

NATIONAL Assessment Centre Services

[wef 1 Jan'05]

MAA120056172

Date In: 17/12-17:07	Job description	Date & Time Completed	Done by
Ref No: NA/120056172	SAS e-filing		
Veh No: 9W9560C	E-mail (within 3hrs, AIC 2hrs)		
D.O.A: 17/12-11:30	i-Motor Claim Form	17/12/05 17:21	17/12/05 17:21
OD: TP / Reporting Only	i-Motor W/O (Within: OD 2hrs, TP 4hrs)		
	i-Photo Uploaded		
TP Insurer:	Assessment/Survey Report		
	Ass't Report by Fax / Hand to Owner/Wksp		

Preferred Wksp / INC Assign Wksp / QW: (Tel:	Fax:
TP Particulars:	Veh No: YM 3887	INC () / Non-INC ()
Owner / Driver: (Tel:	
Policy No: (Period: (Cover Type: (
Confirmed by: (Date:	Time:
Insured/Driver Liability: (%) [Note-Est. Status (WO): N: 0-20%; P: 21-79% P: 80-100%]	
Year of Registration: (Warranty: YES () / NO ()	
Excess: (\$	Loading: \$1,000 () / \$2,000 ()	

General Remarks:-

() Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.

() Total Loss Case: to e-mail Insurer URGENTLY.

Drive-In () / Towed-In (); Invoice: YES () / NO (); Towing Co: ()

Remarks:-	Date & Time Completed	Done by
(INC hotline: 6788 6616)		
1) Apply for Transport Allowance () / Courtesy Car ()		
2) QC Check / Post Repair Inspection ()		
3) Upload Resurvey Photo [Repair Cost > \$3000] ()		

Injury: _____

Date/Time	Actions

MAA120056172	Invoice Preparation Checklist		Am't (\$)	Am't (\$)
Claimant's Particulars:-	1) AR: Accident Reporting (\$30);		Inc Bill	Add Bill
Driver/Owner:	2) DA: Damage Assessment (\$100); INC (\$80)			
Contact No:	3) TF: Towing Fee \$40/\$45			
Damaged Portion:	4) FT: Follow-Through Survey \$120			
	5) FT: Follow-Through Survey (Resurvey) \$30			
	For claiming against INC Only (wef 10 Jan 2005)			
	6) TR: Re-inspection \$75			
	7) N1: Idac DA + SMRT Survey \$160			
	8) NTUC Additional Services:-			
	OD*			
QC Checked by (Engr-In-Charge):	*N5: Courtesy Car / Tpt Allowance \$5			
	*N6: Repair Co-ordination \$10			
	*N7: Post Repair Inspection \$25			
	*N8: DV / Collect Excess Coordination \$5			
Auditors' Comments:-	TP (N11): TP (Non INC) against INC \$20			
	9) N12: Idac Mobile \$0			
	Invoice dated	Fee Charged		
	Invoice dated	Fee Charged		

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

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

ACCIDENT STATEMENT

Date Of Report	01/07/2020 17:07
Date Of Accident	01/07/2020 11:30
Exact Location Of Accident	BLK 621B EDGEFIELD WALK OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLW9560C
Insured/Policyholder	
Name Of Registered Owner	D'LOFTY LIFESTYLE
Co Reg No	5XXXX499B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97439434
Alternative Phone No	OFFICE-97439434

Vehicle Particulars

Manufacturer	TOYOTA
Model	PICNIC AUTO W/O ROOF RACK
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5105084521-02
Cover Note Number	

Driver

Name of Driver	JASMANI BIN ABDULLAH
NRIC No	SXXXX791J
Date Of Birth	10/06/1972
Occupation	OUTDOOR
Date Of Driving Pass	31/01/2013
Driving Experience	7 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87550141
Fax Number	
Contact Number	OFFICE-87550141
EEmail Address	NOEMAIL

Address	BLK 621B EDGEFIELD WALK #05-45
Postcode	822621
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

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

Details of Police Action

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

Circumstances of Accident

REFER TO STATEMENT.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YM7828T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	KHOR ZHEN HAO
NRIC/Passport Number	
Contact Number	98746097
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

