Date In: 10/3/20 - 10:00	Jeb description	on	Date &Time Completed	Done	by:
Ref No: 44 NC200VNY TY	SAS e-filin	g			
Veh No: YN MYX	E-mail (with	in 8hrs, AIC 2hrs)	T		
D.O.A: 7/3/20 - 16:00	i-Motor Cla		M711088829-001	19/3/20 10	1:16
AND AND ADDRESS OF THE RESIDENCE OF THE PARTY OF THE PART	i-Motor W	O (Within: OD 2hr			
OD / TP:/ Reporting Only	i-Photo Up	loaded			
TP Insurer:	Assessment/S	Survey Report		and the second	
IF insurer:	Ass't Report	by Fax / Hand	o Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (Tol: F	ax:	
TP Particulars: Veh No:		. 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	0%; P: 21-79%. P: 80-1	100%]	_
Year of Registration: ()	Warranty: YES ()/NO(\		-
	Action with the contract		/		_
	1,000 ()/\$2,00	0()	A Dominion of the Control of the Con	494 X 74 415 4	
General Remarks:-				wat Single	4 7
() Walk-In Customer: Customer's in	nformation strictly Co	onfidential & Str	ictly NO refer of repairer.		
() Total Loss Case : to e-mail Inst			· · ·		3 - 7/-
Drive-In ()/ Towed-In (); Invoi	ice: YES () /	NO(); To	owing Co: (1
		.,,,,,	owning co. (
Cemarks: (INC horline: 6788 6616)	da como de la		Date & Time Completed	Done b	y ·
1) Apply for Transport Allowance ()	Courtesy Car ()			
			T		-
2) OC Check / Post Renair Inspection	()	1		
	()	<u> </u>		
	\$3000] ()			
	\$3000] ()			uje s
B) Upload Resurvey Photo [Repair Cost > Injury :	\$3000] ()			
B) Upload Resurvey Photo [Repair Cost > Injury :	(\$3000] ()			· · · · · ·
B) Upload Resurvey Photo [Repair Cost > Injury :	(\$3000] ()		TOP CASE.	\
B) Upload Resurvey Photo [Repair Cost > Injury :	(\$3000] ())			
3) Upload Resurvey Photo [Repair Cost > Injury :	(\$3000] (()
B) Upload Resurvey Photo [Repair Cost > Injury :	(\$3000] ()			· · · ·
B) Upload Resurvey Photo [Repair Cost > Injury :	(\$3000] (
Date/Time Actions	(\$3000) (
Date/Time Actions	(\$3000] (Inveice Prep	aration Checklist	Charles the Marie	100
Injury: Actions Actions	(\$3000] (100	aration Checklist:	Mary Total Bar Total Total	100
Injury: Actions Actions	(\$3000) (1) AR : Accident I		Tit Bill	
Upload Resurvey Photo [Repair Cost > Injury: Date/Time Actions Limant's Particulars:	(\$3000] (1) AR : Accident I 2) DA : Damage A 3) TF : Towing Fe	Reporting (\$30); ssessment (\$100); INC (\$8 s . \$40	756 Bill	100
Upload Resurvey Photo [Repair Cost > Injury : Date/Time Actions Limant's Particulars :- ver/Owner:	(\$3000] (1) AR : Accident I 2) DA : Damage A 3) TF : Towing Fe 4) FT : Follow-Th	Reporting (\$30); ssessment (\$100); INC (\$8 cough Survey	fie Bill	100
Upload Resurvey Photo [Repair Cost > Injury : Date/Time Actions Limant's Particulars :- ver/Owner:	(\$3000) (1) AR: Accident I 2) DA: Darrage A 3) TF: Towing Fe 4) FT: Follow-Th 5) FT: Follow-Th For claiming ag	Reporting (\$30); assessment (\$100); INC (\$8 cough Survey cough Survey (Resurvey) ainst INC Only (wef 10 Jan 2005)	15 Bill	100
Date/Time Actions Limant's Particulars:- iver/Owner:	(\$3000] (1) AR: Accident I 2) DA: Darrage A 3) TF: Towing Fe 4) FT: Follow-Th 5) FT: Follow-Th For claiming ag 6) TR: Re-inspect	Reporting (\$30); assessment (\$100); INC (\$3 cough Survey (\$2 cough Survey (Resurvey) ainst INC Only (wef 10 Jan 2005) con	75 Bill (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	100
Date/Time Actions Limant's Particulars:- iver/Owner:	(\$3000] (1) AR: Accident I 2) DA: Damage A 3) TF: Towing Fe 4) FT: Follow-Th 5) FT: Follow-Th For claiming ag 6) TR: Re-inspect 7) N1: Idao DA +	Reporting (\$30); ssessment (\$100); INC (\$8 cough Survey (\$ cough Survey (Resurvey) sinst INC Only (wef 10 Jan 2005) ion SMRT Survey (\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	15 Bill	100
Onte/Time Actions Date/Time Actions Liminal Actions Liminal Serticulars: Liver/Owner: Intact No: maged Portion:	(\$3000] (1) AR: Accident I 2) DA: Darrage A 3) TF: Towing Fe 4) FT: Follow-Th 5) FT: Follow-Th For claiming ag 6) TR: Re-inspect 7) N1: Idac DA + 8) NTUC Addition	Reporting (\$30); ssessment (\$100); INC (\$8 cough Survey (\$ cough Survey (Resurvey) sinst INC Only (wef 10 Jan 2005) ion SMRT Survey (\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	75 Bill (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	100
Onte/Time Actions Date/Time Actions Liminal Actions Liminal Serticulars: Liver/Owner: Intact No: maged Portion:	(\$3000] (1) AR: Accident I 2) DA: Darrage A 3) TF: Towing Fe 4) FT: Follow-Th 5) FT: Follow-Th For claiming ag 6) TR: Re-inspect 7) N1: Idac DA + 8) NTUC Addition OD*	Reporting (\$30); ssessment (\$100); INC (\$8 cough Survey (\$ cough Survey (Resurvey) sinst INC Only (wef 10 Jan 2005) ion SMRT Survey (\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	75 Bill (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	100
Onte/Time Actions MATAOV 63 Liminal Particulars: Liver/Owner: Intact No: Intaged Portion:	(\$3000]	1) AR: Accident I 2) DA: Darrage A 3) TF: Towing Fe 4) FT: Follow-Th 5) FT: Follow-Th For claiming ag 6) TR: Re-inspect 7) N1: Idac DA + 8) NTUC Addition OD* *N5: Courtesy C *N6: Repair Co	Reporting (\$30); assessment (\$100); INC (\$8 cough Survey \$ cough Survey (Resurvey) ainst INC Only (wef 10 Jan 2005) ion SMRT Survey \$ al Services: Cer / Tpt Allowance	55 510	
Date/Time Actions	(\$3000] (1) AR: Accident I 2) DA: Damage A 3) TF: Towing Fe 4) FT: Follow-Th 5) FT: Follow-Th For claiming ag 6) TR: Re-inspect 7) N1: Idac DA + 8) NTUC Addition OD* *N5: Courtesy C *N6: Repair Co *N7: Fost Repair	Reporting (\$30); assessment (\$100); INC (\$8 cough Survey (\$200 ainst INC Only (wef 10 Jan 2005) ainst INC Only (wef 10 Jan 2005) ainst Survey (\$200 ainst INC Only (wef 10 Jan 2005) ainst INC Only (w	\$75 \$160 \$30 \$75 \$160 \$30 \$75 \$160 \$35 \$30 \$75	Amu (
Onte/Time Actions NATAOV 63 Liminal Actions MATAOV 63 Liminal Serticulars: Liver/Owner: Intact No: Intact No: Checked by (Engr-In-Charge): ditors: Comments:-	(\$3000] (1) AR: Accident I 2) DA: Darrage A 3) TF: Towing Fe 4) FT: Follow-Th 5) FT: Follow-Th For claiming ag 6) TR: Re-inspect 7) N1: Idae DA + 8) NTUC Addition OD* *N5: Courtesy (*N6: Repair Co- *N7: Fost Repair *N8: DV / Colle	Reporting (\$30); assessment (\$100); INC (\$8 a \$40 rough Survey (\$2 ainst INC Only (wef 10 Jan 2005) ainst INC Only (wef 10 Jan 2005) al Services: Cer / Tpt Allowance cerdination r Inspection ct Excess Coordination	55 510	100
Date/Time Actions MATAOV 6) Liminant's Particulars: Liver/Owner: Intact No: Checked by (Engr-In-Charge):	(\$3000) (1) AR: Accident I 2) DA: Darrage A 3) TF: Towing Fe 4) FT: Follow-Th 5) FT: Follow-Th For claiming ag 6) TR: Re-inspect 7) N1: Idae DA + 8) NTUC Addition OD* *N5: Courtesy (*N6: Repair Co- *N7: Fost Repair *N8: DV / Colle	Reporting (\$30); assessment (\$100); INC (\$8 a \$40 rough Survey (\$20 ainst INC Only (wef 10 Jan 2005) ainst INC Only (wef 10 Jan 2005) al Services: Car / Tpt Allowance cordination r Inspection ct Excess Coordination N:n INC) against INC	\$75 \$10 \$30 \$75 \$160 \$30 \$75 \$5 \$5 \$5 \$20 \$30	

