

POLICY SCHEDULE/SUMMARY OF YOUR COVER



Genetic Financial Services

11 Routledge Street

Milton Park

Harere

GENEINSURE CONTACT

Call us on : +263 867 722 33 44

Whatsapp us on : +263 719 884 884

/+263 732 884 884

Email us on: service@gene.co.zw

YOUR PERSONAL DETAILS

Policy Number:	GMCC180000792-1	Postal Address	00263
Policy Holder Name :	chandan27 k	Date of Birth	01/10/2018
Cell number:	123456789	Your Package:	Annual
Alternative Contact Number		Physical Address	test d
Email Address	chandan27@gmail.com	ID Number	12-123456A12

SUMMARY OF YOUR COVER

Vehicle Description	Sum Insured	Cover Type	Vehicle Usage	Sound System	Excess	Premium
EL K9 / BDMC	\$0.00	ThirdParty	Personal Usage (including driving to work and back)	\$0.00	\$0.00	\$81.00
100 / ADLY	\$0.00	ThirdParty	Personal Usage (including driving to work and back)	\$0.00	\$0.00	\$27.00

EXTENSIONS & OPTIONAL COVERS

Passenger Accident Cover	\$0.00
Excess Buy Back	\$0.00
Roadside Assitance	\$0.00
Medical Expenses	\$0.00
Excess Amount	\$0.00

PREMIUM SUMMARY

Policy Term	Annual(1 Year)
Basic Premium	\$120.00
Stamp Duty	\$5.40
ZTSC Levy	\$12.96
Radio Licence Cost	\$0.00
Discount	\$12.00
Vehicle Licence Fee(ZINARA)	\$0.00
Total Amount Due	\$126.36

Thank you.

Yours Sincerely



GENERAL MANAGER – SALES