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

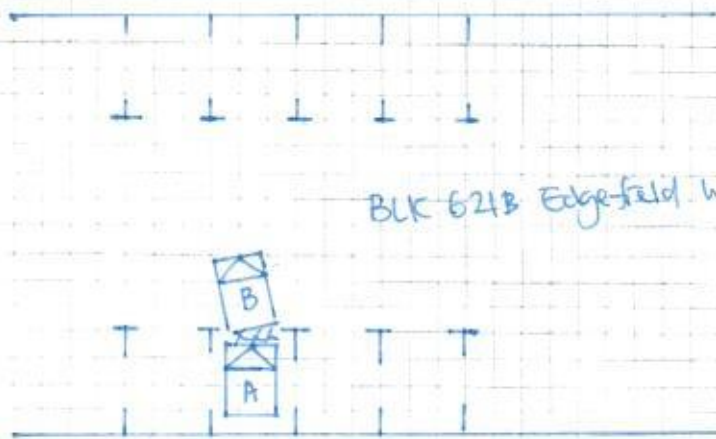


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



BLK 621B Edgefield Walk OSCP

Veh A: SLW9560C
Veh B: Ym7828T

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

was parked

On above date & time, my vehicle A (SLW9560C), at BLK 621B Edgefield Walk Open space car park, I had ensured my vehicle was in good condition when I leave my vehicle. After I came back to my vehicle and realised my vehicle front portion was damaged. I managed to contact to the driver of vehicle B (Ym7828T) and we exchanged both parties particular. We decided report to our insurance.

DECLARATION

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

2

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.:

[Handwritten signature]

Vehicle No.	SLW9560C	Model / Make	Toyota Prius
Date of Accident	1/7/2020		
Time of Accident	1130	HRS	
Location of Accident	Along BLK 621 B Edgefield Walk OSCF		
Exact purpose use during accident	Private use		
Name of Owner	D'Lofty Lifestyle		
Telephone No.	H/P : 97439434	Home :	Office :
NRIC	53114499B		
Address	261 Tampines Street 21 #10-290 S(520261)		
Claim type	OD	THIRD PARTY	REPORTING ONLY
Insurance Company	NTUC		
Type of Coverage	Comprehensive	Third Party	Third Party / Fire / Theft
Policy No.	5105084521-02		
Name of Driver	As Above If No, Jasmani Bin Abdullah		
NRIC	S7249791J	Any Passengers :	-
Date of birth	10/6/1972		
Occupation	Outdoor	/	Indoor
Driving License Pass Date	31/1/2013		
Gender	Male / Female		
Contact No.	H/P : 87550141	Home :	Office :
Address	BLK 621B Edgefield Walk #05-45 S(822621)		
Driver have any own vehicle	No,	If yes, Reg No.	
Relationship	Employee,	If no, state Hirer	
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?	
Vehicle B No.	YM7828T	Any Passengers :	
Name of Driver	Khor Zhen Hao	Contact No. :	9874 6097
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 portion		
Camera Recorder	Yes / No		
Email Address	gaixin@gmail.com		
PARTICULAR WORKSHOP	N-51 Automotive Pte Ltd		
CONTACT NO.	6842 0051 / 6744 0510		
CONTACT PERSON	Brandon		
FAX NO	6741 0510		
WORKSHOP EMAIL ADDRESS	sales@n51.com.sg		

I, Khor Zhen Hao (G6562961K) driver of (YM7828T)

Mitsubishi Fuso reversed my vehicle and collided onto SLW9560C
11/7/2020 @ 1130HR
(Toyota Proton) along BLK 621B Edgefield Walk OSCP. I will
take fully responsibility to Jasmani Bin Abdullah (S7249791J).



