

NATIONAL Assessment Centre Services

(wef 1 Jan 03) *MAH91264V*

Date In: <i>26/8/19 - 18:06</i>	Job description	Date & Time Completed	Done by
Ref No: <i>NA/INC/15020/24</i>	SAS e-filing		
Veh No: <i>JK877SP</i>	E-mail (within 5hrs, A/C 2hrs)		
D.O.A: <i>26/8/19 - 21:50</i>	i-Motor Claim Form	<i>NA/1059520-001</i>	<i>26/8/19 21:51</i>
OD: <i>TP</i> 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: *JK877SP* 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

NA/1059520

Claimant's Particulars:-

Driver/Owner:

Contact No:

Damaged Portion:

QC Checked by (Engr-In-Charge):

Auditors' Comments:-

Lat 1:

Lat 2 / 3:

Invoice Preparation Checklist

1) AR: Accident Reporting (\$30);

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

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

4) FT: Follow-Through Survey \$120

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

For claiming against INC Only (wef 10 Jan 2003)

6) TR: Re-inspection \$75

7) N1: Idac DA + SMRT Survey \$160

8) NTUC Additional Services:-

QD*

*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 (Non INC) against INC \$20

9) N12: Idac Mobile 30

Invoice dated Fee Charged

Invoice dated Fee Charged

Am't (\$) Add Bill

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	26/08/2019 18:06
Date Of Accident	25/08/2019 21:50
Exact Location Of Accident	PIE (TUAS) BEFORE JALAN BAHAR EXIT
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKS8775P
Insured/Policyholder	
Name Of Registered Owner	TAY BOON SAY
NRIC No	S1214998J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90175833
Alternative Phone No	OFFICE-90175833
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL 1.5X CVT
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	5071547482-04
Cover Note Number	
Driver	
Name of Driver	TAY YEW LONG, RAYMOND (ZHENG YAOLONG)
NRIC No	S9101142E
Date Of Birth	05/01/1991
Occupation	INDOOR
Date Of Driving Pass	12/12/2011
Driving Experience	7 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91819666
Fax Number	
Contact Number	OFFICE-91819666
Email Address	NOEMAIL

Address	BLK 754 JURONG WEST STREET 74 #12-40
Postcode	640754
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
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	3
Was any body injured in the Accident?	YES
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

REFER TO POLICE REPORT - T/20190826/7015.

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	SKH8781D
Vehicle Make/Model/Colour	TOYOTA ALTIS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIM WEISHENG
NRIC/Passport Number	S8420624E
Contact Number	96177372
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJL99J
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Vehicle Make/Model/Colour	NISSAN
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TEH WEE YAP
NRIC/Passport Number	S7636243B
Contact Number	90276176
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	TAY YEW LONG, RAYMOND (ZHENG YAOLONG)
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SKS8775P
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
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 rescind 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 (a) 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.:

PIE THAS Before Jelm Behar

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Ref 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.:

Date of Accident : 25/8/2019 Accident Time: 7:50 (24-HR-Format)
 Accident Place : PIE C Before Jalan Bahar EXIT
 Vehicle Reg. No. (Car Plate No.) : SKS 8775P
 Vehicle Make/Model : Honda Vezel
 Insurance Company : Altac Policy No. _____
 Owner or Company Name /IC No. : Tay Boon Say Vincent / S12149985
 Owner or Company Contact No. : 90175833 Owner's Hp _____ Company Tel _____
 DRIVER'S Name / IC No. : Tay Yew Long, Raymond
 DRIVER'S Date Of Birth : 5/1/1991 DRIVER'S License Pass Date 12/12/2011
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: _____
 DRIVER'S Address : Tay Yew Long, Raymond / S9101142E
 DRIVER'S Contact No. / Alt No. : 1) 9181 9666 2) _____
 DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
 Email Address : admin@mycar.sg
 Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
 Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
 Number of Passengers (Including Driver): 1
 Was there any video Captured by car camera: YES NO
 Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Other Party Driver's Particular (if any)

Vehicle Reg. No: SKH 8781D
 Vehicle Make/Model: Toyota Altis
 Name Driver: Lim Weisheng
 IC No. Driver: S8420624E
 Driver's Contact & Add: 9617 7372

