



		I	NTERIM	COVER N	OTE			
RISK NOTE NO: 1			237	7				
	Ţ				Cover Note No		MLCLG0003762	
Insured Name	keval				Policy No			
Insurance Type	vehicle				Debit No		0	
Account	M/S keval				File No		0	
	asd				Tax Invoice No		MFRI36290	
Address						Insurer Name GA Insurance Tanzania Limited		
Cover Period From	30-Se	p-2021 To 2	9-Sep-2022		•			
DETAILS OF COVERAGE				DESCRIPTION OF RISK				
Items Covered		Contract Value			Sum Insured (in TZS)		Premium (in TZS)	
vehicle		0.00			1000000		100000	
Total			0.00		1000000		100000	
VAT Premium							118000	
Total Premium							0	
Scan QR code to Validate		× Al			ulika Date o ama kikisha 30-Sep-202		ISSUED BY, VIRAL THAKER	
					1		Authorized Signatory	



Mayfair Insurance Company Tanzania Ltd. 2nd Floor | TAN-RE house | Longido Street | Upanga, Dar Es Salaam | Tanzania. P.O.Box 38353. Phone No.: +255 22 2922337/338

P.O.BOX 30333. Phone No.: +233 22 2722337/330

P.O. Box 871, Mtendeni Street, Dar es salaam, Tanzania, City: DarEsSalaam Tel: 255 22 2126484 | 2138837 | 211 0918 | Fax: 2112504 | Email: info@milmar.co.tz