

# NATIONAL Assessment Centre Services.

[ver 1.2.003]

MMA 119093502

Date In: 17/7/19 13:52	Job description	Date & Time Completed	Done by
Ref No: MAI INC 19012605/44	SAS e-filing		
Veh Pln: SLX 32506	E-mail (within 2hrs, AIC 2hrs)		
DDA: 12/7/19 14:20	I-Motor Claim Form	MT1105340002	17/7/19 15:26
OD: TP / Repairing 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/Whse		

Preferred Whse / INC Assign Whse / GW: ( ) Tel: ( ) Fax: ( )

TP Particulars:	Veh No: GW 1888U	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 ( )

( ) 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: ( )

1) Apply for Transport Allowance ( ) / Courtesy Car ( )

2) QC Check / Post Repair Inspection ( )

3) Upload Resurvey Photo [Repair Cost > \$3000] ( )

Injury: ( )

Driver/Owner: ( )

Contact No: ( )

Damaged Portion: ( )

QC Checked by (Ingr-In-Charge): ( )

Author's: ( )

Sub: ( )

NAI 905303

1) All Accident Reporting (530)

2) DA: Damage Assessment (\$100) INC (\$80)

3) TP: Towing Fee \$40/\$45

4) TP: Yellow Through Survey \$120

5) TP: Follow-Through Survey (Resurvey) \$30

6) TP: Re-inspection \$75

7) NP: IDA + SMRT Survey \$160

8) NTUC Additional Services:

9) NP: IDA + SMRT Survey \$160

10) NP: IDA + SMRT Survey \$160

11) NP: IDA + SMRT Survey \$160

12) NP: IDA + SMRT Survey \$160

13) NP: IDA + SMRT Survey \$160

14) NP: IDA + SMRT Survey \$160

15) NP: IDA + SMRT Survey \$160

16) NP: IDA + SMRT Survey \$160

17) NP: IDA + SMRT Survey \$160



## 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	17/07/2019 13:52
Date Of Accident	12/07/2019 14:20
Exact Location Of Accident	JUNC OF UPP PAYA LEBAR RD & LOR AH SOO
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX3250G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	PRESTIGE LEASING PTE. LTD
Co Reg No	201723326H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-91449265

### Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS HYBRID 1.8E CVT
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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 HIRE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5094838100-01
Cover Note Number	-

### Driver

Name of Driver	JOHAN BIN ABDULLAH
NRIC No	S7211148F
Date Of Birth	28/03/1972
Occupation	OUTDOOR
Date Of Driving Pass	12/03/1992
Driving Experience	27 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94815750
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 128 MARSILING RISE #04-264
Postcode	730128
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	2
Passenger 1	NAME: : UNKNOWN GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	WOODLANDS WEST N.P.C
Police Station Address	ROAD: 1 WOODLANDS STREET 12 , POSTCODE: 738622 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
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?	YES
Remarks/ Reasons:	TP TOOK THE MEMORY CARD
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GW1888U
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)

#### DETAILS OF INJURED PERSON 1

Name	GRAB PASSENGER
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SLX3250G
Were seat belts worn?	NO
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	



## 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.

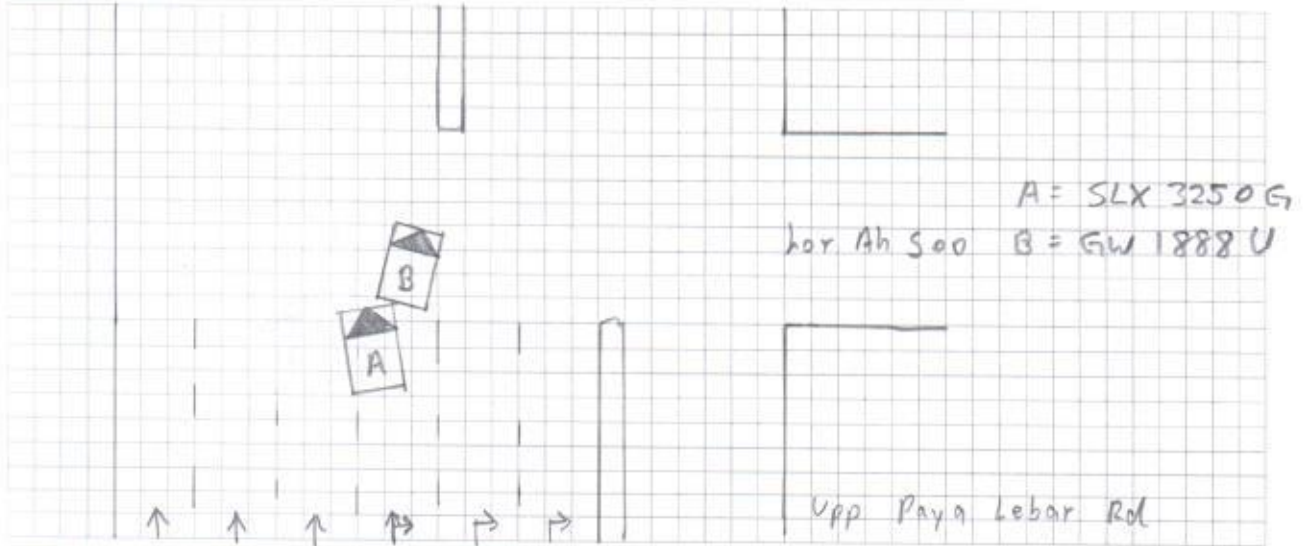


Policyholder's Signature  
Date & Time:

