





## 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             | 20/01/2020 16:42        |
| Date Of Accident           | 18/01/2020 10:25        |
| Exact Location Of Accident | TPE TWDS SLE AT EXIT 10 |
| Country/State of Loss      | SINGAPORE               |

### DETAILS OF OWN VEHICLE

|                             |                            |
|-----------------------------|----------------------------|
| Vehicle Registration Number | SMQ8501A                   |
| <b>Insured/Policyholder</b> |                            |
| Name Of Registered Owner    | LOH BOON HWEE (LUO WENHUI) |
| NRIC No                     | SXXXX087H                  |
| Email Address               | NOEMAIL                    |
| Mobile Phone No             | (LOCAL) +65-90044493       |
| Alternative Phone No        | OFFICE-90044493            |

### Vehicle Particulars

|  |              |
|--|--------------|
| Manufacturer   | TOYOTA       |
| Model  | SIENTA       |
| 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                                       | THIRD PARTY  |
| Vehicle Category   | PRIVATE HIRE |

### Insurance Company

|                           |  |
|---------------------------|--|
| Name of Insurance Company | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage          | COMPREHENSIVE                          |
| Fleet Policy              | NO                                     |
| Policy Number             | 5114385193                             |
| Cover Note Number         |  |

### Driver

|                      |                            |
|----------------------|----------------------------|
| Name of Driver       | LOH BOON HWEE (LUO WENHUI) |
| NRIC No              | SXXXX087H                  |
| Date Of Birth        | 12/09/1976                 |
| Occupation           | OUTDOOR                    |
| Date Of Driving Pass | 28/09/2000                 |
| Driving Experience   | 19 YEARS AND 3 MONTHS      |
| Gender               | MALE                       |
| Mobile Number        | (LOCAL) +65-90044493       |
| Fax Number           |                            |
| Contact Number       | OFFICE-90044493            |
| EMail Address        | NOEMAIL                    |

|   |                               |
|---|-------------------------------|
| Address   | BLK 308C PUNGGOL WALK #08-346 |
| Postcode  | 823308                        |
| 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   | 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                         | 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)   | 2  |
| Passenger 1   | NAME: : BOBBY TENG HAO HAN<br>GENDER: : MALE |

#### Details of Police Action

|   |    |
|---|----|
| Was the accident reported to the police?  | NO |
| If Yes, Please state which Police Station |    |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom?                     |    |

#### Circumstances of Accident

REFER TO STATEMENT

#### Attachment(s)

|   |     |
|---|-----|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera?   | NO  |
| Was there any audio recorded?                 | NO  |

#### DETAILS OF OTHER VEHICLE PROPERTY 1

|                                     |             |
|-------------------------------------|-------------|
| Vehicle Registration Number         | SGD7505K    |
| Vehicle Make/Model/Colour           |             |
| Details Of Properties               |             |
| Vehicle Category                    | PRIVATE CAR |
| Name of Driver                      |             |
| NRIC/Passport Number                |             |
| Contact Number                      |             |
| Address                             |             |
| Postcode                            |             |
| Insurance Company Name              |             |
| Nature Of Damage                    |             |
| No. Of Passenger (Including Driver) |             |

**DETAILS OF OTHER VEHICLE PROPERTY 2**

|                                     |             |
|-------------------------------------|-------------|
| Vehicle Registration Number         | SLC337X     |
| Vehicle Make/Model/Colour           |             |
| Details Of Properties               |             |
| Vehicle Category                    | PRIVATE CAR |
| Name of Driver                      |             |
| NRIC/Passport Number                |             |
| Contact Number                      |             |
| Address                             |             |
| Postcode                            |             |
| Insurance Company Name              |             |
| Nature Of Damage                    |             |
| No. Of Passenger (Including Driver) |             |

**DETAILS OF OTHER VEHICLE PROPERTY 3**

|                                     |             |
|-------------------------------------|-------------|
| Vehicle Registration Number         | SJL5461M    |
| Vehicle Make/Model/Colour           |             |
| Details Of Properties               |             |
| Vehicle Category                    | PRIVATE CAR |
| Name of Driver                      |             |
| NRIC/Passport Number                |             |
| Contact Number                      |             |
| 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.
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6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