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Fax Number Contact Number

EMail Address

- 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 witholding 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.
- 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.

aforesaid,	
SEAL THE REPORT OF THE PROPERTY OF THE PARTY	ACCIDENT STATEMENT
Date Of Report	19/03/2020 10:01
Date Of Accident	07/03/2020 16:00
Exact Location Of Accident	CTE (SLE) BEFORE JALAN BAHAGIA EXIT
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	YN2140X
Insured/Policyholder	
Name Of Registered Owner	YISHUN TOWING PTE LTD
Co Reg No	2XXXXX908W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999
Vehicle Particulars	
Manufacturer	ISUZU
Model	NHR85AUE4A
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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5109552646
Cover Note Number	
Driver	
Name of Driver	KOH ZHAN PING
NRIC No	SXXXX916F
Date Of Birth	17/04/1996
Occupation	OUTDOOR
Date Of Driving Pass	17/07/2019
Driving Experience	0 YEAR AND 7 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-83380184

OFFICE-83380184

NOEMAIL

BLK 330 SERANGOON AVENUE 3 Address

#09-369

Postcode 550330

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 COLLIDED INTO PROPERTY

Weather Conditions RAINING Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

1

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by

NO

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: : DONOVAN KOH

GENDER: MALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20200307/7019.

Attachment(s)

YES Are accident photos available for attachment?

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF INJURED PERSON 1

KOH ZHAN PING Name

Approximate Age

BODY

Injuries Sustain

Injured person in which vehicle? YN2140X

Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

DETAILS OF INJURED PERSON 2

Name DONOVAN KOH

Approximate Age

Injuries Sustain BODY
Injured person in which vehicle? YN2140X
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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
 - 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

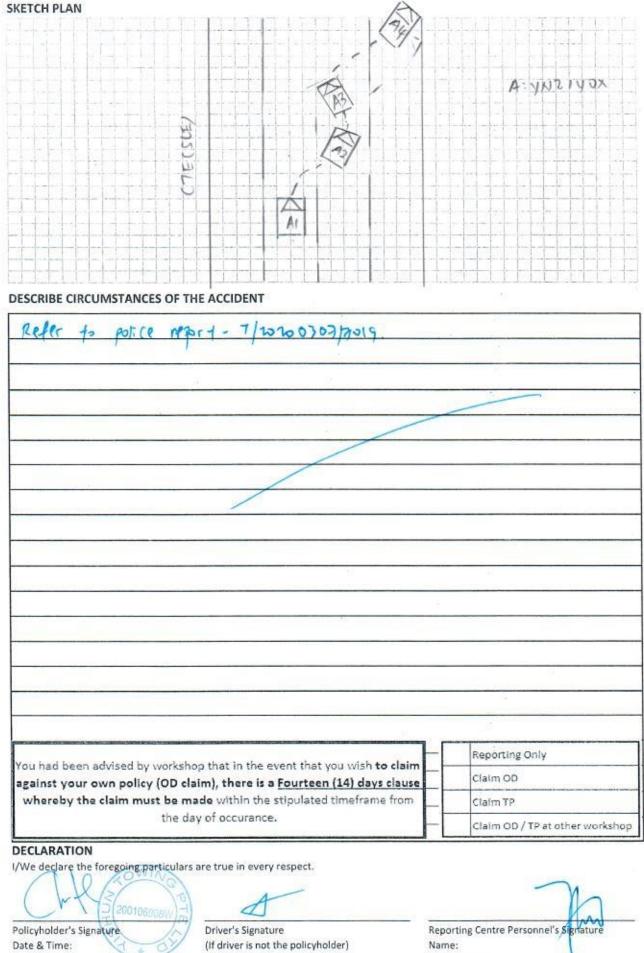
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personne's Signature

