

NATIONAL Assessment Centre Services. (wef 1 Jan'05) MHA19047008

Date In: 25/7/19-19:44	Job description	Date & Time Completed	Done by
Ref No: HA/INC19047008/24	SAS e-filing		
Veh No: G04 645814	E-mail (within 5hrs, AIC 2hrs)		
D.O.A: 24/7/19-03:30	i-Motor Claim Form	M7/1055063-001	25/7/19 19:53
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: (Tel: (Fax: (
TP Particulars:	Veh No: 427157X	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 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

HA1925500	Invoice Preparation Checklist	Amt (\$) In Bill	Amt (\$) Add Bill
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)		
Contact No:	3) TF: Towing Fee \$40/\$45		
Damaged Portion:	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:-		
	ON*		
QC Checked by (Engr-In-Charge):	*N5: Courtesy Car / Tpl Allowance \$5		
	*N6: Repair Co-ordination \$10		
	*N7: Post Repair Inspection \$25		
	*N8: DV / Collect Excess Coordination \$5		
Auditors' Comments:-	TP (N11): TP (Non INC) against INC \$20		
Dat. 1:	9) N12: Idac Mobile \$0		
Dat. 2 / 3:	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	25/07/2019 19:44
Date Of Accident	24/07/2019 03:30
Exact Location Of Accident	REDHILL MARKET OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GBH6458H
Insured/Policyholder	
Name Of Registered Owner	HONG SOON FISHERY PTE LTD
Co Reg No	201207463M
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97593168
Alternative Phone No	OFFICE-97593168
Vehicle Particulars	
Manufacturer	TOYOTA
Model	DYNA 150 5MT
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5102963623
Cover Note Number	
Driver	
Name of Driver	WANG XINCHENG
Passport No/FIN	G2462270W
Date Of Birth	29/10/1987
Occupation	OUTDOOR
Date Of Driving Pass	12/11/2014
Driving Experience	4 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97593168
Fax Number	
Contact Number	OFFICE-97593168
Email Address	NOEMAIL

Address	1 COLEMAN STREET #03-10 THE ADELPHI
Postcode	179803
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?	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?	YES
Remarks/ Reasons:	VIDEO FOOTAGE WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP2102X
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

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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:

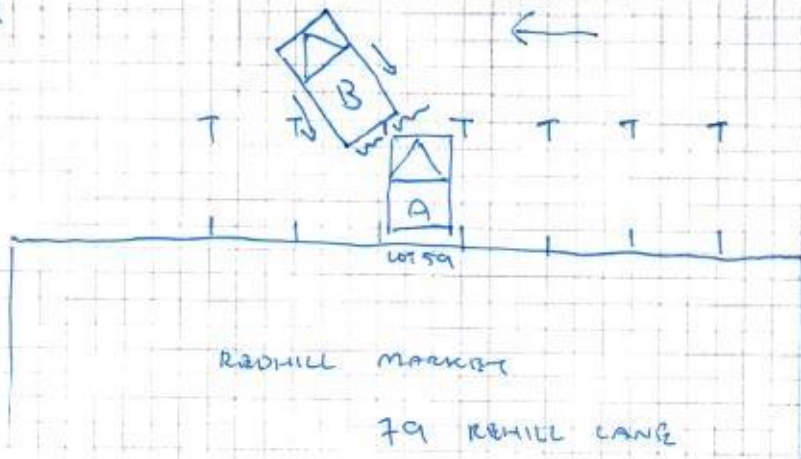
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

SKETCH PLAN

OPEN CARPARK OF REDHILL MARKET.

Vehicle A
- GBH 6458H
Vehicle B
- YP 2102 X



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My vehicle was stationary parked in Lot 59 of Redhill Market.

In the morning when my staff went down wanted to collect the vehicle and start his work duty. Then he realized there was some damage on the front portion of the vehicle.

There, without any more and anyone presence to witness of the accident, I proceed to check on the CCTV installed around the market compound. And further on, get to realized it was a vehicle with licence plate number (YP 2102 X) that collided to the front portion of my vehicle while he was reversing.

The accident footage was captured by the CCTV of the Market camera. Report was made later of the day, due to, originally was initiated for private settlement, but due to no respond and answer from the other party, so then on I proceed with insurance claim.

Vehicle A - GBH 6458H

Vehicle B - YP 2102 X.