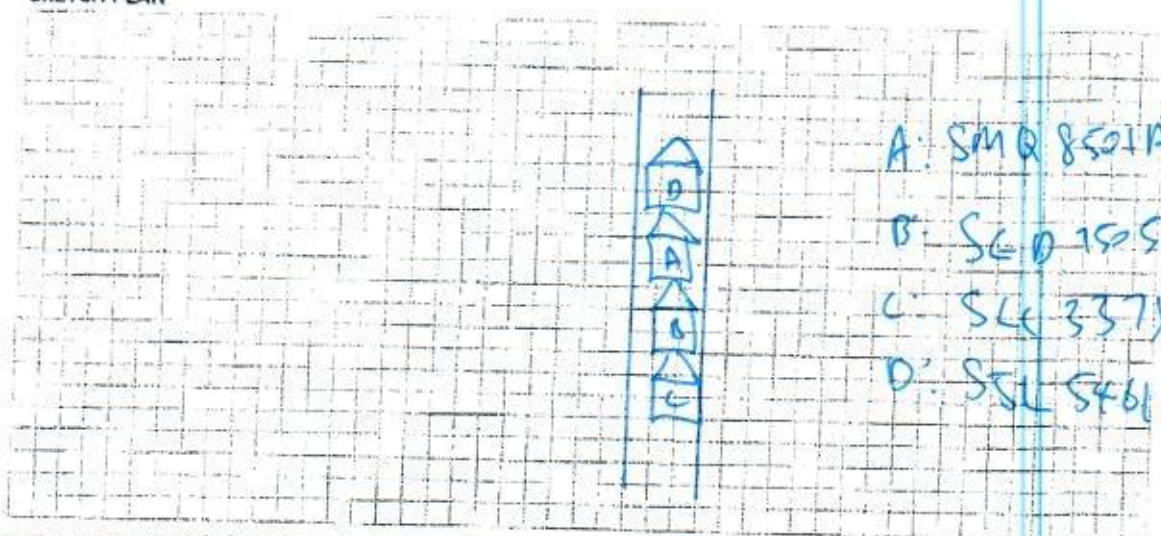
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the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

  
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

I was travelling along Exit 10 from TPE (SLE). The vehicle in front slowed down & stop. I then slowed down & stop. Suddenly, I felt a huge impact from the rear, the impact was so big that it caused my vehicle to move in front & hit onto the front vehicle. I got down & realised 4 cars was involved.

## 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 : 18/1/2020 Accident Time: 10:25hrs (24-HR-Format)  
 Accident Place : JPE and SLE at Exit 10  
 Vehicle No. (Car Plate No.) : SMG 8501A Make/Model: Toyota sienta  
 Insurance Company : NTUC Policy No: 5114385193  
 Owner or Company Name /IC No. : Loh Boon Hwee (176280874)  
 Owner or Company Contact No. : 90044493 Owner's Hp : Company Tel :  
 DRIVER'S Name / IC No. : Same as Above  
 DRIVER'S Date Of Birth : 12 Sep 1976 DRIVER'S License Pass Date : 28 Sep 2000  
 Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: owner  
 DRIVER'S Address : Blk 308 C Punggol Walk #08-346 (b) 823308  
 DRIVER'S Contact No / Alt No. : 1) 2)  
 DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)  
 Email Address :  
 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): 02  
 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  
 Any Injury (If YES, Pls state):

**Other Party Driver's Particular (if any)**

|                           |                         |
|---------------------------|-------------------------|
| Vehicle No: SGD 7505K (B) | Vehicle No: SL 337X (C) |
| Vehicle Make/Model:       | Vehicle Make/Model:     |
| Name Driver:              | Name Driver:            |
| IC No. Driver/Contact:    | IC No. Driver/Contact:  |

SSL 5461M (D)

**\* NEW - Passenger's name & gender:**

① Bobby Teng Hao Han (M)



## 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)  
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)  
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5114385193

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **To Be Advised**  
Chassis Number : NHP1707167432
2. Name of Policyholder : LOH BOON HWEE
3. Effective Date of Insurance : 05 Dec 2019
4. Expiry Date of Insurance : 04 Dec 2020
5. Persons or Classes of Persons entitled to drive#  
(a) The Policyholder.  
(b) Any other person who is driving on the Policyholder's order or with his/her permission.  
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#  
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

**This Policy does not cover**

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

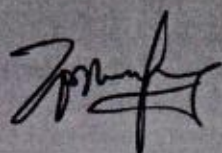
|                                      |   |
|--------------------------------------|---|
| EXCESS (SECTION 1)                   | : S\$2,000  |
| EXCESS (SECTION 2)                   | : S\$1,500  |
| WINDSCREEN EXCESS                    | : S\$100  |
| ADDITIONAL EXCESS                    | : N/A   |
| UNNAMED DRIVER EXCESS                | : PLEASE REFER OVERLEAF                           |
| REPAIR AT OWNER'S PREFERRED WORKSHOP | : NO  |
| INSURE WITH COE                      | : YES   |
| NCD PROTECTION                       | : NO  |
| TRANSPORT ALLOWANCE                  | : NO  |
| EXCESS WAIVER                        | : NO  |
| PRIMARY DRIVER                       | : LOH BOON HWEE (LUO WENHUI)                      |
| NAMED DRIVER (1)                     | : N/A   |
| NAMED DRIVER (2)                     | : N/A   |
| HIRE PURCHASE COMPANY                | : GOLDBELL FINANCIAL SERVICES PTE LTD             |
| SUM INSURED                          | : MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS |

