## POLICY SCHEDULE/SUMMARY OF YOUR COVER



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## YOUR PERSONAL DETAILS

Policy Number:	GMCC190002037-1
Policy Holder Name :	ashwanik kumar
Cell number:	123456789
Alternative Contact Number	
Email Address	Guest-3084@gmail.com

Postal Address	00263
Date of Birth	31/01/2019
Your Package:	Motor Package
Physical Address	test ddd
ID Number	12-134555A12

SUMMARY OF YOUR COVER							
VRN	Vehicle descriptio n	Sum insured	Cover type	Vehicle usage	Policy Period	Payment Term	Premium
12334444	BT49QT- 12CE3 / BAOTIAN	\$0.00	ThirdParty	Personal Usage (including driving to work and back)	01/02/2019 - 31/05/2019	\$Termly	\$44.85

EXTENSIONS & OPTIONAL COVERS			
Passenger Accident Cover	\$55.00		
Excess Buy Back	\$0.00		
Roadside Assistance	\$4.50		
Medical Expenses	\$0.00		
Excess Amount	\$0.00		

Policy Term	Termly(4Months)
Basic Premium	\$49.83
Stamp Duty	\$2.24
ZTSC Levy	\$3.60
Radio Licence Cost	\$0.00
Discount	\$4.98
Vehicle Licence Fee(ZINARA)	\$0.00
Total Amount Due	\$50.69

Thank you.

Yours Sincerely

GENERAL MANAGER – SALES