RENEWAL SCHEDULE/SUMMARY OF YOUR COVER



Genetic Financial Services
ZB Centre
4th Floor South Wing
cnr First Street & Kwame Nkrumah

Avenue 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:	GMCC200020143-1		
Renew Policy Number:	GMCC200020143-2		
Policy Holder Name :	sachin kumar		
Cell number:	1234677		
Alternative Contact Number			
Email Address	Guest-31021@gmail.com		
Transaction Date	9/15/2020		

Postal Address	00263
Date of Birth	31/08/2020
Your Package:	Motor Package
Physical Address	address1 address2
ID Number	12-123456A12

INSURED PARTY DETAILS			
Name:	Ankit Dhiman		
Email:	ankit.dhiman@kindlebit.com		
Mobile:	5241589784		
Address:	asdf Mutare		
ID Number:	14-278567U28		

			SUMMAR	RY OF YOU	R COVER			
VRN	Vehicle descripti on	Cover note	Sum insured	Cover type	Vehicle usage	Policy Period	Paymen t Term	Premiu m

S988GFF	MONTEL IMAR / ACTM		RTGS\$0. 00	ThirdPart y	Personal Usage (including driving to work and back)	15/09/20 20 - 14/01/20 21	4 Months	RTGS\$3 00.00	
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EXTENSIONS & OPTIONAL COVERS			
Passenger Accident Cover	RTGS\$ 0.00		
Excess Buy Back	RTGS\$ 0.00		
Roadside Assistance	RTGS\$ 0.00		
Medical Expenses	RTGS\$ 0.00		
Excess Amount	RTGS\$ 0.00		

	PREMIUM SUMMARY
Policy Term	RTGS\$ Annual(1 Year)
Basic Premium	RTGS\$ 270.00
Stamp Duty	RTGS\$ 15.00
ZTSC Levy	RTGS\$ 36.00
Radio Licence Cost	RTGS\$ 0.00
Discount	RTGS\$ 30.00
Vehicle Licence Fee(ZINARA)	RTGS\$ 0.00
Penalties Fee(ZINARA)	RTGS\$ 0.00
Total Amount Due	RTGS\$ 321.00
QR Image	

Thank you.

Yours Sincerely