Vehicle Reg. No: Nissan / SJL99AJ
 Vehicle Make/Model: Nissan
 Name Driver: Teh Wee Yap
 IC No. Driver: S76 36 243B
 Driver's Contact & Add: 9027 6176



**SINGAPORE
POLICE FORCE**



T/20190826/7015

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20190826/7015

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/08/2019 12:06		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: TAY YEW LONG, RAYMOND			Address: APT BLK 754 JURONG WEST STREET 74 #12-40 SINGAPORE 640754		
ID Type / ID No.: NRIC NO / S9101142E			Contact No.: Home/Office: Mobile: 91819666		
Nationality: SINGAPORE CITIZEN			Email: raymondlay91@gmail.com		
Sex: Male	Age: 28	Date of Birth: 05/01/1991	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Software engineering			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink , Drive: No	Date/Time of Accident: 25/08/2019 21:50	Type of Location: Straight Road
Location: PAN ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 80 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJL99J	Car					0
SKH8781D	Car					0
SKS8775P	Car				Slightly Damaged	0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20190826/7015

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20190826/7015

CONTINUATION OF REPORT

Driver				
Name	TAY YEW LONG, RAYMOND		ID No.	S9101142E
Related Vehicle	SKS8775P (Car)		Contact No.	91819666
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	03	Degree of Injury	Slight	

Brief Details.

On the stated time and date, I was driving my vehicle SKS8775P on PIE towards tuas before jln bahar exit. Suddenly I felt a great impact from my rear and realise SKH8781D had collided to my rear. then I realise I was involved in a chain accident. another plate number bearing carplate number SJL99J. I felt uncomfortable and consult a doctor and got 3 days MC.



**SINGAPORE
POLICE FORCE**



T/20190826/7015

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20190826/7015

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
YEO GEAK ENG CECILIA
Contact No.: 65476404

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
26/08/2019 12:06

Classification Of Case:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S9101142E



Name

TAY YEW LONG, RAYMOND
(ZHENG YAOLONG)

郑耀龙

Race

CHINESE

Date of birth

05-01-1991

Sex

M

Country of birth

SINGAPORE

S9101142E

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S9101142E

Name

TAY YEW LONG, RAYMOND
(ZHENG YAOLONG)

For LKK/NAC Use Only

Birth Date 05 Jan 1991

Issue Date 12 Dec 2011



4057104



NRIC No. S9101142E

For LKK/NAC Use Only

Date of issue
26-05-2007

Address
APT BLK 754 JURONG WEST STREET 74
#12-40
SINGAPORE 640754

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 Dec 2011

For LKK/NAC Use Only

NP 428A



Licence No: S9101142E

0302

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1214998J



Name

TAY BOON SAY VINCENT



For LKK/NAC Use Only

Race

CHINESE

Date of Birth

27-03-1956

Sex

M

Country of Birth

SINGAPORE



9650



NRIC No. S1214998J



For LKK/NAC Use Only

Blood Group Date of issue

O+ 30-04-1994

Address

APT BLK 754 JURONG WEST STREET 74
#12-40
SINGAPORE 2264

eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.		Date of Accident	25/08/2019 21:50
Vehicle No. (For Motor)	SKS8775P	Certificate Number	
Search			

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
☐	5071547462-04		TAY BOON SAY	S1214998J	GPC	drive CLASSIC	SKS8775P	SKS8775P	13/05/2019	12/05/2020
Continue										

 Policy Information

Policy No.	5071547482-04	Policyholder Name	TAY BOON SAY	Policyholder NRIC	S1214998J
Certificate No.					
Address	BLK 754 #12-40 JURONG WEST STREET 74 SINGAPORE 640754				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	09/05/2019	Effective Date	13/05/2019 00:00	Expiry Date	12/05/2020 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	ABWIN PTE LTD	Agent Tel.	68423301	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

 Policyholder Mailing Address

Address 1	BLK 754 #12-40	Address 2	JURONG WEST STREET 74	Address 3	SINGAPORE 640754
Address 4		Address Type	Singapore address	Post Code	640754
Unit No.		Related Policy Number	5071547482-04		