Name:

NRIC/FIN No .:



Date & Time:

NRIC/FIN No.:

ACCIDENT STATEMENT

ACCIDENT DATE: (7/3/15)(DD/	/MM/YYYY), TIME:(16 : 00)(HH:MM)
Cartella	Julan Buhagia Ait
1. DETAILS OF VEHICLE	*
a) VEHICLE NUMBER: YN DIYO	X
b)INSURANCE COMPANY: " HT K	
C)POLICY NUMBER: \$13955264	
	THIRD PARTY / THIRD PARTY FIRE &THEFT)
6)MAKE & MODEL:	William Control of the Control of th
f)TYPE:(SALOON / COUPE / MPV /VA	N/LORRY / MOTORCYCLE / OTHERS)
9/ LINCLE CATEGORY: (PRIVATE / CC	DMMBRCIAL / MOTOPCYCLEL
TITURPOSE OF USING AT ACCIDENT T	IME: LIST GOG
i) ARE YOU CLAIMING UNDER YOUR O	WN INSTIRANCE IVES AND
IF NO, PLEASE STATE (THIRD PARTY CI	LAIM / REPORTING ONLY)
2. INSURED / POLICY HOLDER	J. J
AINAME: YIShyn Towing PHE	MALE / FEMALE)
b)NRIC/FIN/PASSPORT:	CONTACT:
c)ADDRESS:	
* CONTINUE TO 3 d IE DRIVER ALSO RE	
* CONTINUE TO 3.d IF DRIVER ALSO PO	DLICY HOLDER
(Including diese) a) NAME: Koh Zhan Ping	
The state of the s	(MALE / FEMALE)
c)ADDRESS:	CONTACT: 87380184
Donovan Koh(mule)	m.
*d)DATE OF BIRTH: (12/ 4/ 199	6)(DD/MM/YYYY)
9)OCCUPATION: (INDOOR / OUTDOOR	<u>R)</u>
f) YEARS OF DRIVING EXPRERIENCE:	**
4. WAS DRIVER AN EMPLOYEE OF THE	INSURED'S COMPANY? (YES / NO)
II NO, RELATIONSHIP OF THE DRIVE	ER WITH INSURED.
5. a) WEATHER CONDITION: (CLEAR / RAIN	SING / OTHERS
6. WAS ANYBODY INJURED (YES / NO) - 3	S
7. a) REPORTED TO POLICE (YES) / NO)	inver & passinger.
IF YES, PLEASE STATE WHICH POLICE ST	TATION.
P TUIDO DADTY VILLE	
No of passenger at VEHICLE NUMBER -	MODEL:
	MODEL:
() WAIC/FIN/PASSPORT:	CONTACT:
9. THIRD PARTY VEHICLE	
No of passenger d) VEHICLE NUMBER:	MODEL:
Induding drives DRIVER'S NAME:	19 624
Induding driver) f) DRIVER'S NAME:	CONTACT:
	To the second se

email =

fax =

VIDEO = X





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20200307/7019

REPORT OF A TRAFFIC ACCIDENT

	ne Report M 020 22:10	Made:	Vide Report No.: E/20200307/0112	Station Diary No.:		
Informa	nt's Partic	ulars				
Name of Informant: KOH ZHAN PING			Address: APT BLK 330 SERANGOON AVENUE 3 #09-369 SINGAPORE 550330			
ID Type / ID No.: NRIC NO / S9614916F			Contact No.: Home/Office:	Mobile: 83380184		
Nationality: SINGAPORE CITIZEN		EN	Email: zhanping07@gmail.com			
Sex: Male	Age: 23	Date of Birth: 17/04/1996	Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: SELF EMPLOYED		19	Driving Licence Information: Class: 3	Date of Expiry:		

General Infor	mation of the Accident			HE SACE OF
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 07/03/2020 16:00	Type of Location: CTE HIGHWAY
Location: CENTRAL EX	KPRESSWAY	Road Surface:	F	Road Speed Limit:
Raining Traffic Flow:		Wet Traffic Control:	9	00 Km/h raffic Volume:
Dual Carriage Type of Collis Moving Vehic		/Kerb/Railings	A	Heavy Anyone conveyed by Imbulance: No

Details of Vehicle Involved								
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger		
YN2140X	Lorry					0		

Details of Person Involved	
Any Pedestrian Involved: No	P &
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





2 of 3

Report No. T/20200307/7019

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

CONTINUATION OF REPORT

Driver	N. Section 2.			N. S. S. S.	it are the	
Name	KOH ZHAN PING			ID No		S9614916F
Related Vehicle	YN2140X (Lorry)			Conta	ct No.	83380184
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disc	charge	NIL		
No. of Days gran	ted Medical Leave	NIL	Degree o	f Injury	Sligh	t

Brief Details.

