

NATIONAL Assessment Centre Services

Date In: 30/10/19	Job description	Date & Time Completed	Done by
Ref No: NA/INC19019146/13	SAS e-filing		
Veh No: SJJ6341E	E-mail (within 8hrs. AIC 2hrs)		
D.O.A: 25/10/19 0930	i-Motor Claim Form	MT/1069105-001	
OD (TP) Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (11-51	Tel:	Fax:
TP Particulars:	Veh No: 4P76474	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

NA1908232	Invoice Preparation Checklist	Amt (\$) 1st 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		
QC Checked by (Engr-In-Charge):	5) rT : 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*		
	*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		
Cat. 1:	Invoice dated	Fee Charged	
Cat. 2 / 3:	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	30/10/2019 11:24
Date Of Accident	25/10/2019 09:30
Exact Location Of Accident	ALONG WARINGIN PARK BESIDE SFA EDUHEART INT SHOOOL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJJ6341E
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD KHAIRI BIN MOHAMMAD KUSBARI
NRIC No	S9315318I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90685143
Alternative Phone No	OTHERS-90685143
Vehicle Particulars	
Manufacturer	HONDA
Model	CIVIC
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	5106447353
Cover Note Number	
Driver	
Name of Driver	MUHAMMAD KHAIRI BIN MOHAMMAD KUSBARI
NRIC No	S9315318I
Date Of Birth	09/05/1993
Occupation	INDOOR
Date Of Driving Pass	05/05/2015
Driving Experience	4 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90685143
Fax Number	
Contact Number	OTHERS-90685143
Email Address	NOEMAIL

Address	BLK 37 BEDOK SOUTH AVE 2 #02-461
Postcode	460037
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	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PARKED VEHICLE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BEDOK SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 20 CHAI CHEE DRIVE , POSTCODE: 469045 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2448999 - FAX NO: 62446558
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: G/20191026/2108

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	YP7647H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LAI ZENG DONG
NRIC/Passport Number	G3157249K
Contact Number	88704236
Address	
Postcode	
Insurance Company Name	

Nature Of Damage
No. Of Passenger (Including Driver)


SKETCH PLAN

IMPORTANT NOTICE


1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

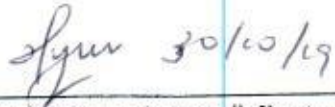
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims. (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
- (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:



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



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

Vehicle B: 4P7647H

Refer to police report

Report No : G/20191026/2108

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

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



**SINGAPORE
POLICE FORCE**



G/20191026/2108

1 of 3

POLICE REPORT (NP299)

Report No. G/20191026/2108

Police Station Of Origin
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

Date/Time Report Made 26/10/2019 21:15		Vide Report No.		Station Diary No. 36	
Name Of Informant MUHAMMAD KHAIRI BIN MOHAMMAD KUSBARI		Address APT BLK 37 BEDOK SOUTH AVENUE 2 #02-461 SINGAPORE 460037			
ID Type / ID No. NRIC NO / S9315318I		Contact No. Home/Office		Mobile 90685143	
Nationality SINGAPORE CITIZEN		Email Address muhdkhairi1036@gmail.com			
Occupation CIVIL SERVANT		Sex Male	Age 26	Date of Birth 09/05/1993	Race Malay
Institution/School Name		Language English			
Date/Time Of Incident 25/10/2019 09:30 - 25/10/2019 22:30		Location Of Incident WARINGIN PARK SINGAPORE Along Waringin Park beside SFA Eduheart International School			

Brief details.

On 25/10/2019 at about 0930hrs, I had parked my car (SJJ 6341E, Honda Civic, Matte Black) along the side road of Waringin Park which was directly beside SFA Eduhearts International School. I secured and locked my car using the key button lock and left the said location to go to work. Everything was intact and nothing was amiss.

Signature Of Officer Recording The Report: G / Sgt 3 SAM YEO WEN MING	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 26/10/2019 21:15
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / Sgt 3 SOPHIA SIM SHI MEI Contact No.: 62447200	Classification Of Case:

Authentication Stamp





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20191026/2108

On the same day at about 2230hrs, I went back to the place which I had parked my car. After unlocking the car, I noticed a white in colour note which was placed on my car windscreen. I went out of the car and took a look at the note and saw the following content "Please call this no: Mr Dong 88704236". The content was handwritten using a black ink pen. Before calling the said number that was written on the note, I made a visual check around my car and noticed that there was a damage to my front left bumper and also to my front head light. I also noticed that there was a dent and scratch marks seen on my left front bumper. After making a check, I contacted the given number.

