ENDORSEMENT SCHEDULE



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:	GMCC200015075-1
Policy Holder Name :	chandan kumar
Cell number:	1234567
Alternative Contact Number	
Email Address	Guest-22719@gmail.com

Postal Address	00263		
Date of Birth	27/07/2020		
Your Package:	Motor Package		
Physical Address	address1 address2		
ID Number	12-123456A12		

SUMMARY OF YOUR COVER							
VRN	Vehicle descriptio n	Sum insured	Cover type	Vehicle usage	Policy Period	Payment Term	Premium
Currency	250507P	LOADER / B&L	RTGS\$0.00	ThirdParty	Personal Usage (including driving to work and back)	12/08/2020 - 11/12/2020	Termly

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

PREMIUM SUMMARY

Policy Term	Termly(4Months)
Currency	RTGS\$
Basic Premium	300.00
Payable Amount	0
Stamp Duty	15.00
ZTSC Levy	36.00
Radio Licence Cost	0.00
Discount	30.00
Vehicle Licence Fee(ZINARA)	0.00
Total Amount Due	321.00

Thank you.

Yours Sincerely

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GENERAL MANAGER - SALES