I was traveling on the 3rd lane of CTE towards SLE before Jalan Bahagia Exit.Traffic volume was heavy. A lorry in front of me slow down I followed too. Suddenly my lorry lost control and skidded to the right. Due to the impact my lorry spin and overturn. My lorry overturn and hit onto center divider. My passenger and myself do suffer injuries in the accident.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20200307/7019

CONTINUATION OF REPORT

Sketch Plan					
Informant is	not able	to	provide	sketch	plar

Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 07/03/2020 22:10
Officer In Charge Of Case: TP / TPIB / VILTON HIA WEE SIANG Contact No.: 65476178	Classification Of Case:

Authentication Stamp

NP168



Certificate of Insurance

ROAD TRANSPORT A		ID COMPENSATION) RU	LES, 1960				
MOTOR VEHICLES (7							
Certificate Number		ULES, 1959 (MALAYSIA)		Third Part			
		- CV-bi-l-			У		
	Registration Number o	of Vehicle :	YN2140)				
Chassis Number	ranses			35EB710004			
 Name of Policyh Effective Date of 		•	Halls week	OWING PT	LID		
Effective Date of In Expiry Date of In		į	23 May 2				
	surance es of Persons entitled		30 Jun 20	120			
(a) The Policyho		to drive#					
		n the Policyholder's ord	er or with	his/her nerr	nission		
		s permitted in accordan		A PROCESSOR DA APPARAGES		or regulations to	drive
		permitted and is not dis		A Company of the Comp			
		ehalf from driving the N	Committee of the contract of t				0.03869800
6. Limitations as to	Use#						
(a) Use for socia	I domestic and pleasu	are purposes and in con	nection wi	th the Policy	holder's bus	iness or profess	ion.
(b) Use for the o	arriage of passengers	or goods in connection	with the P	olicyholder	s business.	9	
This Policy does not	cover						
(a) Use for hire	or reward.						
for one in this		the state of the state of					
SECURITIES SEC	g, pace-making, reliab	ollity trial or speed-testi	ng.				
(b) Use for racin (c) Use whilst do # Limitations r Act (Chapter	rawing a trailer except endered inoperative b	ollity trial or speed-testi t the towing of any one by Section 8 of the Moto of the Road Transport A	disabled m or Vehicle (Third Party	Risks and Cor	mpensation)	nese
(b) Use for racin (c) Use whilst do # Limitations r Act (Chapter headings.	awing a trailer except endered inoperative b 189) and Section 95 o	t the towing of any one by Section 8 of the Moto of the Road Transport A	disabled m or Vehicle (Third Party	Risks and Cor	mpensation)	nese
(b) Use for racin (c) Use whilst do # Limitations r Act (Chapter headings. EXCESS (SECTION 1)	awing a trailer except endered inoperative b 189) and Section 95 o :	t the towing of any one by Section 8 of the Moto of the Road Transport A N/A	disabled m or Vehicle (Third Party	Risks and Cor	mpensation)	nese
(b) Use for racin (c) Use whilst do # Limitations n Act (Chapter headings. EXCESS (SECTION 1) EXCESS (SECTION 2)	awing a trailer except endered inoperative b 189) and Section 95 o :	t the towing of any one by Section 8 of the Moto of the Road Transport A N/A N/A	disabled m or Vehicle (Third Party	Risks and Cor	mpensation)	nese
(b) Use for racin (c) Use whilst do # Limitations n Act (Chapter headings. EXCESS (SECTION 1) EXCESS (SECTION 2) INSURE WITH COE	awing a trailer except endered inoperative b 189) and Section 95 o : :	t the towing of any one by Section 8 of the Moto f the Road Transport A N/A N/A N/A	disabled m or Vehicle (Third Party	Risks and Cor	mpensation)	nese
(b) Use for racin (c) Use whilst do # Limitations of Act (Chapter headings. EXCESS (SECTION 1) EXCESS (SECTION 2) INSURE WITH COE HIRE PURCHASE CON	awing a trailer except endered inoperative b 189) and Section 95 o : :	t the towing of any one by Section 8 of the Moto of the Road Transport A N/A N/A N/A N/A N/A	disabled m or Vehicle (Third Party	Risks and Cor	mpensation)	nese
(b) Use for racin (c) Use whilst do # Limitations of Act (Chapter headings. EXCESS (SECTION 1) EXCESS (SECTION 2) INSURE WITH COE HIRE PURCHASE CON	awing a trailer except endered inoperative b 189) and Section 95 o : :	t the towing of any one by Section 8 of the Moto f the Road Transport A N/A N/A N/A	disabled m or Vehicle (Third Party	Risks and Cor	mpensation)	nese
(b) Use for racin (c) Use whilst do # Limitations of Act (Chapter headings. EXCESS (SECTION 1) EXCESS (SECTION 2) INSURE WITH COE HIRE PURCHASE CON SUM INSURED	awing a trailer except endered inoperative b 189) and Section 95 o : : : : : : : : : : : : : : : : : :	t the towing of any one by Section 8 of the Moto of the Road Transport A N/A N/A N/A N/A N/A	disabled m or Vehicle (ct, 1987 (N	Third Party (alaysia), an	Risks and Cor e not to be in	mpensation) ncluded under th	Motor
(b) Use for racin (c) Use whilst do # Limitations in Act (Chapter headings. EXCESS (SECTION 1) EXCESS (SECTION 2) INSURE WITH COE HIRE PURCHASE CON SUM INSURED I/We hereby Certify to Vehicles (Third Party)	awing a trailer except endered inoperative b 189) and Section 95 o : : : : : : : : : : : : : : : : : :	N/A	disabled m or Vehicle (ct, 1987 (N s is issued	Third Party (alaysia), an	Risks and Cor e not to be in	mpensation) ncluded under th	Motor
(b) Use for racin (c) Use whilst do # Limitations in Act (Chapter headings. EXCESS (SECTION 1) EXCESS (SECTION 2) INSURE WITH COE HIRE PURCHASE CON SUM INSURED I/We hereby Certify to Vehicles (Third Party)	awing a trailer except endered inoperative b 189) and Section 95 o : : : : : : : : : : : : : : : : : :	N/A	disabled m or Vehicle (ct, 1987 (N s is issued	Third Party (alaysia), an	Risks and Cor e not to be in	mpensation) ncluded under th	Motor
(b) Use for racin (c) Use whilst do # Limitations in Act (Chapter headings. EXCESS (SECTION 1) EXCESS (SECTION 2) INSURE WITH COE HIRE PURCHASE CON SUM INSURED I/We hereby Certify to Vehicles (Third Party Agency	awing a trailer except endered inoperative b 189) and Section 95 o : : : : : : : : : : : : : : : : : :	N/A	disabled m or Vehicle (ct, 1987 (N s is issued	Third Party (alaysia), an	Risks and Cor e not to be in	mpensation) ncluded under th	Motor
(b) Use for racin (c) Use whilst do # Limitations in Act (Chapter headings. EXCESS (SECTION 1) EXCESS (SECTION 2) INSURE WITH COE HIRE PURCHASE CON SUM INSURED I/We hereby Certify to Vehicles (Third Party Agency	awing a trailer except endered inoperative b 189) and Section 95 o : : : : : : : : : : : : : : : : : :	N/A	disabled m or Vehicle (ct, 1987 (N s is issued and Part IV	Third Party Nalaysia), an naccordanc of the Road	Risks and Core not to be in	mpensation) ncluded under th	Motor sia)
(b) Use for racin (c) Use whilst do # Limitations in Act (Chapter headings. EXCESS (SECTION 1) EXCESS (SECTION 2) INSURE WITH COE HIRE PURCHASE CON SUM INSURED I/We hereby Certify to Vehicles (Third Party Agency	awing a trailer except endered inoperative b 189) and Section 95 o : : : : : : : : : : : : : : : : : :	N/A	disabled m or Vehicle (ct, 1987 (N s is issued and Part IV	Third Party Nalaysia), an naccordanc of the Road	Risks and Core not to be in	mpensation) ncluded under the rovisions of the ct, 1987 (Malays	Motor sia)
(b) Use for racin (c) Use whilst do # Limitations in Act (Chapter headings. EXCESS (SECTION 1) EXCESS (SECTION 2) INSURE WITH COE HIRE PURCHASE CON SUM INSURED I/We hereby Certify to Vehicles (Third Party Agency	awing a trailer except endered inoperative b 189) and Section 95 o : : : : : : : : : : : : : : : : : :	N/A	disabled m or Vehicle (ct, 1987 (N s is issued and Part IV	Third Party Nalaysia), an naccordanc of the Road	Risks and Core not to be in	mpensation) ncluded under the rovisions of the ct, 1987 (Malays	Motor sia)
(b) Use for racin (c) Use whilst do # Limitations in Act (Chapter headings. EXCESS (SECTION 1) EXCESS (SECTION 2) INSURE WITH COE HIRE PURCHASE CON SUM INSURED I/We hereby Certify to Vehicles (Third Party Agency	awing a trailer except endered inoperative b 189) and Section 95 o : : : : : : : : : : : : : : : : : :	N/A	disabled m or Vehicle (ct, 1987 (N s is issued and Part IV	Third Party Nalaysia), an naccordanc of the Road	Risks and Core not to be in	mpensation) ncluded under the rovisions of the ct, 1987 (Malays	Motor sia)
(b) Use for racin (c) Use whilst do # Limitations in Act (Chapter headings. EXCESS (SECTION 1) EXCESS (SECTION 2) INSURE WITH COE HIRE PURCHASE CON SUM INSURED I/We hereby Certify to Vehicles (Third Party Agency	awing a trailer except endered inoperative b 189) and Section 95 o : : : : : : : : : : : : : : : : : :	N/A	disabled m or Vehicle (ct, 1987 (N s is issued and Part IV	Third Party Nalaysia), an naccordanc of the Road	Risks and Core not to be in	mpensation) ncluded under the rovisions of the ct, 1987 (Malays	Motor sia)

