

ENDORSEMENT SCHEDULE



Genetic Financial Services

11 Routledge Street

Milton Park

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:	GMCC190002144-1	Postal Address	00263
Policy Holder Name :	ashwani k	Date of Birth	30/05/2019
Cell number:	123456789	Your Package:	Motor Package
Alternative Contact Number		Physical Address	test address test address2
Email Address	Guest-2324@gmail.com	ID Number	12-123456A12

SUMMARY OF YOUR COVER

VRN	Vehicle description	Sum insured	Cover type	Vehicle usage	Policy Period	Payment Term	Premium
Currency	A7845Gjjj	J5 / BEDFORD	USD3501.00	ThirdParty	Personal Usage (including driving to work and back)	20/06/2019 - 17/10/2019	Termly

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		Termly(4Months)	
Currency		USD	
Basic Premium		30.00	
Stamp Duty		2.00	
ZTSC Levy		3.60	
Radio Licence Cost		0.00	
Discount		3.00	
Vehicle Licence Fee(ZINARA)		0.00	
Total Amount Due		32.60	

Thank you.

Yours Sincerely



GENERAL MANAGER – SALES