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.:

Vehicle No.	GBH 6458H	Model / Make	TOYOTA DYNA
Date of Accident	24/07/19		
Time of Accident	0330	HRS	
Location of Accident	REDHILL		
Exact purpose use during accident	STATIONARY PARKED		
Name of Owner	HONG SOON FISHERY PTE LTD		
Telephone No.	H/P : 9759 3168	Home :	Office :
NRIC	201207463 M		
Address	1 COLEMAN STREET #03-10 THE ADELPHI S (179803)		
Claim type	OD	THIRD PARTY	REPORTING ONLY
Insurance Company	NTUC		
Type of Coverage	Comprehensive	Third Party	Third Party / Fire / Theft
Policy No.	5102963623		
Name of Driver	As Above If <u>No</u>	STATIONARY PARKED WITHOUT DRIVER.	
NRIC		Any Passengers :	NIL
Date of birth			
Occupation	Outdoor / <u>Indoor</u>		
Driving License Pass Date			
Gender	Male / Female		
Contact No.	H/P :	Home :	Office :
Address			
Driver have any own vehicle	<u>No</u>	If yes, Reg No.	
Relationship	<u>Employee</u>	If no, state	
Weather condition	<u>Clear</u>	Raining Other	
Road Surface	<u>Dry</u>	Wet Other	
Any Injuries	<u>No</u>	If Yes, Who?	
Name And Contact No.			
Name And Contact No.			
Police Report	<u>No</u>	If Yes, Where?	
Vehicle B No.	YP 2W2 X	Any Passengers :	
Name of Driver		Contact No. :	
Vehicle C No.		Any Passengers :	
Vehicle D No.		Any Passengers :	
Vehicle E no.		Any Passengers :	
Vehicle F No.		Any Passengers :	
Vehicle G No.		Any Passengers :	
Witness Name		Witness Contact :	
Accident Portion	FRONT.		
Camera Recorder	<u>Yes</u> / No		
Email Address			
PARTICULAR WORKSHOP	TWINCAR AUTOMOTIVE PTE LTD		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	IAN		
FAX NO	6741 0510		
WORKSHOP EMAIL ADDRESS	Sales@n51.com.sg		



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

Employer
HONG CHEW FISHERY TRADING



Name
WANG XINCHENG

S-Pass No.
0 76189382

Sector
SERVICE



K0336211



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **G2462270W**

Name:

WANG XINCHENG

Birth Date: **29 Oct 1987**

Issue Date: **12 Nov 2014**

Valid Till: **11 Nov 2019**



002364864H

VISIT PASS
Immigration Regulations

ED 05 2016

Name
WANG XINCHENG

NRIC
G2462270W

Date of Birth: **29-10-1987** Sex: **M**

RACE
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



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

EFFECTIVE DATE

Class 3 Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg 12 Nov 2014

NP 428A



Licence No: **G2462270W**



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 : 5102963623

- | | |
|---|---|
| <ol style="list-style-type: none"> 1. Index mark and Registration Number of Vehicle
Chassis Number 2. Name of Policyholder 3. Effective Date of Insurance 4. Expiry Date of Insurance 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.
(b) Use for the carriage of passengers or goods in connection with the Policyholder's business. | <p>Cover : Preferred Workshop Plan</p> <ul style="list-style-type: none"> : To Be Advised : JTFAT35Y00K210928 : HONG SOON FISHERY PTE LTD : 13 Aug 2018 : 12 Aug 2019 |
|---|---|
- This Policy does not cover
- (a) Use for hire or reward.
 - (b) Use for racing, pace-making, reliability trial or speed-testing.
 - (c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

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
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: HL BANK
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 : ABWIN PTE LTD (00000614234)
 Date of Issue : 08 Aug 2018 10:53 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

eBaoTech

GeneralClaim

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="24/07/2019 03:30"/>
Vehicle No. (For Motor)	<input type="text" value="GBH6458H"/>	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"/>	5102963623		HDONG SOON FISHERY PTE LTD	201207463M	GCV	Preferred Workshop Plan	GBH6458H	GBH6458H	13/08/2018	12/08/2019

Policy Information

Policy No.	5102963623	Policyholder Name	HONG SOON FISHERY PTE LTD	Policyholder NRIC	201207463M
Certificate No.					
Address	1 COLEMAN STREET #03-10 THE ADELPHI SINGAPORE 179803				
Product Name	COMMERCIAL VEHICLE INSURANCE	Plan		Group Policy Flag	N
Policy Issue Date	08/08/2018	Effective Date	13/08/2018 00:00	Expiry Date	12/08/2019 23:59
Excess Type		All Claims Excess			
Third Party Excess	0	Own damage Excess	600	Windscreen Excess	100
Additional Excess		OS Premium	0		
Outside Singapore OD Excess		Outside Singapore TP Excess		Young/Inexperience Driver Excess	
Agent	ABWIN PTE LTD	Agent Tel.	68423301	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