Khor Zhen Hao
G6562961K
YM7828T



Jasmani Bin Abdullah
S7249791J
SLW9560C

I call me back

HAC

9874 6097



D'Lofty Lifestyle

ROC : 53114499B

75 Pasir Panjang Hill

#03-03 Singapore 118885

VEHICLE RENTAL AGREEMENT

This Vehicle Rental Agreement comprises these terms and conditions. The term of this Vehicle Rental Agreement runs from the date and hour of vehicle pickup as indicated at the end of this Vehicle Rental Agreement until the return of the vehicle to "the Owner" (D'Lofty Lifestyle) and completion of all terms of this Vehicle Rental Agreement by both Parties.

This Vehicle Rental Agreement is made and entered on between D'Lofty Lifestyle and ROC : 53114499B (referred to as "the Owner") and the person and/or company signing this Vehicle Rental Agreement JASMANI BIN ABDULLAH and NRIC S7249791J (referred to as "the Renter") whose particulars are recorded in this Vehicle Rental Agreement. Owner and Renter may also be referred to as "Party" in the singular and "Parties" in the plural. Owner hereby agrees to rent the Renter the following Vehicle and rented terms and details are as follows:

Rented Vehicle details

Registration number	: SLW 9560 C
Made / Model	: TOYOTA PICNIC 2.0
Color	: SILVER
Period of rental	: minimally 6 months
Renter charges (SGD\$)	: \$300 per week
Security deposit (SGD\$)	: 7400
Terms of payment	: Cash / Bank transfer
Insurance	: NTUC
Authorized driver	:
Excess (SGD\$)	: S\$2,500.00
Excess 2 (SGD\$)	: S\$1,500.00
Penalty of overdue	: 1.5% of the daily rental charges
Rental period	: Start Date : 8 JUN 2020
	: End Date :

Time :

Time :

REMARKS : \$300 weekly rental is temporary and will be revised from time to time based on the market situation.



D'Lofty Lifestyle

Vehicle Rental Agreement

Renter's Initial : _____

Page 1 of 6

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: 5105084521-02

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SLW9560C**
 Chassis Number : JTEGH23B000026531
2. Name of Policyholder : D'LOFTY LIFESTYLE
3. Effective Date of Insurance : 04 May 2020
4. Expiry Date of Insurance : 03 May 2021
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	: YES (FREE)
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
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 : THIS MARKETING INSURANCE AGENCY (00000572208)
 Date of Issue : 28 Apr 2020 15:32 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive

eBaoTech

GeneralClaim

Hello, NAC_PAYA_UBI_800601

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

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="01/07/2020 11:30"/>							
Vehicle No.(For Motor)	<input type="text" value="SLW9560C"/>	Certificate Number	<input type="text"/>							
<input type="button" value="Search"/>										
Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5105084521-02		D'LOFTY LIFESTYLE	53114499B	GPC	drivo CLASSIC	SLW9560C	SLW9560C	04/05/2020	03/05/2021
<input type="button" value="Continue"/>										

Policy Information

Policy No.	5105084521-02	Policyholder Name	D'LOFTY LIFESTYLE	Policyholder NRIC	53114499B
Certificate No.					
Address	BLK 261 #10-290 TAMPINES STREET 21 SINGAPORE 520261				
Product Name	PRIVATE CAR INSURANCE	Plan		Group Policy Flag	N
Policy issue Date	28/04/2020	Effective Date	04/05/2020 00:00	Expiry Date	03/05/2021 23:59
Excess Type	Per Accident	All Claims Excess			
Third Party Excess	1500	Own damage Excess	2000	Windscreen Excess	100
Additional Excess	0	OS Premium	0		
Outside Singapore OD Excess	2000	Outside Singapore TP Excess	1500	Young/Inexperience Driver Excess	
Agent	THIS MARKETING INSURANCE A	Agent Tel.	63444479	GST Flag	Y
Co-insurance Flag	No				
Open Policy Info					
Certificate Info					

Policyholder Mailing Address

Address 1	BLK 261 #10-290	Address 2	TAMPINES STREET 21	Address 3	TAMPINES EAST ZONE 4
Address 4	SINGAPORE 520261	Address Type	Singapore address	Post Code	520261
Unit No.	10-290	Related Policy Number	5105084521-02		

Insured Object: SLW9560C

Endorsements

Sequence	Date of Endorsement	Endorsement Type	Endorsement Status	Endorsement Content
<div>Continue</div> <div>Cancel</div>				