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

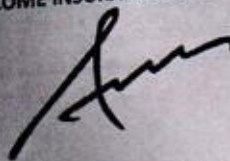
Agency : INSURE LINK PTE LTD (00000614836)  
Date of Issue : 26 Nov 2019 10:46 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:



Authorised Officer



Chief Executive



## Claim Handling

Accident MT/1080916

|                                   |                            |                               |               |                      |                |
|-----------------------------------|----------------------------|-------------------------------|---------------|----------------------|----------------|
| Policy No.                        | S114385193                 | Vehicle No.                   | SMQ8501A      | GST Registration No. |                |
| Certificate No.                   |                            |                               |               |                      |                |
| Policyholder Name                 | LOH BOON HWEE (LUO WENHUI) | Cover Type                    | drive CLASSIC | Policyholder NRIC    | S7628087H      |
| Product Code                      | PRIVATE CAR INSURANCE      | Contact No.(Office)           |               | Loading              | 0              |
| Contact No.(Mobile)               | NA                         | Special Remark                |               | Contact No.(Home)    |                |
| Email Address                     |                            |                               |               | eCode                | No             |
| KFK                               | No Yes                     | TCA                           | No Yes        | eCode Reason         |                |
| NCD Protection                    | No                         | NCD Entitlement(%)            | 0             | Private Hire         | Not available  |
| <b>Accident Details</b>           |                            |                               |               |                      |                |
| Report Date                       | 20/01/2020 14:23           | Accident Report Within 24 hrs | Yes           | Accident Type        | Unknown        |
| Date of Accident                  | 18/01/2020                 | Time of Accident hh:mm        | 00:00         | Country of Accident  | Singapore      |
| Reporting Centre                  |                            | Orange Force                  |               | ICM No.              |                |
| Accident Location                 | TRE TOWARDS CHANGE         |                               |               |                      |                |
| <b>Total Excess Applicable</b>    |                            |                               |               |                      |                |
| Excess Type                       | Per Accident               | Windscreen Excess             | 100.00        |                      |                |
| OD Standard Excess                | 2,000.00                   | TP Standard Excess            | 1,500.00      |                      |                |
| YIED OD Excess                    |                            | YIED TP Excess                |               | Driver is Covered?   | Not Applicable |
| Additional Excess                 | 0                          |                               |               |                      |                |
| Total OD Excess Applicable        | 2000.00                    | Total TP Excess Applicable    | 1,500.00      |                      |                |
| <b>Benefits</b>                   |                            |                               |               |                      |                |
| <b>GST Registered Information</b> |                            |                               |               |                      |                |
| GST Registered                    | No                         | GST Registration Date         |               |                      |                |
| GST Registration No.              |                            | GST Status Verified           | Yes           |                      |                |
| Modification History              |                            |                               |               |                      |                |

## Policyholder Mailing Address

|           |                  |                       |                   |           |                     |
|-----------|------------------|-----------------------|-------------------|-----------|---------------------|
| Address 1 | BLK 308C #08-346 | Address 2             | PUNGGOL WALK      | Address 3 | WATERWAY TERRACES 1 |
| Address 4 | SINGAPORE 823308 | Address Type          | Singapore address | Post Code | 823308              |
| Unit No.  |                  | Related Policy Number | S114385193        |           |                     |

## OI Driver Info

|   |        |                     |                 |                        |  |
|---|--------|---------------------|-----------------|------------------------|--|
| Driver Name                             |        | Driver Type         |                 | Driver DOB             |  |
| Unnamed driver Name                     |        | Driver NRIC         |                 | Driving Experience     |  |
| Register Date of Driver License         |        | Driver Age          |                 | Contact No.(Home)      |  |
| Contact No.(Mobile)                     |        | Contact No.(Office) |                 | Address 3              |  |
| Address 1                               |        | Address 2           |                 | Post Code              |  |
| Address 4                               |        | Address Type        | Foreign address |                        |  |
| Unit No.                                |        |                     |                 |                        |  |
| Does he own a Singapore Registered car? | Yes No | Driver Vehicle No.  |                 | Driver Insurer Company |  |

