

ENDORSEMENT SCHEDULE



Genetic Financial Services

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Harare

GENEINSURE CONTACT

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YOUR PERSONAL DETAILS

Policy Number:	GMCC190002963-1	Postal Address	00263
Policy Holder Name :	ashwani kumar	Date of Birth	07/03/2019
Cell number:	123456789	Your Package:	Motor Package
Alternative Contact Number		Physical Address	test ddd
Email Address	Guest-4261@gmail.com	ID Number	12-123456A12

SUMMARY OF YOUR COVER

VRN	Vehicle description	Sum insured	Cover type	Vehicle usage	Policy Period	Payment Term	Premium
A145555	BT49QT-12CE3 / BAOTIAN	\$1000.00	Comprehensive	Personal Usage (including driving to work and back)	20/03/2019 - 19/08/2019	\$Termly_5 Months	\$83.22
B45222	MONTELIMAR / ACTM	\$0.00	ThirdParty	Personal Usage (including driving to work and back)	20/03/2019 - 19/03/2020	\$Annual	\$104.85

EXTENSIONS & OPTIONAL COVERS

Passenger Accident Cover	\$22.00
Excess Buy Back	\$0.00
Roadside Assistance	\$4.50
Medical Expenses	\$0.00

Excess Amount	\$0.00
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PREMIUM SUMMARY	
Policy Term	Termly_5(5Months)
Basic Premium	\$208.97
Stamp Duty	\$9.40
ZTSC Levy	\$12.96
Radio Licence Cost	\$0.00
Discount	\$20.90
Vehicle Licence Fee(ZINARA)	\$0.00
Total Amount Due	\$210.43

Thank you.

Yours Sincerely



GENERAL MANAGER – SALES