

ENDORSEMENT SCHEDULE



Genetic Financial Services

11 Routledge Street

Milton Park

Harare

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:	GMCC190002364-1	Postal Address	00263
Policy Holder Name :	Ashwani sharma	Date of Birth	06/02/2019
Cell number:	1234567898	Your Package:	Motor Package
Alternative Contact Number		Physical Address	test ddd
Email Address	Guest-3512@gmail.com	ID Number	12-123456A12

SUMMARY OF YOUR COVER

VRN	Vehicle description	Sum insured	Cover type	Vehicle usage	Policy Period	Payment Term	Premium
12345684	100 / ADLY	\$0.00	ThirdParty	Personal Usage (including driving to work and back)	18/02/2019 - 06/06/2019	\$Termly	\$34.95
12345684	100 / ADLY	\$0.00	ThirdParty	Personal Usage (including driving to work and back)	07/02/2019 - 06/06/2019	\$Termly	\$33.60

EXTENSIONS & OPTIONAL COVERS

Passenger Accident Cover	\$22.00
Excess Buy Back	\$0.00
Roadside Assistance	\$0.00
Medical Expenses	\$0.00

Excess Amount	\$0.00
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PREMIUM SUMMARY	
Policy Term	Termly(4Months)
Basic Premium	\$76.16
Stamp Duty	\$3.43
ZTSC Levy	\$7.20
Radio Licence Cost	\$0.00
Discount	\$7.61
Vehicle Licence Fee(ZINARA)	\$0.00
Total Amount Due	\$79.18

Thank you.

Yours Sincerely



GENERAL MANAGER – SALES