Modification History

Claim 002

New

|                         |                                    |                   |                            |                     |                            |               |            |
|-------------------------|------------------------------------|-------------------|----------------------------|---------------------|----------------------------|---------------|------------|
| Claim Type *            | OD-MX                              | Insured Name      | LOH BOON HWEE (LUO WENHUI) | Insured NRIC        | S7628087H                  |               |            |
| Contact No.(Mobile)     |                                    | Contact No.(Home) |                            | Contact No.(Office) |                            |               |            |
| Email Address           |                                    | OI Vehicle Number | SMQ8501A                   | TP Vehicle Number   | SGD75                      |               |            |
| Claim Description       | SMQ8501A / SGD7505K ON 18 Jan 2020 |                   |                            |                     | Name of Preferred Workshop | 0             |            |
| Preferred Workshop      | 0                                  | Insured Liability | Not at fault               | GIA report          | Received                   |               |            |
| Preferred Repair Option | Preferred Workshop, Name unknown   |                   |                            |                     |                            |               |            |
| Date Registered         |                                    |                   |                            | Claim Close Date    | 20/01/2020 17:01           | Date Received | 20/01/2020 |
| Report Taken By         | LIEW SHAN HUI                      |                   |                            |                     |                            |               |            |

Print AK letter

Save Submit

## Attachment

|   |                       |             |                  |                                 |              |           |      |
|---|-----------------------|-------------|------------------|---------------------------------|--------------|-----------|------|
| Accident No.  | MT/1080916            | Claim No.   | 002              |                                 |              |           |      |
| Last Doc. Received  | * Yes No              | Upload Date | 20/01/2020 17:04 |                                 |              |           |      |
| Path *  |                       |             |                  |                                 |              |           |      |
| Choose File   | No file chosen        | Clear       | Please Select    | Category *                      | Confidential | Urgency * | Desc |
| Choose File   | No file chosen        | Clear       | Please Select    | NO                              | Normal       |           |      |
| Choose File   | No file chosen        | Clear       | Please Select    | NO                              | Normal       |           |      |
| Choose File   | No file chosen        | Clear       | Please Select    | NO                              | Normal       |           |      |
| Choose File   | No file chosen        | Clear       | Please Select    | NO                              | Normal       |           |      |
| Choose File   | No file chosen        | Clear       | Please Select    | NO                              | Normal       |           |      |
| Choose File   | No file chosen        | Clear       | Please Select    | NO                              | Normal       |           |      |
| Message Read  |                       |             |                  |                                 |              |           |      |
| <b>Attachment List</b>                                      |                       |             |                  |                                 |              |           |      |
| Attachment  | Uploaded By/Date      | Category    | Urgency          | Description                     |              |           |      |
| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) e | NRIC/ Driving License | Y           | Normal           | NRIC/ Driving License 2020-1-20 |              |           |      |
|   | 20 Jan 2020 17:04     |             |                  |                                 |              |           |      |



|  |        |        |                  |
|--|--------|--------|------------------|
| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o<br>20 Jan 2020 17:04 | SAS    | Normal | SAS 2020-1-20    |
| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o<br>20 Jan 2020 17:03 | Photos | Normal | Photos 2020-1-20 |
| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o<br>20 Jan 2020 17:03 | Photos | Normal | Photos 2020-1-20 |
| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o<br>20 Jan 2020 17:03 | Photos | Normal | Photos 2020-1-20 |
| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o<br>20 Jan 2020 17:03 | Photos | Normal | Photos 2020-1-20 |
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| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o<br>20 Jan 2020 17:02 | Photos | Normal | Photos 2020-1-20 |
| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o<br>20 Jan 2020 17:02 | Photos | Normal | Photos 2020-1-20 |
| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o<br>20 Jan 2020 17:02 | Photos | Normal | Photos 2020-1-20 |
| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o<br>20 Jan 2020 17:02 | Photos | Normal | Photos 2020-1-20 |
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| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o<br>20 Jan 2020 17:02 | Photos | Normal | Photos 2020-1-20 |
| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o<br>20 Jan 2020 17:01 | Photos | Normal | Photos 2020-1-20 |
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| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o<br>20 Jan 2020 17:01 | Photos | Normal | Photos 2020-1-20 |
| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o<br>20 Jan 2020 17:01 | Photos | Normal | Photos 2020-1-20 |
| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o<br>20 Jan 2020 17:01 | Photos | Normal | Photos 2020-1-20 |
| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o<br>20 Jan 2020 17:01 | Photos | Normal | Photos 2020-1-20 |
| NAC_PAYA_UBI_800601( NATIONAL ASSESSMENT CENTRE SERVICES) o<br>20 Jan 2020 17:01 | Photos | Normal | Photos 2020-1-20 |

Video List

| Uploaded By/Date | Folder Date | File Name | Source |
|------------------|-------------|-----------|--------|
|------------------|-------------|-----------|--------|

Display in New Window

Scan and uploading