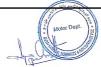




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SCHEDULE / CERTIFICATION CIVIL LIABILITY	ΓΕ					الجدول / شهادة التأمين المسؤولية المدنية	
رقم الوثيقة.Policy No		رقم الوثيقة.RTA No		Policy Pe	مدة التأمينPolicy Period		
09/601/66S/2025/34336		2566S343 <b>3</b> 6			23/04/25 1	16:00 to 22/05/26 23:59	
INSURED DETAILa. بيانات المؤمن لم							
Name of Insured	red Alamgir Hos		ain Alal Uddin			اسم المؤمن له	
Address Dubai, 0000						الغنوان	
Owner TCN 15876517						الرمز المروري للمالك	
E-Mail motor15@ns		o.ae				البريد الالكتروني	
Phone No 0508463424		5400				رقم هوية المؤمن <mark>له</mark>	
Identification No	78419914468	86480				رقم الهاتف	
VEHICLE DETAILS بيانات المركبة							
Chassis No		ine No			tration Type	3 1 7	
رقم الهيكل / الشاصي		رقم الم	قم اللوحة		صفة التسج	قوة المحرك	
KNAFC526555390326	G4CG4	H303086	H 52638	<b>/</b>	RIVATE		
Vehicle classification فئة المركبة	,	Manufacture بلد صنع ا	Body Typ کل الهیکل		acturing Yea سنة الصن	r No of Passenger + Driver دد الرکاب + السائق	
Light Vehicle			SEDAN		2005	4+1	
Purpose of use	Tonnag	e / Weight	Make & Model & Color				
صفة الاستعمال		الحمولة / الحمولة /		نوع المركبة ولونها			
PRIVATE						COPOLLA White	
Vehicle's Insured value Total Agreed Premium  AED 1.00 /- AED 638.00 /- + VAT ( 31.			) = AED 669.90 /-			ة المركبة قيمة ه المتفق التأمين قسط إجمال	
Geographical Coverage Area	D Emirates Only				ة التغطية حدود		
Third Party Property Damage Limi	,000 /-				تصيب الأشياء والممتلكات - درهم حدود تغطية الأضرار التي		
CONDITIONS/RIDERS بيانات المؤمن له Personal Accident Driver ROADSIDE ASSISTANCE SILVER COVER (LIMITED TO 3 SERVICES PER YEAR - WITHIN CITY LIMIT)							
Dubai National Insurance declares that the Motor Vo Schedule is insured with it this Policy.	ردة ا	قر شركة دبي الوطنية للتأمين وإعادة التأمين بأن المركبة الواردة بياناتها في هذا الجدول مؤمنة لديها وفقا لأحكام هذه الوثيقة					
I read all the terms, condi and have agreed to it.REF FULL COVERAGE & EXCLU Regulation of Unifying Mo according to Insurance Au Decision No. (25) of 2016	جعة R ا e	طلعت على كافة شروط واستثناءات وثيقة التأمين الرجاء مراجعة بنود واحكام التغطية والإستثناءات الواردة في بيانات الوثيقة الصادرة بموجب نظام توحيد وثائق التأمين على المركبات سندا" لقرار مجلس إدارة هيئة التأمين رقم (25 (لسنة بتاريخ ش.م.ع 2016 22.09.2016 و وافقت عليها Ver1.3End0					
Issued by & Issue date	BN5085 23/04/25 16:00				ر وتاریخ مرکز		
Signature & Company Sta Name & Signature of Insu				نوقیع	التوقيع والختم عن الش <i>ر</i> كة اسم وتوقيع (١ <u>اللـؤ¥@\</u> له		



دبي الوطنية للتأمين وإعادة التأمين ش.م.ع .Dubai National Insurance & Reinsurance P.S.C.

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megistered in the Insurance Companies Register Under Federal Law No. (6) of 2007 (As Amended), Certificate No. 64 Dated 6th January 1992





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## **Policy Specific Conditions**

MT0033 - Personal Accident Driver

It is hereby understood and agreed that in consideration of the payment of an additional premium the company undertakes to pay compensation on the scale provided hereunder for death or bodily injury as hereinafter defined sustained by The Insured And/Or any licensed driver in direct connection with any motor car described in the schedule hereto whilst mounting into or dismounting from or traveling in the insured car caused by violent accidental external and visible means, which independently of any other cause (excepting medical or surgical treatment consequent upon such injury ) shall within three calendar months of the occurrence of such injury result in :

## No. Description

Scale compensation

Death or permanent total disablement

Dh.200,000 /-

2. Total and incurable loss of all vision in both eyes

Dh.200,000 /-

3. Total loss by physical severance at or above the wrist or ankle of both hands or both feet or of one together with one foot

Dh.200,000 /-

Total loss by physical severance at or above the wrist or ankle of one

Dh.200,000 /-

4. hand or one foot together with the total and incurable loss of one eye vision

Db 100 000 /

Total and incurable loss of one eye vision

Dh.100,000 /-

6. Total loss by physical severance at or above the wrist or ankle of one hand or one foot

Dh.100,000 /-

7. Permanent partial disability not mentioned in the table hereinabove: The value of compensation will be specified for the person on the basis of percentage for the permanent partial disability approved by medical board multiplied by insurance amount