eBao Tech	and the second	TO SEE				200000					alClaim
Hello, NAC_PAYA_UBI_80	0601						Change	e Languag	e Char	nge Password	· Log Out
My Desktop	Poli	cy Query									,
Notice of Loss	Policy N	lo.				Date o	of Accident		07/03/2020	16:00	
	Vehicle	No.(For Motor)	YN2140	X	-7/1	Certific	cate Number				
					B	Search					
	Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5109552646		YISHUN TOWING PTE LTD	200106908W	GCV	Third Party	YN2140X	YN2140X	23/05/2019	30/06/2020

Sequen	ce Date of Endorsement		Endorsement Type En		Endorsement Status		Endorsement Content	
▽ Endors	ements							
) Insure	d Object: YN2140X	245-72/300 (2						
Unit No.		Related Policy Number		5115610819				
Address 4		Addre	ss Type	Singapore address		Post Code	569631	
Address 1	BLK 4015 #01-502	Addre	ss 2	ANG MO KIO INDU	STRIAL PARK	Address 3	SINGAPORE 569631	
→ Policyh	nolder Mailing Address							
Certificate Info								
Open Policy Info								
Flag								
Co- Insurance	No							
Agent	SININS AGENCY PTE. LTD.	Agent Tel.	69503050		GST Flag	Y		
Outside Singapore OD Excess		Outside Singapore TP Excess				Young	g/Inexperience Driver Excess	
Excess		Premium	0					
Additional		Excess			Excess			
Third Party Excess	0	Own damage	0		Windscreen	0		
Excess Type	Per Accident	All Claims Excess						
Policy Issue Date	23/05/2019	Effective Date	23/05/2019	9 00:00	Expiry Date	30/06/2020 2	3:59	
Product Name	COMMERCIAL VEHICLE INSURAI				Group Policy Flag	N		
Address	BLK 4015 #01-502 ANG MO KIO	INDUSTRIAL	PARK 1 SIN	GAPORE 569631				
Certificate No.								
Policy No.	5109552646	Policyholder Name	YISHUN TO	WING PTE LTD	Policyholder NRIC	200106908W		

