

NATIONAL Assessment Centre Services (wef 1 Jan 2005) **MWAL1987X07**

Date In: 16/1/19 - 16:17	Job description	Date & Time Completed	Done by
Ref No: MWAL1987X07	SAS e-filing		
Veh No: 2KJ2367X	E-mail (within 8hrs, AIC 2hrs)		
D.O.A: 17/1/19 - 23:20	i-Motor Claim Form	M7/1053885-001	16/1/19 17:08
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: 561615M 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

HA105310	Invoice Preparation Checklist		Amt (\$)	Amt (\$)
			Est Bill	Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);			
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$30)			
Contact No:	3) TF: Towing Fee \$40/\$45			
Damaged Portion:	4) FT: Follow-Through Survey \$120			
QC Checked by (Engr-In-Charge):	5) FT: Follow-Through Survey (Resurvey) \$30			
Auditors' Comments:-	For claiming against INC Only (wef 10 Jan 2005)			
	6) TR: Re-inspection \$75			
Dat. 1:	7) N1: Idac DA + SMRT Survey \$160			
Dat. 2 / 3:	8) NTUC Additional Services:-			
	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 willful 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	16/07/2019 16:13
Date Of Accident	15/07/2019 23:20
Exact Location Of Accident	MALAYSIA CUSTOM TWDS SINGAPORE
Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKJ2367X
Insured/Policyholder	
Name Of Registered Owner	LIEW SER WEE
NRIC No	S7627910A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97651544
Alternative Phone No	OFFICE-97651544

Vehicle Particulars

Manufacturer	TOYOTA
Model	ALPHARD 2.4S A
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	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	5110155448
Cover Note Number	

Driver

Name of Driver	LIEW SER WEE (LIU ZHIWEI)
NRIC No	S7627910A
Date Of Birth	04/09/1976
Occupation	INDOOR
Date Of Driving Pass	21/03/1995
Driving Experience	24 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97651544
Fax Number	
Contact Number	OFFICE-97651544
EMail Address	NOEMAIL

Address BLK 122E RIVERVALE DRIVE
#03-474
Postcode 545122
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 -
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?
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) 5
Passenger 1
NAME: : DAVE GOO
GENDER: : MALE
Passenger 2
NAME: : MEILING
GENDER: : FEMALE
Passenger 3
NAME: : TAN GIOK KHIM
GENDER: : FEMALE
Passenger 4
NAME: : BELL
GENDER: : FEMALE

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 SLK6115M
Vehicle Make/Model/Colour
Details Of Properties

Vehicle Category	PRIVATE CAR
Name of Driver	LEONG KOH CHOI (LIANG GUO CAI)
NRIC/Passport Number	S8034624G
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	4
Passenger 1	NAME: : GENDER: :
Passenger 2	NAME: : GENDER: :
Passenger 3	NAME: : GENDER: :

SKETCH PLAN

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1. Please report **correctly** the details of the accident to speed up the claims process.
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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.

 16/7/19

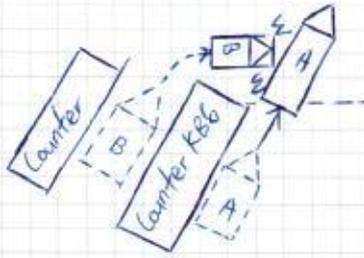
Policyholder's Signature
Date & Time:

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


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

SKETCH PLAN

Veh A: SKJ2367X
Veh B: SLK6115M



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was entering Singapore via the Custom Counter. As I was exiting and out of the counter, Veh B (SLK6115M) suddenly dashed towards my direction at a very fast speed and bang into the left side of my door. We then exchange particulars and left the scene. No one was injured.

DECLARATION

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

 16/7/19

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.:

