Expiry Date:	08 Jul 2019
PARF Eligibility Expiry Date:	08 Jul 2019
Inspection Due Date:	08 Jul 2020
Intended Transfer Date:	17 Jun 2019
CO2 Emission:	-
CO Emission:	-
HC Emission:	-
NOx Emission:	-
PM Emission:	-

Late renewal fee(s) will be imposed if road tax / lay-up has expired. Please use Enquire Road Tax Payable for fee(s) payable.

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

### Amount Payable

	Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Transfer Fee:	25.00	-	25.00
<b>Total Amount Payable:</b>			<b>25.00</b>

### Message

From 18 Feb 2019, the Government has further reduced the annual special tax by \$100 and \$850 for diesel and diesel-hybrid cars and taxis respectively. The Government will also grant road tax rebates for diesel and diesel-hybrid buses and goods vehicles for a 3-year period from 1 Aug 2019. The current enquiry result does not include the revised special tax reduction and road tax rebate commencing 1 Aug 2019. Please refer to the [Press Release](#) for more information.

You may print this page for reference.

OK

Print

## Claim Handling

## Accident MT/1049224

Policy No.	5050162103-07	Vehicle No.	SJR7027P	GST Registration No.
Certificate No.				
Policyholder Name	NI XIANGRONG			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading
Contact No.(Mobile)	98523140	Contact No.(Office)	0	Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input type="radio"/> No <input checked="" 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	17/06/2019 10:53	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	15/06/2019	Time of Accident hh:mm	20:00	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	ONAN RD TWDS GEYLANG RD			

## ▼ Excess

Own damage Excess	600.00	Additional Excess	0	Windscreen Excess
Unnamed Driver Excess	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	186 ONAN ROAD	Address 2	SINGAPORE 424572	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5050162103-07	

## ▼ OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	
Unnamed driver Name	XU FEI	Driver NRIC	G6600512M	Driver DOB
Register Date of Driver License	02/03/2017	Driver Age	35	Driving Experience
Contact No.(Mobile)	90698566	Contact No.(Office)	0	Contact No.(Home)
Address 1	BLK 119B	Address 2	RIVERVALE DRIVE	Address 3
Address 4	SINGAPORE 542119	Address Type	Singapore address	Post Code
Unit No.	#11-320			
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	NI XIANGRONG
Contact No.(Mobile)		Contact No. (Home)	633657
Email Address		Vehicle Number	SJR702
Claim Description	SJR7027P / YM6933D ON 15 Jun 2019		
Preferred Workshop		Insured Liability	Not at Fault
Contact No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered		GIA report	Received
Report Taken By		Claim Close Date	17/06/2019 10:57
<input checked="" type="checkbox"/> Print AK letter		Workshop Repairer	ROSLINDA



## Attachment



Accident No. MT/1049224 Claim No. 001  
 Last Dec. Received ☒ Yes ☐ No Upload Date 17/06/2019 00:00

Path \*

 No file chosen

 No file chosen

 No file chosen

 No file chosen

 No file chosen

 No file chosen



Category *	Confidential
Please Select ▼	NO
Please Select ▼	NO
Please Select ▼	NO
Please Select ▼	NO
Please Select ▼	NO
Please Select ▼	NO
Please Select ▼	NO

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Des
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Jun 2019 10:57	NRIC/ Driving License	Normal	NRJC/ Driving I
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Jun 2019 10:57	SAS	Normal	SAS 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Jun 2019 10:57	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Jun 2019 10:57	Photos	Normal	Photos
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Jun 2019 10:57	Photos	Normal	Photos
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	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) on 17 Jun 2019 10:57	Photos	Normal	Photos

## Video List

Uploaded By/Date

Folder Date

File Name