A male Chinese subject did answer the call and he informed that he is Mr Dong. He admitted to me that earlier his lorry (YP7647H) had hit onto my car. He mentioned that he is the driver and he informed that while he was reversing, he had collided onto the front left side of my car. He also mentioned that he waited for 20 mins but was unable to get hold of the driver thus he was the one who wrote the note and left it on the windscreen of the car before leaving the said location.

I had already informed my car workshop with regards to the accident and also the damages on my car. As of now the cost of the repair to my car as informed by my workshop is still unknown as further checks are required on their end. My vehicle has an in car camera which is facing the front and rear however it is non-operational once my engine is turn off.

I am lodging this report for insurance claim against the said driver and also for my own record purpose.

Subjects Involved	
Defendant	
Signature Of Officer Recording The Report: G / Sgt 3 SAM YEO WEN MING	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 26/10/2019 21:15
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / Sgt 3 SOPHIA SIM SHI MEI Contact No.: 62447200	Classification Of Case:
Authentication Stamp	





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20191026/2108

Person Name	LAI ZENG DONG		
ID Type	FIN NO	ID No	G3157249K
Gender	Male	Age	32
Nationality	CHINESE	Race	Chinese
Language	English	Occupation	DELIVERY DRIVER
Address Type	Apt Blk	Address	APT BLK 60 KIM KEAT ROAD #04-03 SINGAPORE 328827
Mobile No	88704236		

Signature Of Officer Recording The Report:

G / Sgt 3 SAM YEO WEN MING

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
G / Bedok Police Divisional Investigation Branch /
Sgt 3 SOPHIA SIM SHI MEI
Contact No.: 62447200

Authentication Stamp



SINGAPORE
POLICE FORCE

SIGNATURE

Signature Of Informant:

Date/Time:
26/10/2019 21:15

Classification Of Case:

Vehicle No.	SJJ6341E	Model / Make	Honda Civic
Date of Accident	25/10/2019		
Time of Accident	0930	HRS	
Location of Accident	Along Warringin Park beside SFA Eduheart International School		
Exact purpose use during accident	Private use		
Name of Owner	Muhammad Khairi Bin Mohd Khairi		
Telephone No.	H/P : 90685143	Home :	Office :
NRIC	893153181		
Address	BLK 37 Bedok South Avenue 2 #02-461 S(460037)		
Claim type	OD	THIRD PARTY	REPORTING ONLY
Insurance Company	NTUC		
Type of Coverage	Comprehensive	Third Party	Third Party / Fire / Theft
Policy No.	5106447353		
Name of Driver	As Above If No,		
NRIC	Any Passengers : —		
Date of birth			
Occupation	Outdoor	/	Indoor
Driving License Pass Date	5/5/2015		
Gender	Male	/	Female
Contact No.	H/P :	Home :	Office :
Address			
Driver have any own vehicle	No,	If yes, Reg No.	
Relationship	Employee,	If no, state Owner	
Weather condition	Clear	Raining	Other
Road Surface	Dry	Wet	Other
Any Injuries	No,	If Yes, Who?	
Name And Contact No.			
Name And Contact No.			
Police Report	No,	If Yes, Where? Bedok South N.P.C	
Vehicle B No.	7P7647H	Any Passengers :	—
Name of Driver	Lai Zenglong	Contact No. :	8870 4236
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 left portion		
Camera Recorder	Yes / (No)		
Email Address	muhdkhairi.1036@gmail.com		
PARTICULAR WORKSHOP	N-51 Automotive		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	Zi Ting		
FAX NO	6741 0510		
WORKSHOP EMAIL ADDRESS	sales@n51.com.sg		

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: 5106447353

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : SJJ6341E
Chassis Number : JHMFD46208S202355
2. Name of Policyholder : MUHAMMAD KHAIRI BIN MOHAMMAD KUSBARI
3. Effective Date of Insurance : 22 Dec 2018
4. Expiry Date of Insurance : 21 Dec 2019
5. Persons or Classes of Persons entitled to drive#
(a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his/her permission.
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: S\$1,500
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: MUHAMMAD KHAIRI BIN MOHAMMAD KUSBARI
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: KENSO LEASING PTE LTD
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