Policyholder Mailing Address

Address 1	1 COLEMAN STREET	Address 2	#03-10 THE ADELPHI	Address 3	SINGAPORE 179803
Address 4		Address Type	Singapore address	Post Code	179803
Unit No.	04-11C	Related Policy Number	5102963623		

Insured Object: GBH6458H

Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
1	13/08/2018 00:00	Basic Information Endorsement	Endorsement Take Effective	Thank you for giving us the opportunity to serve you. We confirm that from 13 Aug 2018, the following policy details are amended as follows: HIRE PURCHASE COMPANY: HL BANK CHASSIS NUMBER: JTFAT35Y00K210928 ENGINE NUMBER: 1KD2810112 VEHICLE REGISTRATION NUMBER: GBH6458H ORIGINAL REGISTRATION DATE: 13 Aug 2018

Continue Cancel

Claim Handling

Exit

Accident MT/1055063

Policy No.	5102963623	Vehicle No.	GBH6458H	GGT Registration No.	201207463M
Certificate No.					
Policyholder Name	HONG SOON FISHERY PTE LTD.	Cover Type	Preferred Workshop Plan	Policyholder NRIC	201207463M
Product Code	COMMERCIAL VEHICLE INSURANCE	Contact No. (Office)	0	Loading	0
Contact No. (Mobile)	97593168	Special Remark		Contact No. (Home)	0
Email Address		TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode	
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	25/07/2019 19:52	Accident Report Within 24 hrs	Yes	Accident Type	Damaged whilst parked
Date of Accident	24/07/2019	Time of Accident hh:mm	03:30	Country of Accident	Singapore
Reporting Centre		Grange Force		ICM No.	
Accident Location	REDHILL MARKET OPEN SPACE CARPARK				
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	01/03/2014		
GST Registration No.	201207463M	GST Status Verified	Yes		
Modification History					

Policyholder Mailing Address

Address 1	1 COLEMAN STREET	Address 2	#03-10 THE ADELPHI	Address 3	SINGAPORE 179803
Address 4		Address Type	Singapore address	Post Code	179803
Unit No.	04-11C	Related Policy Number	5102963623		
OT Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	29/10/1987
Unnamed driver Name	WANG XINCHENG	Driver NRIC	G2462270W	Driving Experience	4
Register Date of Driver License	12/11/2014	Driver Age	31	Contact No. (home)	0
Contact No. (Mobile)	97593168	Contact No. (Office)	0	Address 3	SINGAPORE 179803
Address 1	1 COLEMAN STREET	Address 2	THE ADELPHI	Post Code	179803
Address 4		Address Type	Singapore address		
Unit No.	03-10				
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
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Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	HONG SOON FISHERY PTE LTD	Insured NRIC	201207463M
Contact No. (Mobile)	97961141	Contact No. (Home)		Contact No. (Office)	
Email Address		OT Vehicle Number	GBH6458H	TP Vehicle Number	YP2102X
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select		
Claimant Name *		Claimant NRIC *			
Claimant Address					
Claim Description	GBH6458H / YP2102X ON 24 Jul 2019				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GJA report	Received
Date Registered	25/07/2019 19:53	Claim Close Date		Date Received	25/07/2019 00:00
Report Taken By	Jackson				
<input checked="" type="checkbox"/> Print AK letter					

Save Submit

Attachment

Accident No.	MT/1055063	Claim No.	001						
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	25/07/2019 19:54						
Path *		Category *		Confidential		Urgency *		Description *	
	Browse...	Clear	Please Select	NO	Normal				
	Browse...	Clear	Please Select	NO	Normal				
	Browse...	Clear	Please Select	NO	Normal				
		Clear	Please Select	NO	Normal				

Browse...

Browse...

Browse...

Clear

Please Select

No

Normal

Clear

Please Select

No

Normal

☐ Send Message Upload

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	Action
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 25 Jul 2019 19:54	NRJC/ Driving License	Normal	NRJC/ Driving License 2019-7-25		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 25 Jul 2019 19:54	SAS	Normal	SAS 2019-7-25		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 25 Jul 2019 19:54	Photos	Normal	Photos 2019-7-25		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 25 Jul 2019 19:53	Photos	Normal	Photos 2019-7-25		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 25 Jul 2019 19:53	Photos	Normal	Photos 2019-7-25		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 25 Jul 2019 19:53	Photos	Normal	Photos 2019-7-25		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 25 Jul 2019 19:53	Photos	Normal	Photos 2019-7-25		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 25 Jul 2019 19:53	Photos	Normal	Photos 2019-7-25		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV CES) on 25 Jul 2019 19:53	Photos	Normal	Photos 2019-7-25		Edit

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
<div style="display: flex; justify-content: space-around;"> <div>Display in New Window</div> <div>Scan and uploading</div> </div>				