RENEWAL SCHEDULE/SUMMARY OF YOUR COVER



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

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/+263 732 884 884

Email us on: service@gene.co.zw

YOUR PERSONAL DETAILS

Policy Number:	GMCC200012132-1
Renew Policy Number:	GMCC200012132-2
Policy Holder Name :	ashwani k
Cell number:	123456789
Alternative Contact Number	
Email Address	Guest-18395@gmail.com

Postal Address	00263		
Date of Birth	02/06/2020		
Your Package:	Motor Package		
Physical Address	address1 addres2		
ID Number	12-123456A12		

SUMMARY OF YOUR COVER								
VRN	Vehicle descripti on	Cover note	Sum insured	Cover type	Vehicle usage	Policy Period	Paymen t Term	Premiu m
T745112 20	EL K9 / BDMC		RTGS\$0. 00	ThirdPart y	Personal Usage (including driving to work and back)	02/06/20 20 - 01/10/20 20	4 Months	RTGS\$3 00.00

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 **Total Amount Due** RTGS\$ 321.00 QR Image

Thank you.

Yours Sincerely

GENERAL MANAGER - SALES