

ENDORSEMENT SCHEDULE



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

YOUR PERSONAL DETAILS

Policy Number:	GMCC200025098-1	Postal Address	00263
Policy Holder Name :	ashwan2 kumar2	Date of Birth	05/11/2020
Cell number:	123456789	Your Package:	Motor Package
Alternative Contact Number		Physical Address	address1 address2
Email Address	Guest-39069@gmail.com	ID Number	1234567

SUMMARY OF YOUR COVER

VRN	Vehicle description	Sum insured	Cover type	Vehicle usage	Policy Period	Payment Term	Premium
Currency	D767889	MONTELIMAR / ACTM	RTGS\$0.00	ThirdParty	Personal Usage (including driving to work and back)	03/12/2020 - 02/05/2021	Termly_5 Months

EXTENSIONS & OPTIONAL COVERS

Currency	RTGS\$
Passenger Accident Cover	0.00
Excess Buy Back	0.00
Roadside Assistance	0.00
Medical Expenses	0.00
Excess Amount	0.00

PREMIUM SUMMARY

Policy Term

Termly_5(5Months)

Currency	RTGS\$
Basic Premium	3008.47
Payable Amount	0
Stamp Duty	150.42
ZTSC Levy	361.02
Radio Licence Cost	0.00
Discount	300.85
Vehicle Licence Fee(ZINARA)	0.00
Total Amount Due	3219.06

Thank you.

Yours Sincerely



GENERAL MANAGER – SALES