RENEWAL SCHEDULE/SUMMARY OF YOUR COVER



Genetic Financial Services 11 Routledge Street Milton Park

Harare GENEINSURE CONTACT

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YOUR PERSONAL DETAILS

Policy Number:	GMCC190002025-1
Renew Policy Number:	GMCC190002025-2
Policy Holder Name :	ashwani kumar
Cell number:	123456789
Alternative Contact Number	
Email Address	Guest-3070@gmail.com

Postal Address	00263		
Date of Birth	09/01/2019		
Your Package:	Motor Package		
Physical Address	test ddd		
ID Number	12-123456A12		

SUMMARY OF YOUR COVER							
VRN	Vehicle descriptio n	Sum insured	Cover type	Vehicle usage	Policy Period	Payment Term	Premium
AAD333	BEAUMO NT SPORTS DELUX / ACADIAN	\$0.00	ThirdParty	Personal Usage (including driving to work and back)	\$0.00	4 Months	\$27.00

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

Policy Term Annual(1 Year) Basic Premium \$27.00 Stamp Duty \$1.35 ZTSC Levy \$3.24 Radio Licence Cost \$0.00 Discount \$3.00 Vehicle Licence Fee(ZINARA) \$0.00

\$31.59

Thank you.

Yours Sincerely

Total Amount Due

GENERAL MANAGER – SALES