



Please note this is a system generated document. Kindly scan the QR code above to ensure accuracy of this document يرجي ملاحظة أن هذا المستند تم إنشاؤه بواسطة النظام يرجي مسح رمز الإستجابة أعلاه للتأكد من دقة هذا المستند

SCHEDULE / CERTIFIC	CATE					الجدول / شهادة التأمين المسؤولية المدنية		
رقم الوثيقة.Policy No	رقم الوثيقة.Policy No				مدة التأمينPolicy Period			
09/601/66S/2025/3470	4	2566S34704			28/04/25 2	28/04/25 20:25 to 27/05/26 23:59		
ات المؤمن لهINSURED DETAIL	بيان				·			
Name of Insured	MOHSIN IBRA	AR IBRAR HUSSAIN				سم المؤمن له		
Address	Dubai, 0000					عنوان		
Owner TCN	16365270					لرمز المروري للمالك		
E-Mail	motor15@ns	ib.ae				يريد الالكتروني		
Phone No	none No 0508463424					قم هوية المؤمن له		
Identification No	7841987565	26194				قم الهاتف		
كبة VEHICLE DETAILS	بيانات المر							
Chassis No	End	ine No	Plate No	Registr	ation Type	ion Type Engine Capacity		
رقم الهيكل / الشاصي		رقم الم	رقم اللوحة		قوة المحرك صفة التسج			
JHMCM56507C409334		2909333	N 44061		IVATE			
,						N 65		
Vehicle classification		Manufacture	Body Type		cturing Year			
فئة المركبة	مركبة	بلد صنع ال	شكل الهيكل	منع	سنة الص	دد الركاب + السائق		
Light Vehicle			SÉDAN	2	2007	4+ 1		
Purpose of use صفة الاستعمال		e / Weight الحمولة		Make & Model & Color نوع المركبة ولونها				
PRIVATE			HONDA ACCORD ACCORD Gray					
Vehicle`s Insured value	AED 1.00	/-				المركبة قيمة		
Total Agreed Premium	, 00 /- + VAT (31.50)	= AED 661.50		المركبه فيمه المتفق التأمين قسط إجمال				
Geographical Coverage Area	Emirates Only				التغطية حدود			
Third Party Property Damage	,000 /-				صيب الأشياء والممتلكات - درهم حدود فطية الأضرار التي			
Personal Accident Drive CITY LIMIT)	er ROADSIDE	ASSISTANCE SIL'		(LIMITED ⁻	TO 3 SERVIC	ES PER YEAR - WITHIN		
Dubai National Insurance & Reinsurance P.S.C declares that the Motor Vehicle detailed above Schedule is insured with it according to the prothis Policy.			ة التأمين بأن المركبة الواردة وفقا لأحكام هذه الوثيقة 6 of			بر شركة دبي الوطنية للتأمين وإ. ياناتها في هذا الجدول مؤمنة لدي		
I read all the terms, con and have agreed to it.F FULL COVERAGE & EXC Regulation of Unifying according to Insurance Decision No. (25) of 20	EFER TO POLIC EUSIONS issue Motor Vehicle I Authority Boar	CY WORDINGS FC ed pursuant to the nsurance Policies ed of Directors'	راجعة RC ندا" ندا"					
Issued by & Issue date	BN5085 28/04/25 20:25			ر وتاریخ مرکز				



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

P.O. Box: 1806 Dubai, UAE, T: 04 596 9666, F: 04 295 6711, E: info@dni.ae, W: www.dni.ae







Please note this is a system generated document. Kindly scan the QR code above to ensure accuracy of this document برجي ملاحظة أن هذا المستند تم إنشاؤه بواسطة النظام برجي مسح رمز الإستجابة أعلاه للتأكد من دقة هذا المستند

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	01
1.	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 /-	
4.	Total loss by physical severance at or above the wrist or ankle of one hand or one foot together with the total and incurable loss of one eye vision	Dh.200,000 /-	
5.	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 Ver 1.0 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 Motor Dept.

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

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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 benefits.

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

Ver 1.0



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Proforma Invoice

To:

7133077 - MOHSIN IBRAR IBRAR HUSSAIN

0508463424 **Branch of issue** : DUBAI / 09

Department: Motor

Our TRN : 100013320500003

Insured TRN :

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

Line of Business Class : Motor

VEHICLE DETAILS:

Registration No. : 44061 **Engine No.** : K24A82909333

Vehicle Make : HONDA ACCORD Chassis No. : JHMCM56507C409334

We would like to inform you that your account has been DEBITED with the following transaction(s):

Description
Amount in AED

Being Insurance Premium on THIRD PARTY LIABILITY, Line Of business 66S.
Policy No.09/601/66S/2025/34704.
630.00

Tax Code: SR-OT

Taxable Amount
630.00

VAT Rate
5%

VAT Amount
31.50

In Words: Six Hundred and Sixty Two 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

Total Amount

Motor Dept.

661.50

E & O.E Authorized Signatory