VEHICLE NO : SKJ2367X		MAKE/MODEL : TOYOTA ALPHARD	
Date of Accident	15/07/2019	Time: 18:20	Foreign Veh Involved YES/NO
Location of Accident	MALAYSIAN CUSTOM COUNTER ENTRANCE	Foreign Veh No	
Country of Loss	TO SINGAPORE		
Vehicle Damaged		No. of Veh Involved : 2	
Claim Type	OD / TP / REPORTING	Was There Any Witness	YES/NO
INSURANCE CO	NTUC INCOME	Name of Witness :	
Coverage	Comprehensive/TPFT/Third Party Only	Contact No	:
Policy No	5110155448		
Fleet Policy	YES/NO		
OTHER VEHICLES			
OWNER / CO. NAME	LIEW SER WEE (LIU ZHIWEI)	VEHICLE B	: SLK6115M
NRIC / Co's Reg No.	S7627910A	Category	:
Address	APT BLK 122E RIVERVALE DRIVE #03-474 SINGAPORE 545122	Driver's Name	: LEONG KOH CHAI (LIANG QUN) (AI)
Contact / Mobile No	97651544	NRIC No	: S80346246
Email Address	ANDY@NOPHOTOGRAPHY.COM.SG	Contact No	:
Date of Birth	04/09/1976	No. of Passenger	: 3 F
Gender	M/F		
DRIVER'S NAME	AS ABOVE	VEHICLE C	:
NRIC No		Category	:
Address		Driver's Name	:
		NRIC No	:
Contact / Mobile No		Contact No	:
Email Address		No. of Passenge	:
Date of Birth			
Gender	M/F	VEHICLE D	:
LICENSE PASSED DATE	21/03/1995	Category	:
Occupation	Indoor/Outdoor	Driver's Name	:
Relation with Owner	OWNER	NRIC No	:
		Contact No	:
		No. of Passenger	:
Does Driver Own Any Other Veh? YES/NO			
Vehicle Reg No			
Insurance Co			
Weather Condition	Clear/Raining/Others	Video Captured	: Yes/NO
Road Surface	Dry/Wet/Others		
INJURED : YES/NO			
Name of Injured	:	Police Report	: YES/NO
Convey To Hospital by Ambulance	: YES/NO	If YES, Where	:
NO. OF PASSENGERS : 4			
Name of Passenger	: Dave Goo (male)	M/F	INJURED? YES/NO
Name of Passenger	: Meiling (female)	M/F	INJURED? YES/NO
Name of Passenger	: Tan Gork (male) Khim (male)	M/F	INJURED? YES/NO
Name of Passenger	: Bell (female)	M/F	INJURED? YES/NO
REMARKS :			
Name of Workshop	: SUCCESS UNITED PTE LTD	Contact No	:
Address	: 2 Kaki Bukit AutoHub Kaki Bukit Ave 2, #01-33/#02-29 Singapore 417921 Tel: 6746 1515	Email	: keong@successunited.com.sg

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **S7627910**

Name: **LIEW SER WEE (LIU ZHIWEI)**

Birth Date: **04 Sep 1976**

Issue Date: **09 Dec 2003**

001041790K




REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7627910A**

Name: **LIEW SER WEE (LIU ZHIWEI)**

Race: **CHINESE**

Date of Birth: **04-09-1976** Sex: **M**

Country of Birth: **SINGAPORE**




For LKK/NAC Use Only

YOU ARE LICENCED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

Class	Description	PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	21 May 1993
Class 2A	Motorcycles between 201 cc and 400 cc	16 Jun 1994
Class 2	Motorcycles exceeding 400 cc	06 May 1997
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	21 Mar 1995

NP 428A

Licence No: **S7627910A**



For LKK/NAC Use Only

3146677

Barcode

NRIC No: **S7627910A**

Blood Group: **B+** Date of issue: **15-04-2000**

Address: **APT BLK 122E RIWVALE DRIVE #03-474 SINGAPORE 545122**

NRIC No: **S7627910A** Date: **24-12-2004** No: **5103736**



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: 5110155448 **Cover :** drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SKJ2367X**
 Chassis Number : ANH208256862
 2. Name of Policyholder : LIEW SER WEE
 3. Effective Date of Insurance : 07 Jun 2019
 4. Expiry Date of Insurance : 06 Jun 2020

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	: LIEW SER WEE (LIU ZHIWEI)
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: TOKYO CENTURY LEASING (SINGAPORE) PTE 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 : KHC HOLDINGS PTE LTD (00000613934)

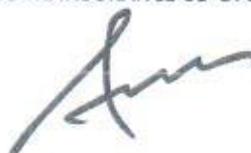
Date of Issue : 06 Jun 2019 17:06 hrs

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

Vehicle No.(For Motor) Certificate Number

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5110155448		LIEW SER WEE	S7627910A	GPC	drive CLASSIC	SKJ2367X	SKJ2367X	07/06/2019	06/06/2020