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

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

# 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:

*[Signature]*

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

*[Signature]*

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





# SINGAPORE POLICE FORCE



T/20190713/2161

1 of 3

Police Station Of Origin:  
Woodlands West N.P.C.  
1 Woodlands Street 12 SINGAPORE 738622  
Tel No: 1800-363 9999

Report No. T/20190713/2161

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 13/07/2019 23:22	Vide Report No.: F/20190712/0082	Station Diary No.: 272
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**Informant's Particulars**

Name of Informant: JOHAN BIN ABDULLAH			Address: APT BLK 128 MARSILING RISE #04-264 SINGAPORE 730128		
ID Type / ID No.: NRIC NO / S7211148F			Contact No.: Home/Office: Mobile: 94815750		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 47	Date of Birth: 28/03/1972	Type of Informant: Driver		
Race: Sikh			Language: English		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 12/07/2019 14:20	Type of Location: X-Junction
Location: Along Road 1 Traveling Toward Road 2 LORONG AH SOO UPPER PAYA LEBAR ROAD CROSS JUNCTION BETWEEN LORONG AH SOO AND UPPER PAYA LEBAR ROAD				
Weather: Sunny		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GW1888U	Van	NISSAN		Blue	Slightly Damaged	1
SLX3250G	Car	TOYOTA		Black	Seriously Damaged	1

**Details of Person Involved**

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





# SINGAPORE POLICE FORCE



T/20190713/2161

Police Station Of Origin:  
Woodlands West N.P.C.  
1 Woodlands Street 12 SINGAPORE 738622  
Tel No: 1800-363 9999

2 of 3

Report No. T/20190713/2161

**CONTINUATION OF REPORT**

<b>Driver</b>			
Name	JIMMY NG HONG YANG	ID No.	S6913936A
Related Vehicle	GW1888U (Van)	Contact No.	91241605
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	JOHAN BIN ABDULLAH	ID No.	S7211148F
Related Vehicle	SLX3250G (Car)	Contact No.	94815750
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On the 12 July 2019 at about 1420hrs. I was travelling along Upper Paya Lebar Road on the second lane and this lane can either go straight or turn right into Lorong Ah Soo. When I approach the junction, I wanted to go straight. However, the van in front of me suddenly turn on his right signal and slowed down. I then swerve to the left but the front right of my vehicle then hit the left rear of the van. My passenger who was not wearing a seat belt was flung to the front center compartment, between my seat and the passenger seat. I then help the passenger back to her seat and asked if she needs an ambulance.

I then got down from the vehicle and a passerby help me out. A traffic police officer was already at scene and called down an ambulance. My passenger informed me that her head hurts and she then called someone on her phone informing them about the accident. My passenger was then conveyed to Tan Tock Seng Hospital.

I wish to state that I wasn't speeding and I was following the speed limit of the road to my knowledge. I have been in this driving industry for 8 years and I have been a careful driver.

I wish to state that I have a front camera on my vehicle and I have already given the camera memory card to the Traffic Police officer at scene.





**SINGAPORE  
POLICE FORCE**



T/20190713/2161

Police Station Of Origin:  
Woodlands West N.P.C.  
1 Woodlands Street 12 SINGAPORE 738622  
Tel No: 1800-363 9999

3 of 3

Report No. T/20190713/2161

**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:

L /

Sgt 2 RAYMOND LIM ZHAO MENG

Signature Of Informant

Signature Of Interpreter:

Not applicable

Date/Time:

13/07/2019 23:22

Officer In Charge Of Case:

TP / GIT /

SI MOHAMMAD ABDILLAH BIN PALIL

Contact No.: 65476246

Classification Of Case:

Authentication Stamp

NP168

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7211148F**

Name: **JOHAN BIN ABDULLAH**

Birth Date: **28 Mar 1972**

Issue Date: **03 Mar 2015**

002396708D

SG 50

For LKK/NAC Use Only

Land Transport Authority

VOCATIONAL LICENCE

Licence No: **S7211148F**

Name: **JOHAN BIN ABDULLAH**

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7211148F**

Name: **JOHAN BIN ABDULLAH**

Race: **SIKH**

Date of birth: **28-03-1972**

Country/Place of birth: **SINGAPORE**

Sex: **M**

For LKK/NAC Use Only

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

EFFECTIVE DATE

Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg **12 Mar 1992**

NP 426A

Licence No: **S7211148F**

For LKK/NAC Use Only

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	01/08/2018

For LKK/NAC Use Only

5400125

NPIC No. **S7211148F**

Date of issue: **22-09-2015**

APT BLK 128 MARSILING RISE #04-264  
SINGAPORE 730128

NPIC No: **S7211148F** Date: **21/06/2018**

For LKK/NAC Use Only



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="12/07/2019 13:42"/>
Vehicle No.(For Motor)	<input type="text" value="SLX3250G"/>	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"/>	5094838100-01		PRESTIGE LEASING PTE. LTD	201723326H	GFT	Third Party, Fire & Theft	SLX3250G	SLX3250G	05/10/2018	

