POLICY SCHEDULE/SUMMARY OF YOUR COVER



Genetic Financial Services ZB Centre 4th Floor South Wing cnr First Street & Kwame Nkrumah 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: info@gene.co.zw

YOUR PERSONAL DETAILS

Policy Number GMCC210030433-1
Policy Holder Name chandan kumar
Cell number 123456789

Alternative Contact Number

Email Address Guest-49267@gmail.com

Transaction Date 2/24/2021

Postal Address 00263

Date of Birth 04/02/2021

Your Package: Motor Package

Physical Address address2

ID Number 12345678

GENE-INSURE

Cover Note #

Transaction Date 2/24/2021

CERTIFICATE OF MOTOR INSURANCE

Insurance Type Road Traffic Act

Vehicle Type ThirdParty Personal Usage (including driving to work and back)

 Start Date
 24/02/2021

 End Date
 24/06/2021

 Policy Period
 4 Months

Premium
Gvt Levy
Stamp Duty

Premium Due 0

VEHICLE DETAILS

Vehicle Reg. Number TRP63631
Vehicle Type Private Car

Tax Class
Sum Insured
Vehicle:

EXTENSIONS & OPTIONAL COVERS

Passenger Accident CoverRTGS\$ 0.00Excess Buy BackRTGS\$ 0.00Roadside AssistanceRTGS\$ 0.00Medical ExpensesRTGS\$ 0.00Excess AmountRTGS\$ 0.00

PREMIUM SUMMARY

Basic Premium RTGS\$0 Stamp Duty RTGS\$ ZTSC Levy RTGS\$ Radio Licence Cost RTGS\$ Discount RTGS\$ 0 RTGS\$ 8100.00 Vehicle Licence Fee(ZINARA) Penalties Fee(ZINARA) RTGS\$ 0.00 RTGS\$ 8100.00 **Total Amount Due**