Continue

▼ Policy Information

Policy No.	5110155448	Policyholder Name	LIEW SER WEE	Policyholder NRIC	S7627910A
Certificate No.					
Address	BLK 122E #03-474 RIVERVALE DRIVE SINGAPORE 545122				
Product Name	PRIVATE CAR INSURANCE	Plan			
Policy issue Date	06/06/2019	Effective Date	07/06/2019 00:00	Expiry Date	06/06/2020 23:59
Excess Type	Per Accident	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	KHC HOLDINGS PTE LTD	Agent Tel.	62538288	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

▼ Policyholder Mailing Address

Address 1	BLK 122E #03-474	Address 2	RIVERVALE DRIVE	Address 3	SINGAPORE 545122
Address 4		Address Type	Singapore address	Post Code	545122
Unit No.		Related Policy Number	5110155448		

↳ Insured Object: SKJ2367X

▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
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Claim Handling

Exit

Accident MT/1053685

Policy No.	5110155448	Vehicle No.	SKJ2367X	GST Registration No.	
Certificate No.					
Policyholder Name	LIEW SER WEE			Policyholder NRIC	S7627910A
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	97651544	Contact No.(Office)	0	Contact No.(Home)	0
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	No
Accident Details					
Report Date	16/07/2019 16:25	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	15/07/2019	Time of Accident (hh:mm)	23:20	Country of Accident	Outside Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	MALAYSIA CUSTOM TWOS SINGAPORE				
Total Excess Applicable					
Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	800.00	TP Standard Excess	0.00	Driver is Covered?	Covered
YIED OD Excess	0.00	YIED TP Excess	0.00		
Additional Excess	0	Total TP Excess Applicable	0.00		
Total OD Excess Applicable	800.00				

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

Policyholder Mailing Address					
Address 1	BLK 122E #03-474	Address 2	RIVERVALE DRIVE	Address 3	SINGAPORE 545122
Address 4		Address Type	Singapore address	Post Code	545122
Unit No.		Related Policy Number	5110155448		

DI Driver Info					
Driver Name	LIEW SER WEE (LIU ZHONG)	Driver Type	Main Driver	Driver DOB	04/09/1976
Unnamed driver Name		Driver NRIC	S7627910A	Driving Experience	24
Register Date of Driver License	21/03/1995	Driver Age	42	Contact No.(Home)	0
Contact No.(Mobile)	97651544	Contact No.(Office)	0	Address 3	SINGAPORE 545122
Address 1	BLK 122E	Address 2	RIVERVALE DRIVE	Post Code	545122
Address 4		Address Type	Singapore address		
Unit No.	03-474				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" 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

Modification History

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	LIEW SER WEE	Insured NRIC	S7627910A
Contact No.(Mobile)	97651544	Contact No.(Home)	67158185	Contact No.(Office)	NIL
Email Address		OT Vehicle Number	SKJ2367X	TP Vehicle Number	SLK6115M
Claimant Type	Please Select	Type of Benefit *	Please Select		
Claimant Name *		Claimant NRIC *			
Claimant Address					
Claim Description	SKJ2367X / SLK6115M ON 15 Jul 2019				
Preferred Workshop Contact No.		Insured Liability *	Partially at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	16/07/2019 17:08	Claim Close Date		Date Received	16/07/2019 00:00
Report Taken By	Jackson				

Print AK letter

Save Submit

Attachment

Accident No.	MT/1053685	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	16/07/2019 17:09

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

<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	NG	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	NG	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	NG	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	NG	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	NG	Normal

Send Message

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CD)	Action
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 16 Jul 2019 17:09	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-7-16		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 16 Jul 2019 17:09	SAS	Normal	SAS 2019-7-16		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 16 Jul 2019 17:09	Photos	Normal	Photos 2019-7-16		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 16 Jul 2019 17:09	Photos	Normal	Photos 2019-7-16		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 16 Jul 2019 17:08	Photos	Normal	Photos 2019-7-16		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 16 Jul 2019 17:08	Photos	Normal	Photos 2019-7-16		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 16 Jul 2019 17:08	Photos	Normal	Photos 2019-7-16		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 16 Jul 2019 17:08	Photos	Normal	Photos 2019-7-16		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 16 Jul 2019 17:08	Photos	Normal	Photos 2019-7-16		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 16 Jul 2019 17:08	Photos	Normal	Photos 2019-7-16		Edit

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
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