 **Insured Object: SKS8775P**
 Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
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Continue

Cancel

Claim Handling

Exit

Accident MT/1059520

Policy No.	5071547482-04	Vehicle No.	SKS8775P	GST Registration No.	
Certificate No.					
Policyholder Name	TAY BOON SAY			Policyholder NRIC	S1214998J
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	90175833	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	
KPI	☒ No ☐ Yes	TCA	☒ No ☐ Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	10	Private Hire	No
Accident Details					
Report Date	26/08/2019 20:49	Accident Report Within 24 hrs	Yes	Accident Type	Chain Collision
Date of Accident	25/08/2019	Time of Accident hh:mm	21:50	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	PUE (TUAS) BEFORE JALAN BAHAR EXIT				
Total Excess Applicable					
Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	600.00	TP Standard Excess	0.00		
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?	Covered
Additional Excess	0				
Total OD Excess Applicable	600.00	Total TP Excess Applicable	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	BLK 754 #12-40	Address 2	JURONG WEST STREET 74	Address 3	SINGAPORE 640754
Address 4		Address Type	Singapore address	Post Code	640754
Unit No.		Related Policy Number	5071547482-04		

OI Driver Info

Driver Name	TAY YEW LONG, RAYMOND	Driver Type	Named Driver		
Unnamed driver Name		Driver NRIC	S9101142E	Driver DOB	05/01/1991
Register Date of Driver License	12/12/2011	Driver Age	28	Driving Experience	7
Contact No.(Mobile)	91819666	Contact No.(Office)	0	Contact No.(Home)	0
Address 1	BLK 754	Address 2	JURONG WEST STREET 74	Address 3	SINGAPORE 640754
Address 4		Address Type	Singapore address	Post Code	640754
Unit No.	12-40				
Does he own a Singapore Registered car?	☐ Yes ☒ No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	☒ Yes ☐ No
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Modification History

Claim 001 New

Claim Type *	OO-MX	Insured Name	TAY BOON SAY	Insured NRIC	S1214998J
Contact No.(Mobile)	91819666	Contact No.(Home)		Contact No.(Office)	
Email Address	ICETOLL@GMAIL.COM	OI Vehicle Number	SKS8775P	TP Vehicle Number	SKH8781D
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select		
Claimant Name *		Claimant NRIC *			
Claimant Address					
Claim Description	SKS8775P / SKH8781D ON 25 Aug 2019				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered	26/08/2019 20:51	Claim Close Date		Date Received	26/08/2019 00:00
Report Taken By	Jackson				
☒ Print AK letter					

Save Submit

Attachment

Accident No.	MT/1059520	Claim No.	001
Last Doc. Received	☒ Yes ☐ No	Upload Date	26/08/2019 20:51
Path *	Browse... Clear Please Select		
Category *	Confidential	Urgency *	Description *
	N/C	Normal	

	Browse...	Clear	Please Select	N/A	Normal	
	Browse...	Clear	Please Select	N/A	Normal	
	Browse...	Clear	Please Select	N/A	Normal	
	Browse...	Clear	Please Select	N/A	Normal	
	Browse...	Clear	Please Select	N/A	Normal	

☐ Send Message

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)	Action
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 26 Aug 2019 20:51	NRIC/ Driving License	Y	NRIC/ Driving License 2019-8-26		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 26 Aug 2019 20:51	NRIC/ Driving License	Y	NRIC/ Driving License 2019-8-26		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 26 Aug 2019 20:51	SAS		SAS 2019-8-26		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 26 Aug 2019 20:51	Photos		Photos 2019-8-26		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 26 Aug 2019 20:51	Photos		Photos 2019-8-26		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 26 Aug 2019 20:51	Photos		Photos 2019-8-26		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 26 Aug 2019 20:51	Photos		Photos 2019-8-26		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 26 Aug 2019 20:51	Photos		Photos 2019-8-26		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 26 Aug 2019 20:51	Photos		Photos 2019-8-26		Edit
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) on 26 Aug 2019 20:51	Photos		Photos 2019-8-26		Edit

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
Display in New Window Scan and uploading				