德威信貸私人有限公司
TECK WEI CREDIT PTE LTD
Co. Reg. No. 200512300K
210 Turf Club Road, The Grandstand
Lot A8 Singapore 287995
Tel: 6465 0020 Fax: 6465 0017
Email: info@teckwei.com.sg

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 : TECK WEI CREDIT PTE. LTD. (00000572499)
Date of Issue : 21 Dec 2018 13:07 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

Authorised Officer

Chief Executive

Claim Handling

Accident MT/1069105

Policy No.	5106447353	Vehicle No.	SJ16341E	GST Registr
Certificate No.				
Policyholder Name	MUHAMMAD KHAIRI BIN MOHAMMAD KUSBARI			Policyholder I
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading
Contact No.(Mobile)	90685143	Contact No.(Office)	0	Contact No.(I
Email Address		Special Remark		eCode
KFK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode Reaso
NCD Protection	No	NCD Entitlement(%)	0	Private Hire
▼ Accident Details				
Report Date	30/10/2019 12:42	Accident Report Within 24 hrs	Yes	Accident Typ
Date of Accident	25/10/2019	Time of Accident hh:mm	09:30	Country of Ac
Reporting Centre		Orange Force		ICM No.
Accident Location	ALONG WARINGIN PARK BESIDE SFA EDUHEART INT SCHOOL			
▼ Excess				
Own damage Excess	600.00	Additional Excess	1500	Windscreen E
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	600.00	
Third Party Excess	0.00	Outside Singapore TP Excess	0.00	
▼ Benefits				
▼ GST Registered Information				
GST Registered	No	GST Registration Date		
GST Registration No.		GST Status Verified		Yes
Modification History				
▼ Policyholder Mailing Address				
Address 1	BLK 37 #02-461	Address 2	BEDOK SOUTH AVENUE 2	Address 3
Address 4	SINGAPORE 460037	Address Type	Singapore address	Post Code
Unit No.		Related Policy Number	5106447353	
▼ OI Driver Info				
Driver Name	MUHAMMAD KHAIRI BIN MOHAMMAD KUSBARI	Driver Type	Main Driver	
Unnamed driver Name		Driver NRIC	593153181	Driver DOB
Register Date of Driver License	05/05/2015	Driver Age	26	Driving Exper
Contact No.(Mobile)	90685143	Contact No.(Office)	0	Contact No.(I
Address 1	BLK 37	Address 2	BEDOK SOUTH AVENUE 2	Address 3
Address 4	SINGAPORE 460037	Address Type	Singapore address	Post Code
Unit No.	#02-461			
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insure
Declaration				
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No	
Modification History				
Claim 001 OD-MX New				

Claim Type *

OD-MX

Insured Name

Contact No.(Mobile)

Contact No.(Home)

Email Address

OI Vehicle Number

Claim Description

SJ16341E / YP7647H ON 25 Oct 2019

Preferred Workshop

Insured Liability

Not at Fault

Preferred Repair Option

Preferred Workshop, Name unknown

GIA report

Received

Date Registered

30/10/2019 12:47

Claim Close Date

Report Taken By

ROSLINDA

Workshop Repairer

☒ Print AX letter

Attachment

Save Submit

Accident No.

MT/1069105

Claim No.

001

Last Doc. Received

Yes

No

Upload Date

30/10/2019 00:00

Path

Category

Confid

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Choose File

No file chosen

Message Read

Clear

Please Select

NO

Clear

Please Select

NO

Clear

Please Select

NO

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NO

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NO

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Please Select

NO

Attachment List

Attachment

Uploaded By/Date

Category

?

Urgency

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 30 Oct 2019 12:47

NRIC/ Driving License

Y

Normal

NRIC/ Dr

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 30 Oct 2019 12:47

SAS

Normal

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 30 Oct 2019 12:47

Photos

Normal

PI

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 30 Oct 2019 12:47

Photos

Normal

PI

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 30 Oct 2019 12:46

Photos

Normal

PI

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 30 Oct 2019 12:46

Photos

Normal

PI

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 30 Oct 2019 12:46

Photos

Normal

PI

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 30 Oct 2019 12:46

Photos

Normal

PI

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 30 Oct 2019 12:46

Photos

Normal

PI

NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) on 30 Oct 2019 12:46

Photos

Normal

PI

Video List

Uploaded By/Date

Folder Date

File Name

?

Display in New Window

Scan and uploading