Dh.200,000 /-

## **Conditions:**

- a) Compensation shall be payable under one item only of item (1) to (6) for item (7) separately in addition to items (5) or (6) above in respect of each person arising out of one occurrence and the total liability of the company shall not in the aggregate exceeding the sum of Dhs. 200,000/during any one period of insurance.
- b) the legal representative for the dead person And/Or the injured person undertake to provide the company with the death certificate or final disability report issued by governmental hospital in addition to the required traffic penal documents.
- c) No compensation shall be payable in respect of death or injury indirectly or directly wholly or partially arising out of or resulting form or traceable to :
- 1.Intentional self-injury or attempted suicide, physical and/or mental defect or infirmity.
- 2.An accident happening whilst such person is under the influence of intoxicating liquor or drugs.
- 3. Number of vehicle passengers at the time of the accident exceed the authorized seating of the vehicle capacity.
- d) Compensation shall be payable only with the approval of the insured and directly to the injured person or to his legal personal representative whose receipt shall be a full discharge in respect of injury to such person.
- e) Total number of passengers including the divershall not exceed the authorized seating capacity of the vehicle at the time of accident.

Subject otherwise to the same terms, conditions exceptions and limitations of the side policy.

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RESTRICTED

سجلت في سجل شركات التأمين طبقاً للقانون الاتحادي رقم(١) لسنة ٢٠٠٧ وتعديلاته، شهادة قيد رقم ٢٤ بناريخ ٦ يناير١٩٩ Registered in the Insurance Companies Register Under Federal Law No. (6) of 2007 (As Amended), Certificate No. 64 Dated 6th January 1992





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MT6841 - ROADSIDE ASSISTANCE SILVER COVER (LIMITED TO 3 SERVICES PER YEAR - WITHIN CITY LIMIT)

This policy includes road sides assistance cover and additional benefits as per the list below provided by a third party service provider "International Motoring Club" (IMC) for the Insured vehicle including the following:

- 1.Free Accidental Towing Service (Within the same Emirates)
- 2.Free Mechanical Breakdown Towing Service (Within the same Emirates)
- 3. Free Battery Boosting Service
- 4.Free Flat Tyre Fixing
- 5.Free Lock-out Service

Dubai National Insurance and Reinsurance has appointed "IMC" to provide the above services as optional for the insured. It's hereby understood and agreed that the insured will have the right to accept or reject any of these service benefits before utilizing the same under his own personal responsibility. Dubai National Insurance and Reinsurance should not be held responsible or liable for any losses, damages or any sort of inconveniences as a result of utilizing any of the IMC services

To avail these services, the insured should contact IMC directly on 600 575751

Ver 1.0



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المركات التأمين طبقاً للفاتون الاتحادي رقم(۱) لسنة ۲۰۰۷ وتعديلاته، شعادة قيد رقم ١٤ بتاريخ ٦ يتاير ١٩٩٢ Registered in the Insurance Companies Register Under Federal Law No. (6) of 2007 (As Amended), Certificate No. 64 Dated 6th January 1992



## **Proforma Invoice**

7129875 - Alamgir Hossain Alal Uddin

0508463424 Branch of issue : DUBAI / 09

> Department : Motor

Our TRN : 100013320500003

Insured TRN

:23/04/2025 16:00 Policy / Cert No. : 09/601/665/2025/34336 **Policy From Date** : 22/05/2026 23:59 Date : 2025-04-23 15:47:44.580 **Policy To Date** 

**Broker Code/Name** : BN5085/NEW SHIELD INSURANCE BROKERS LLC

**Line of Business Class** : Motor

**VEHICLE DETAILS:** 

Registration No. : G4CG4H303086 : 52638 Engine No. Vehicle Make : TOYOTA COROLLA : KNAFC526555390326

We would like to inform you that your account has been DEBITED with the following transaction(s): Description Amount in AFD Being Insurance Premium on THIRD PARTY LIABILITY, Line Of business 665. Policy No.09/601/665/2025/34336. 638.00 Tax Code: SR-OT Taxable Amount 638.00 VAT Rate 5% VAT Amount 31.90 **Total Amount** 669.90

In Words: Six Hundred and Seventy Dirham

This is not a valid tax invoice and cannot be used to claim input VAT. Decree-Law No (8) of 2017 on Value Added Tax and the related Executive Regulations will be sent to you within 14 days

Approved By

E & O.E **Authorized Signatory** 

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RESTRICTED ۱۹۹۲: بنابر ۱۹۹۲ بنابر ۱۹۹۲ لفاذون الاتحادي رقم(۱) لسنة ۲۰۰۷ ونعدیلاته، شعادة فید رقم ۱۶ بنابریخ ۱ بنابر ۱۹۹۲ Registered in the Insurance Companies Register Under Federal Law No. (6) of 2007 (As Amended), Certificate No. 64 Dated 6th January 1992