POLICY SCHEDULE/SUMMARY OF YOUR COVER GENE-INSURE LOGO & REGISTRATION/CONTACT DETAILS



Genetic Financial Services
11 Routledge Street
Milton Park
Harere

YOUR PERSONAL DETAILS					
Policy Number:	GMCC180000106-1	Policy InceptionDate :	16/08/2018		
Policy Holder Name :	Amit Samanata	Effective Date of this			
Cell number:	222222222	Endorsement			
Alternative Contact Number		Your Renewal Date:	16/08/2019		
Email Address	amit.samanta@kindlebit.com	Your Package:	Annual		
Postal Address	00263	Physical Address	Panchkula Panchkula		
Date of Birth	16/08/2018	ID Number			
		Frequency			

SUMMARY OF YOUR COVER						
Vehicle description	Sum insured	Cover type	Vehicle usage	Sound system	Excess	Premium
MONTELIMAR / ACTM	\$10000.00	Comprehensiv e	Personal Usage (including driving to work and back)	ľ	\$0.00	\$500.00

EXTENSIONS & OPTIONAL COVERS				
Passenger Accident Cover	\$0.00			
Excess Buy Back	\$0.00			
Roadside Assitance	\$0.00			
Medical Expenses	\$0.00			

PREMIUM SUMMARY				
Policy period	Annual(1 Year)			
Basic Premium	\$585.00			
Stamp Duty	\$25.00			
Motor Levy	\$60.00			
Radio Licence Cost	\$0.00			
Discount	\$0.00			
Total Premium Due	\$585.00			