

TAX INVOICE

ADAMJEE INSURANCE COMPANY LIMITED		TAX INVOICE NO: 10135835	NAME OF INSURED : MOHAMMAD AHMAD OUDEH ALMAKHAMREH
ADDRESS : Dubai Branch,Unit No. 301,302, 3rd Floor, One Business Bay Building P.O. Box 4256 Dubai - United Arab Emirates			P.O.BOX :
VAT REGISTRATION NO :100000253300003			AGENT/BROKER : AB00000273
			AGENT VAT REG NO : 273
REFERENCE NO : 2510119764		CUSTOMER : MOHAMMAD AHMAD OUDEH ALMAKHAMREH	
POLICY NO : P-2510-10-1011-119764		CUST VAT REG NO :	
ENDORSMENT NO :		SUM INSURED : AED 35,022.00	
POLICY TYPE : Loss, Damage and Third Party Liability		TOTAL PREMIUM : AED 2,100.00	
CERTIFICATE NO :			
DATE OF ISSUE : 31/10/2025 14:46			

PERIOD OF INSURANCE : FROM 31/10/2025 00:00 TO 29/11/2026 23:59 Hrs

Specification of Insured Vehicle(s)

رقم التسجيل Registration No	رقم الشاسية Chassis No	رقم المحرك Engine No	قوة المحرك بالاحصنة Horse Power	لون السيارة Colour of Vehicle	الوزن بالطن Tonnage
Dubai	2T3N1RFV7NW2806 26	NILL	0	RED	
شكل الهيكل Vehicle Body Type	الغرض من الترخيص Use of Vehicle	النوع والطراز Make & Model	سنة الصنع Year of Manufacture	عدد الركاب بما فيهم السائق Seating Capacity	لون اللوحة Plate Colour
SUV	PRIVATE	TOYOTA RAV 4	2022	5	

Premium Details (Including Commission & all allowance):

Description	Amount (in AED)
Comprehensive Cover(Unit Price)	2,000.00
Quantity	1
Premium Excluding VAT Amount :	2,000.000
VAT@5%	100.000
Net Premium : Premium Including VAT Amount :	2,100.000
THE SUM OF AED - TWO THOUSAND ONE HUNDRED ONLY	



For and behalf of Adamjee Insurance Company Limited

Authorized Insurer