### 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 GMCC210030436-1

Policy Holder Name I=[ H34555
Cell number 123456789

Alternative Contact Number

Email Address Guest-49273@gmail.com

Transaction Date 2/24/2021

Postal Address 00263

Date of Birth 09/02/2021

Your Package: Motor Package

Physical Address add add2

ID Number 123444

#### **GENE-INSURE**

Cover Note #

Transaction Date 2/24/2021

### CERTIFICATE OF MOTOR INSURANCE

Insurance Type Road Traffic Act
Vehicle Type ThirdParty
Start Date 24/02/2021
End Date 24/08/2021
Policy Period 6 Months

Premium
Gvt Levy
Stamp Duty

Premium Due 0

## VEHICLE DETAILS

Vehicle Reg. Number D45667

Vehicle Type Commercial - Special Vehicles

Tax Class
Sum Insured
Vehicle:

# **EXTENSIONS & OPTIONAL COVERS**

Passenger Accident CoverRTG\$\$ 0.00Excess Buy BackRTG\$\$ 0.00Roadside AssistanceRTG\$\$ 0.00Medical ExpensesRTG\$\$ 0.00Excess AmountRTG\$\$ 0.00

#### **PREMIUM SUMMARY**

Basic Premium RTGS\$0 Stamp Duty RTGS\$ ZTSC Levy RTGS\$ Radio Licence Cost RTGS\$ Discount RTGS\$ 0 RTGS\$ 200.00 Vehicle Licence Fee(ZINARA) Penalties Fee(ZINARA) RTGS\$ 0.00 RTGS\$ 200.00 **Total Amount Due**