

# ENDORSEMENT SCHEDULE



ZB Centre  
Fourth 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:	GMCC190002274-1	Postal Address	00263
Policy Holder Name :	ac ac	Date of Birth	05/08/2019
Cell number:	333333	Your Package:	Motor Package
Alternative Contact Number		Physical Address	rm rm
Email Address	Guest-2575@gmail.com	ID Number	333333

## SUMMARY OF YOUR COVER

VRN	Vehicle description	Sum insured	Cover type	Vehicle usage	Policy Period	Payment Term	Premium
Currency	333333	MONTELIMAR / ACTM	USD0.00	ThirdParty	Personal Usage (including driving to work and back)	07/08/2019 - 04/08/2020	Annual

## EXTENSIONS & OPTIONAL COVERS

Currency	USD
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

Annual(1 Year)

Currency	USD
Basic Premium	90.00
Stamp Duty	4.05
ZTSC Levy	10.80
Radio Licence Cost	0.00
Discount	9.00
Vehicle Licence Fee(ZINARA)	13.00
Total Amount Due	108.85

Thank you.

Yours Sincerely



GENERAL MANAGER – SALES