

SATISFACTORY NOTE

TAN CHONG MOTOR SALES PTE LTD (TCMS) ☒

AUTOLUTION INDUSTRIAL PTE LTD (AIPL) ☐

TC AUTOCLINIC PTE LTD (TCAC) ☐

DATE: _____

OWNER NAME: Mr. EDWIN JOSEPH WHEELER JR

NRIC NO.: _____

ADDRESS: _____

VEHICLE MODEL: NISSAN X-TRAIL

REGN. NO.: SMF9963B

CHASSIS NO.: _____

TYPE OF CLAIM:

☒ OWN DAMAGE (OD)

☐ OWN DAMAGE (OD) & UNINSURED LOSS
(EXCESS & LOSS OF USAGE) VIA
TCMS / AIPL / TCAC

☐ THIRD PARTY THROUGH
TCMS / AIPL / TCAC

☐ THIRD PARTY - OWNER

☐ DIRECT CLAIM AGAINST
THIRD PARTY INSURANCE

☐ WINDSCREEN / GLASS (W/S)

INSURANCE CO.: ALLIANZ INS

CLAIM NO.: _____

POLICY NO.: SP2003441709-01

DATE OF ACCIDENT: 03.02.2023

DATE RECEIVED: 09.02.2023

DATE COMPLETED: 15.02.2023

We / I hereby confirmed that the accident repair carried out by Tan Chong Motor Sales Pte Ltd / Autolution Industrial Pte Ltd / TC AutoClinic Pte Ltd and that all necessary repairs as resulted of the accident of the above vehicle have been completed to our / my satisfaction and that We / I have no futher claim whatsoever against the above Company in repect thereof. Terms and Conditions as stipulated in the overleaf applies.

We / I have taken delivery of my car after all necessary repair carried out by Tan Chong Motor Sales Pte Ltd / Autolution Industrial Pte Ltd / TC AutoClinic Pte Ltd on*

Note: In the event of an Own Damage Claim, your Insurance Company may under policy terms & conditions, or as standard Industrial Practice, increase the loading on your premium during Insurance Policy renewal. Your NCD [Non Claim Discount] may also be affected, subject to business policy of respective Insurance Company.

(NAME / SIGNATURE OF INSURED)

FOOTNOTE:

☐ TCMS / AIPL / TCAC* WILL CLAIM ON BEHALF
OF OWNER
THROUGH TCMS'S LEGAL AID

☐ DEPOSIT PAID BY OWNER

☐ OWNER WILL MAKE CLAIM AGAINST
THIRD PARTY INSURANCE COMPANY

☐ DOCUMENTS RETURNED TO
OWNER

☐ TCMS / AIPL / TCAC* WILL CLAIM ON BEHALF
OF OWNER UNINSURED LOSS. (EXCESS
PAYMENT & LOSS OF USAGE)

INSURANCE CO. COPY

* Delete When Necessary