
Date : 21-Sep-2021

Covering Details :

Description of Risk :

File No.:

Expiry Date :

| Cover Details | | Sum Insured | Premium | VAT Amount | Total Premium |
|---------------|-------------------|---------------------|-----------------|-----------------|---------------|
| Cover Details | | Monthly Salary | Annual Salary | | Total Premium |
| Cover Details | | Sum Insured | | Premium | |
| Cover Details | Death Sum Assured | Medical Sum Assured | TPD Sum Assured | TTD Sum Assured | Total Premium |

TOTAL :

VAT Premium :

Total Premium :

TOTAL :

TOTAL :

VAT Premium :

Other Fee :

Policy Holders Fund :

Training/Insurance Levy :

Stamp Duty :

Total Premium :