SATISFACTORY NOTE

TAN CHONG MOTOR S					e njedaj si o	
AUTOLUTION INDUST TC AUTOCLINIC PTE I		(AIFL)				
TO AUTOCEIMIOT TE I		9	TYPE OF C	Λ IN // ·	an an an an an an	
DATE:			TYPE OF CLAIM: OWN DAMAGE (OD)			
OWNER NAME:	BRENT ALAN UITERMARK			OWN DAMAGE (OD) & UNINSURED LOSS (EXCESS & LOSS OF USAGE) VIA		
NRIC NO.:			TCMS / AIPL / TCAC			
ADDRESS:			THIRD PARTY THROUGH TCMS / AIPL / TCAC			
principal service description of the service of the			THIRD PARTY - OWNER DIRECT CLAIM AGAINST THIRD PARTY INSURANCE			
				WINDSCR	EEN / GLASS (W/S)	
VEHICLE MODEL:	MISSAN PASHQAI		INSURANCE CO.:		AXA INSURANCE	
REGN. NO.:	5749556 D		CLAIM NO.:		1 (1) (1) (2) (2) (2) (3) (3) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	
CHASSIS NO.:	NO.:		POLICY NO.: GA 316287/1			
DATE OF ACCIDENT:	OF ACCIDENT: 04-03-2019 DATE RECEIVED		25·3 2019 DATE CC		OMPLETED: 30 3-2019	
Pte Ltd / TC AutoClinic been completed to our / in repect thereof. Terms	Pte Ltd and tha my satisfaction and Conditions	and that We / I have as stipulated in the	rs as resulted of no futher claim overleaf applies.	the accide whatsoever	Pte Ltd / Autolution Industrial ent of the above vehicle have ragainst the above Company Chong Motor Sales Pte Ltd /	
Autolution Industrial Pte	Ltd / TC AutoC	Clinic Pte Ltd on*	7 1 1 1 1 1 1		1600 (200 + 000 10)	
standard Industria	I Dractice incre	ase the loading on V	our premium aui	ing insuran	icy terms & conditions, or as not Policy renewal. Your NCD we Insurance Company.	
			X.	let :	1- Alleto	
11.410.14			(NAME / S	IGNATURE	OF INSURED)	
FOOTNOTE:			** ** N			
TCMS / AI OF OWNE	PL / TCAC* WIL R	L CLAIM ON BEHAL	F .	DEPOSI	T PAID BY OWNER	
THROUGH TCMS'S LEGAL AID OWNER WILL MAKE CLAIM AGAINST THIRD PARTY INSURANCE COMPANY					DOCUMENTS RETURNED TO OWNER	
OF OWNE	PL / TCAC* WIL	LL CLAINM ON BEH D LOSS. (EXCESS SAGE)	ALF	1. 1.12 (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B		

* Delete When Necessary

INSURANCE CO. COPY