POLICY SCHEDULE/SUMMARY OF YOUR COVER



Genetic Financial Services 11 Routledge Street Milton Park

GENEINSURE CONTACT

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/+263 732 884 884

Harere

Email us on: service@gene.co.zw

YOUR PERSONAL DETAILS

Policy Number:	GMCC180000373-1
Policy Holder Name :	Deepak Sharma
Cell number:	9814256279
Alternative Contact Number	
Email Address	deepak.s@kindlebit.com

Postal Address	00263
Date of Birth	14/09/2018
Your Package:	Annual
Physical Address	fdsfs fddsf
ID Number	14-278567U28

SUMMARY OF YOUR COVER						
Vehicle Description	Sum Insured	Cover Type	Vehicle Usage	Sound System	Excess	Premium
LEXUS / TOYOTA	\$	ThirdParty	Commercial Vehicle - Own Business	\$0.00	\$0.00	\$166.50

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

PREMIUM SUMMARY		
Policy Term	Annual(1 Year)	
Basic Premium	\$185.00	
Stamp Duty	\$9.25	

ZTSC Levy	\$18.00
Radio Licence Cost	\$0.00
Discount	\$18.50
Vehicle Licence Fee(ZINARA)	\$0.00
Total Amount Due	\$193.75

Thank you.

Yours Sincerely

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GENERAL MANAGER – SALES