ACCIDATE MY TO CREATE THE MOTOR TO STANDARD STA	rolicy No. ferrificate No. folicyholder Name roduct Code fontact No. (Mobile)					
Part	ertificate No. tolicyholder Name roduct Code Jontact No. (Mobile)	10/01020010	700200450000		2004.02.280.000.000.000	
Policyholder Name	rolicyholder Name roduct Code Iontact No. (Mobile)	5109552646	Vehicle No.	YN2140X	GST Registration No.	
Troduct Code	roduct Code lontact No.(Mobile)					
Contact No (Mosive) Contact No (Mosive) Contact No (Mosive) Sector Remark CPC CPC CPC CPC CPC CPC CPC C	Contact No. (Mobile)				Policyholder NRIC	200106908W
Special Remark				Third Party	Loading	0
TCA	mail Address	0	Contact No. (Office)	0	Contact No.(Home)	0
MCD Protection No	The state of the s		Special Remark		eCode	40.
## Accident Details ## 2001 Dile	FK	® No ○ Yes	TCA	® No ○Yes	eCode Reason	
### Academs	CD Protection	No	NCD Entitlement(%)	0	Private Hire	No
### ### #############################	♥ Accident Details					
Control Control City September Control City September Control City City September Control City City September Control City Cit	eport Date	19/03/2020 10:13	Accident Report Within 24 h	nrs Ves	Acadent Type	Collided into Property
Control Con	ate of Accident	07/03/2020	Time of Accident hh:mm	16:00	Country of Accident	Singapore
Control Location	sporting Centre		Orange Force			-5250000
Costs Type	coident Location	CTE (SLE) BEFORE JALAN BAHAGIA EXIT	23		20.00	
Description						
Distandand Excess 0.00 TP Standard Excess 0.00 ED 00 Excess 1000.00 YED TP Excess 0.00 Differed Standard Excess 1000.00 Total TP Excess Applicable 9 ### ### ### ### #### ##############			Windstreen Evoess	0.00		
ED DE Excess 1000.00 YED TP Excess 1000.00 Total TP Excess Applicable 7 Bonaffix 1000.00 Total TP Excess Applicable 7 Bonaffix 7 Bonaffix 7 Registered Treasure Applicable 7 Policyheider Mailling Address Miress 1 SUK 4015 #01-502 No. Address 2 ANG MO KIO INDUSTRIAL PARK Address 3 Post Code 19/001/2020 10.16:05 System Changed GST Registration Date from null to 01/06/2011 7 Policyheider Mailling Address Miress 1 SUK 4015 #01-502 Address 7 yee Singapore address Post Code No. No. Rested Policy Number S1550B18 Post Code No. No. Rested Policy Number S1550B18 Post Code No. No. Policyheider Liennes KID 21MN PING Direct MIXE SXXXXXII SXXXXXII Consider Consider No. (Mobile) Nore No. Address 2 SERANGOON AVENUE 3 Address 3 Post Code With No. Direct Mixer No. (Mobile) Order No. Direct Mixer No. (Mobile) Order No. Direct Mixer No. (Mobile) Order No. Direct Mixer No. Order No. (Office) Order No. Ord	V.254		manage con Excess	0.00		
Address Applicable ### Senal To Excess Applicable ### 1000.00 ### To Excess Applicable ### 2 657 Registration Date ### 2587 Registration Date ### 2587 Registration Date ### 2000.00000000 ### 3 657 Registration Date ### 2000.00000000 ### 2587 Registration Date ### 2000.000000000 ### 2587 Registration Date ### 2000.00000000000 ### 2587 Registration Date	D Standard Excess	0.00	TP Standard Excess	0.00		
Address 2 Ang Hot Science Company Comment (Action 1 Services Applicable 1 DOILO DE Science DE Science Applicable 1 DOILO DE Science	ED OD Excess	1000.00	VIED TP Excess		Ortver is Covered?	
Total TP Excess Applicable P Benefits P Strategistered Information Tr Registered Information Information Tr Registered Information Tr Registered Information Tr Registered Information Tr Registered Information Information Information Tr Registered Information Information Information Tr Registered Information Information Information Information Tr Registered Information Information Information Information Tr Registered Information Information Information Information Information Information Tr Registered Information Information Information Information Information Tr R			() () () () () () () () () () () () () (Differ to Core and	
The Registered Information T		9,644,00	Total TD Farmer Assistants			
## GST Registered Information ## ST Registered		1000.00	Total IF Excess Applicable			
ST Registered Yes GST Registeration Date 01/05/2011 ST Registered Yes GST Registered Yes GST Registered to No. 60 GST Status Verified Yes oddination History 1990/27/2020 10:16:05 System changed GST Registered from No. to Yes 19/03/2020 10:16:05 System Changed GST Registration No. from mult to 20/05/2021 P Policyholder Mailing Address ### Address 1		ation				
The egistration No. 200106906W Yes 39/03/2020 to 11:6:05 System changed CST Registration No. 19 Yes 39/03/2020 to 11:6:05 System changed CST Registration No. 10 Yes 39/03/2020 to 11:6:05 System changed CST Registration No. 10 Yes 39/03/2021 to 11:6:05 System changed CST Registration Date From null to 03/09/2011 P Policyholder Mailing Address Miness 1		1000000		######################################	No. of Contract of	
39/03/2002 DELISERS System changed CST Registration from to to Ves 19/03/2002 DELISERS System changed CST Registration from null to 20/08/2013 P Pilicyholder Mailing Address Wress 1						
19/03/2020 10:16:05 System changed GST Registration No. from null to 2001s6006W 19/03/2020 10:16:05 System changed GST Registration Date from null to 40/05/2011 ▼ Policyholder Hailing Address ddress 1		19/03/2020 10:16:05 Sys	item changed GST Registered from	n No to Yes	7888)	
## Policyholder Mailling Address ddress 1		19/03/2020 t0:16:05 Sys	item changed GST Registration No.	from null to 200106908W		
Address 2 ANG MO KIO INDUSTRIAL PARK Address 3 Address 4 Address Type Singapore address Post Code Related Policy Number 5115610819 Of 10 Priver Info Inver Name Unnamed Driver Kname KCD1 ZHAN PING Driver RISC SXXX916F Driver DB8 agater Date of Driver License 17/07/2019 Driver Age 23 Driving Experience Contact No. (Office) Contact No. (Informe) Address 3 BLK 330 Address 2 SERANGDON AVENUE 3 Address 3 SINGAPORE Only 10 Post Odd In No. 09-369 Destine on a Singapore One Blood Test One One of Blood Test One Claims Oo New One Any Injury? Insured Name YESHUN TOWING PTE LTD Inquired NRIC	Policyholder Mailing A		and the second second	**************************************		
Address Type Singapore address Post Code Related Policy Number 5315610819 9 01 Oriver Info Inver Name Unnamed Driver Driver R015 Register Date of Driver License 17/07/2019 Driver Age 23 Driving Experience Contact No. (Pforce) Rdress 2 BLK 330 Address 2 SERANGOON AVENUE 3 Address 3 Driver No. Roll R016 Driver Singapore Address Prost Code Int No. D9-369 Destroy No. Driver Vehicle No. Insured Name No. R15HUN TOWING PTE LTD. Insured NATIC			Address 2	ANG MO KID INDUSTRIAL PARK	Address 9	SINGAPORE 569631