Claim Handling

Accident MT/1095836

Policy No.	5105084521-02	Vehicle No.	SLW9560C	GST Registration No.	
Certificate No.					
Policyholder Name	D'LOFTY LIFESTYLE			Policyholder NRIC	531144998
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive CLASSIC	Loading	0
Contact No.(Mobile)	97429434	Contact No.(Office)	0	Contact No.(Home)	0
Email Address		Special Remark		eCode	<input type="text"/>
KPK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	Yes

Accident Details

Report Date	01/07/2020 17:19	Accident Report within 24 hrs	Yes	Accident Type	Damaged whilst parked
Date of Accident	01/07/2020	Time of Accident hh:mm	11:30	Country of Accident	Singapore
Reporting Centre		Damage Force		ICM No.	
Accident Location	BLK 621B EDGEFIELD WALK OPEN SPACE CARPARK				

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	2,000.00	TP Standard Excess	1,500.00		
YIED OD Excess	0.00	YIED TP Excess		Driver is Covered?	
Additional Excess	0				
Total OD Excess Applicable	2000.00	Total TP Excess Applicable			

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History	01/07/2020 17:20:25 System changed GST Status Verified from No to Yes		

Policyholder Mailing Address

Address 1	BLK 261 #10-290	Address 2	TAMPINES STREET 21	Address 3	TAMPINES EAST ZONE 4
Address 4	SINGAPORE 520261	Address Type	Singapore address	Post Code	520261
Unit No.	10-290	Related Policy Number	5105084521-02		

OI Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	10/06/1972
Unnamed driver Name	JASMANI BIN ABDULLAH	Driver NRIC	5X00K7911	Driving Experience	7
Register Date of Driver License	31/01/2013	Driver Age	48	Contact No.(Home)	0
Contact No.(Mobile)	87550141	Contact No.(Office)	0	Address 3	SINGAPORE 822621
Address 1	BLK 621B	Address 2	EDGEFIELD WALK	Post Code	822621
Address 4		Address Type	Singapore address		
Unit No.	05-45				
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No
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Modification History

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	D'LOFTY LIFESTYLE	Insured NRIC	531144998
Contact No.(Mobile)	96444479	Contact No.(Home)		Contact No.(Office)	
Email Address		Of Vehicle Number	SLW9560C	TP Vehicle Number	YM7828T
Claimant Type Claimant Type *	Please Select	Type of Benefit *	Please Select		
Claimant Name *	22	Claimant NRIC *			
Claimant Address					
Claim Description	SLW9560C / YM7828T ON 1 Jul 2020				
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	Name of Preferred Workshop	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	GSA report	Received
Date Registered	01/07/2020 17:21	Claim Close Date		Date Received	01/07/2020 00:00
Report Taken By	Jackson				

☒ Print AK letter

Save Submit

Attachment

Accident No.	MT/1095836	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	01/07/2020 17:22

Path *	Category *	Confidential	Urgency *	Description *
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

☐ Send Message

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Description	Msg Sent? (CO)
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 01 Jul 2020 17:22	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2020-7-1	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 01 Jul 2020 17:22	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2020-7-1	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 01 Jul 2020 17:22	SAS		Normal	SAS 2020-7-1	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 01 Jul 2020 17:21	Photos		Normal	Photos 2020-7-1	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 01 Jul 2020 17:21	Photos		Normal	Photos 2020-7-1	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 01 Jul 2020 17:21	Photos		Normal	Photos 2020-7-1	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 01 Jul 2020 17:21	Photos		Normal	Photos 2020-7-1	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 01 Jul 2020 17:21	Photos		Normal	Photos 2020-7-1	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 01 Jul 2020 17:21	Photos		Normal	Photos 2020-7-1	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 01 Jul 2020 17:21	Photos		Normal	Photos 2020-7-1	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 01 Jul 2020 17:21	Photos		Normal	Photos 2020-7-1	
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICE) on 01 Jul 2020 17:21	Photos		Normal	Photos 2020-7-1	

Video List

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