## ▼ Policy Information

Policy No.	5094838100-01	Policyholder Name	PRESTIGE LEASING PTE. LTD	Policyholder NRIC	201723326H
Certificate No.					
Address	53 UBI AVENUE 1 #05-44 PAYA UBI INDUSTRIAL PARK SINGAPORE 408934				
Product Name	FLEET INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	05/10/2018	Effective Date	05/10/2018 00:00	Expiry Date	04/10/2019 23:59
Third Party Excess	1500.00	Own damage Excess	0.00	Windscreen Excess	0.00
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	0.00	Outside Singapore TP Excess	1500.00		
Agent	ANIKA INS BROKERS & CONSUL	Agent Tel.	66729988	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

## ▼ Policyholder Mailing Address

Address 1	53 UBI AVENUE 1	Address 2	#05-44 PAYA UBI INDUSTRIAL F	Address 3	SINGAPORE 408934
Address 4		Address Type	Singapore address	Post Code	408934
Unit No.	01-62	Related Policy Number	5094838100-01		

## ► Insured Object: SLX3250G

## ▼ Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Number	Endorsement Status	Endorsement Content
1	05/10/2018 00:00	Basic Information Endorsement	000001286917206	Endorsement Take Effective	<p>Thank you for giving us the opportunity to serve you. We confirm that this policy is extended to cover the following vehicle(s) as follows: VEHICLE NUMBER EFFECTIVE DATE PREMIUM (INCL GST) 1. SFT970Z 05-10-2018 \$2,061.02 In view of this amendment, an additional premium of \$2,061.02 (inclusive of GST) is payable under your policy. Please ignore this premium payment request if you have since made payment. Otherwise, we would appreciate it if you could make payment to us within 14 days from the date of this letter. For cheque payment, please issue the cheque in favour of "NTUC Income" with your name and policy number indicated on the reverse of the cheque. Alternatively, you could also make payment at any of our branches by cash or NETS.</p>



Claim Handling

Accident MT/1053400

Policy No.	5094838100-01	Vehicle No.	SLX3250G	GST Registration No.
Certificate No.				
Policyholder Name	PRESTIGE LEASING PTE. LTD			Policyholder NRIC
Product Code	FLEET INSURANCE	Cover Type	Third Party, Fire & Theft	Loading
Contact No.(Mobile)	NIL	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KPK	<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	15/07/2019 14:50	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	12/07/2019	Time of Accident hh:mm	14:15	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	ALONG ROAD 1 UPPER PAYA LEBAR ROAD			

Excess

Own damage Excess	0.00	Additional Excess	0	Windscreen Excess
Unnamed Driver Excess		Outside Singapore OD Excess	0.00	
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00	

Benefits

GST Registered Information

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

Policyholder Mailing Address

Address 1	53 UBI AVENUE 1	Address 2	#05-44 PAYA UBI INDUSTRIAL F	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	01-62	Related Policy Number	5094838100-01	

OI Driver Info

Driver Name		Driver Type		
Unnamed driver Name		Driver NRIC		Driver DOB
Register Date of Driver License		Driver Age		Driving Experience
Contact No.(Mobile)		Contact No.(Office)		Contact No.(Home)
Address 1		Address 2		Address 3
Address 4		Address Type	Foreign address	Post Code
Unit No.				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Comp.

Modification History

Claim 002 New

Claim Type *	OD-MX	Insured Name	PRESTIGE
Contact No.(Mobile)	91449265	Contact No. (Home)	
Email Address		OI Vehicle Number	SLX3250G
Claim Description	SLX3250G / GW1888U ON 12 Jul 2019		
Preferred Workshop	0	Insured Liability	Partially at Fault
Contact No. Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered		GIA report	Received
Report Taken By		Claim Close Date	17/07/2019 15:33
			LIEW SHAN HUI

Print AK letter

Save Submit

Attachment


















Accident No. MT/1053400 Claim No. 002  
 Last Doc. Received ☒ Yes ☐ No Upload Date 17/07/2019 15:36

Path \*

Choose File No file chosen  
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 Message Read

Category \* Confidential  
 Clear Please Select NO  
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 Clear Please Select NO

## Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Descr
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:36	NRIC/ Driving License	Normal	NRIC/ Driving Li
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:36	SAS	Normal	SAS 20
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:36	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:36	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:35	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:35	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:35	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:35	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:35	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:35	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:35	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:35	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:35	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:35	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:33	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:33	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:33	Photos	Normal	Photos 2





NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:33	Photos	Normal	Photos 2
NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o 17 Jul 2019 15:33	Photos	Normal	Photos 2

Video List

Uploaded By/Date	Folder Date	File Name	
		<a href="#">Display in New Window</a>	<a href="#">Scan and uploading</a>