Related Policy Number 5115610819 TO Striver Info Triver Name Unnamed Driver Driver Type Unnamed Driver Name KDH ZHAN PING Driver NR3C SXXXX916F Oniver DD8 Against Date of Driver License 17/07/2019 Driver Age 23 Driving Experience Contact No. (Mobile) Contact No. (Mobile) Contact No. (Office) Contact No. (Office) Address 2 BLK 330 Address 2 SERANGOON AVENUE 3 Address 3 Post Code Int No. 09-369 Cose he own a Singapore O 9-369 Coleration Pestory Claims 001 Next Insured Name VISSHUN TOWING PTE LTD Insured NRIC		1000 1000 1000				569631
or OI Driver Info Inver Name Unnamed Driver Driver Type Unnamed Driver Innamed driver Name KDH ZHAN PDNG Driver RB3C SXXXX916F Driver DD8 agaster Date of Driver Licenses 17/07/2019 Driver Age 23 Driving Experience Omact No. (Office) Contact No. (Office) Contact No. (Office) Contact No. (Home) 8dress 3 BLK 330 Address 2 SERANGOON AVENUE 3 Address 3 8dress 4 Address Type Singapore address Post Code Int No. 09-369 oes he own a Singapore O Yes ® No Driver Vehicle No. Driver Vehicle No. Driver Insurer Company coloration Any Injury? ® Yes ○ No Insured Name YESHUN TOWNING PTE LTD Insured NRIC					Post Code	309031
Inver Name Unnamed Driver Unnamed Unnamed Unnamed Unname Unnamed Unnamed Unnamed Unname Unnamed Un			Related Policy Number	2112010018		
Insured driver Name KDH ZHAN PDNG Driver NBC SXXXX916F Driver DOB agister Date of Driver License 17/07/2019 Driver Age 23 Driving Experience chact No. (Mobile) Contact No. (Office) Contact No. (Horne) ddress 2 BLK 390 Address 2 SERANGDQN AVENUE 3 Address 3 address 4 Singapore address Post Code nit No. 09-369 oes he own a Singapore O ves ® No Driver Vehicle No. Driver Vehicle No. Driver Insurer Company coloration Teathalyser or Blood Test O mg Any Injury? ® Yes No Tisshuh Towling PTE LTD Insured NRIC		100000000000000000000000000000000000000				
Driver Age 23 Driving Experience Contact No. (Office) Contact No. (Office) Contact No. (Office) Contact No. (Office) Idress 3 BLK 390 Address 2 SERANGOON AVENUE 3 Address 3 Idress 4 Address Type Singapore address Post Code Nt No. 09-369 Set No Driver Vehicle No. Driver Vehicle No. Driver Insurer Company Claration Claration History Claims 001 Next Image 4 No Driver Insurer Company Insured Name FISHUN TOWING PTE LTD Insured NRIC					112/00/00/20	9292999925
Contact No. (Office) Contact N						17/04/1996
Address 3 Address 2 Address 4 Address Type Singapore address Post Code No No		17/07/2019		23		0
Address Type Singapore address Post Code Nt No. 09-369 pes he own a Singapore O Yes ® No Driver Vehicle No. Driver Insurer Company claration eathalyser or Blood Test 0 mg Any Injury? ® Yes No dification History Claim 001 New Insured Name YISHUN TOWING PTE LTD Insured NAIC	ontact No. (Mobile)		Contact No.(Office)		Contact No.(Home)	
Insured Name Operation Claretion Claretio	Idress 1	BLK 330	Address 2	SERANGOON AVENUE 3	Address 3	SINGAPORE 550330
Driver Vehicle No. Driver Insurer Company Charation Teathslyser or Blood Test adding? Omg Any Injury? EYes No Insured Name TISHUN TOWING PTE LTD Insured Name	idress 4		Address Type	Singapore address	Post Code	550330
aim Type * On-MX ✓ Insured Name YESHUN TOWING PTE LTD Insured NAIC	nit No.	09-369				
coloration reathalyser or Blood Test 0 mg Any Injury? © Yes Ne adding? Claim 001 Nem aim Type * OD-MX V Insured Name YESHUN TOWING PTE LTD Insured NATE		○ Yes ® No	Driver Vehicle No.		Driver Insurer Company	
reathslyser or Blood Test 0 mg Any Injury?	gareres carr					
aim Type * OD-MX V Insured Name YISHUN TOWING PTE LTD Insured NAIC	claration					
Claim 001 New sim Type * OD-MX V Insured Name YISHUN TOWING PTE LTD Insured NAIC		0 mg	Any injury?	® Yes ○ No		
Cialm 001 New sim Type * OO-MX Insured Name YISHUN TOWING PTE LTO Insured NRIC	and a					
Claim 001 New aim Type + OD-MX Insured Name YSSHUN TOWING PTE LTD Insured NRIC	10200000000000					
laim Type * DO-MX Insured Name YISHUN TOWING PTE LTO Insured NRIC	odification History					
aim Type * OC-MX Insured Name YISHUN TOWING PTE LTO Insured NRIC	Claim 001 New					
	100					
offact No. (Mobile) Contact No. (Home) Contact No. (Office)	aim Type +	OD-MX	Insured Name	YESHUN TOWING PTE LTO	Insured NRIC	200106908W
	intact No.(Mobile)		Contact No.(Home)		Contact No. (Office)	96288480
nol Address 01 Vehicle Number FN2140X TP Vehicle Number	nal Address		OI Vehicle Number	YN2140X	TP Vehicle Number	
alment Type Claimant Type * Please Select V Type of Benefit * Please Select V		Please Select				
liment Neme * ≥≥ Clerment NRIC *						
almant Address						
		YN2140X ON 7 Mar 2020			Name of Preferred Workshop	
eferred Workshop Contact	eferred Workshop Contact		Interest substance	Figure 1 Face	7.0	
Traces Causey - Footy at Faute	Consideration of the second	Vac. 533			WI COMMOND	Descript
				preferred workshop, Name unknown		Received V
te Registered 19/03/2020 10:16 Claim Close Date Date Date Received	ce Registered		Claim Close Date		Date Received	19/03/2020 00:00
port Taken By Jackson	LEG MICHIGAN	Jackson				
Print AK letter	port Taken By					
The second of th	CONTRACTOR OF THE PARTY OF THE			Second Second		
Save Submit				Save Submet		
Attachment	Print AK letter					
	Print AK letter					
	Print AK letter					
oddern No. MT/1088829 Calm No. 001	eport Taken By Print AK letter Attachment			1122		
	Attachment Ocident No.	MT/1088829				
t Doc. Received	Print AK letter Attachment					
A STATE OF THE STA	Print AK letter Attachment	● Yes ○ No		19/03/2020 10:18	Confidencial Urger	ncy • Description
Path • Category • Confidencial Un	Print AK letter Attachment	● Yes ○ No	Upload Date	19/03/2020 10:18 Category •	100.500 DOLGO	ncy • Description
Path • Caregory • Confidencial Ung	Print AK letter Attachment	● Yes ○ No	Upload Date	19/03/2020 10:18 Category * Clear Please Select	☑ No ✓ Normal	The state of the s
Path * Category * Confidencial Unit of the Confidencial Unit of the Category * Confidencial Unit of th	Attachment	● Yes ○ No	Upload Date Brown Brown	19/03/2020 10:18 Category * Clear Please Select Clear Please Select	▼ Normal Normal	
Path * Category * Confidencial Unit Browse Clear Please Select V NO V Norm. Browse Clear Please Select V NO V Norm. Browse Clear Please Select V NO V Norm.	Attachment	● Yes ○ No	Upload Date Brown Brown Brown	19/03/2020 10:18 Category * Clear Please Select Se Clear Please Select	▼ № √ Normal ▼ № √ Normal ▼ № √ Normal	
Path * Category * Confidencial Unit of the Category * Confidencial Unit of the Category * Category * Confidencial Unit of the Category * Category	Attachment	● Yes ○ No	Upload Date Brown Brown Brown	19/03/2020 10:18 Category * Clear Please Select Se Clear Please Select Se Clear Please Select Se Clear Please Select	Normal N	

Attachment	List							
Astachment		led By/Date	Category	9	Urgancy		Description	Hsg Sent?
47 MM	NAC_PAYA_UBI_800601(NAT: CES) on 19	IONAL ASSESSMENT CENTRE SERVE May 2020 10:18	NRIC/ Driving License	Y	Normal	NRIC/	Driving License 2020-3-19	
1	NAC_PAYA_UBI_800601(NAT: CES) on 19	ONAL ASSESSMENT CENTRE SERVI Mar 2020 10:18	SAS		Normal	SAS 2020-3-19		
B.	NAC_PAYA_UBI_800601(NATI CES) on 19	ONAL ASSESSMENT CENTRE SERVI Mar 2020 10:18	Photos Normal		Photos 2020-3-19			
		ONAL ASSESSMENT CENTRE SERVI Mar 2020 10:18	Photos Normal		Photos 2020-3-19			
10	NAC_PAYA_UB1_800601(NAT) CES) on 19	ONAL ASSESSMENT CENTRE SERVI Mar 2020 10:18	Photos Normal		Photos 2020-3-19			
	NAC_PAYA_USI_800601(NATI CES) on 19	ONAL ASSESSMENT CENTRE SERVI Mar 2020 10:18	Photos		Normal	il Photos 2020-3-19		
	NAC_PAYA_UB1_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 19 Mar 2020 t0:17		Photos		Normal	Photos 2020-3-19		
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERV) CES) on 19 Mar 2020 10:17		Photos		Normal	Photos 2020-3-19		
屋	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 19 Mar 2020 10:17		Photos		Normal		Photos 2020-3-19	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 19 May 2020 10:17		Photos		Normal		Photos 2020-3-19	
*	NAC_PAYA_UBL_B00601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 19 Mar 2020 10:17		Photos		Normali		Photos 2020-3-19	
7	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 19 Mar 2020 10:17		Photos		Normal		Photos 2020-3-19	
Ÿ	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 19 Mar 2020 10:17		Photos		Normal		Photos 2020-3-19	
	NAC_PAYA_UBI_BD0601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 19 Mar 2020 10:17		Photos		Normal	Photos 2020-3-19		
	NAC_PAYA_UBE_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 19 Mar 2020 10:17		Photos		Normal	Photos 2020-3-19		
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 19 Mar 2020 10:17		Photos		Normal	Photos 2020-3-19		
1	NAC_PAYA_UBI_B00601(NATIONAL ASSESSMENT CENTRE SERVI CES) on 19 Mar 2020 10:17		Photos		Normal		Photos 2020-3-19	
建	NAC_PAYA_UBI_800601[NATIONAL ASSESSMENT CENTRE SERVI CES) on 19 Mar 2020 10:17		Photos	Normal Photos 2020-3-19			Photos 2020-3-19	
Video List	Uploaded By/Date	Folder Date		le Name		P	Source	