

## TAX INVOICE

<b>ADAMJEE INSURANCE COMPANY LIMITED</b>	<b>TAX INVOICE NO:10022923</b>	NAME OF INSURED : HALED KHADER SUBHI P.O.BOX : 41560 AGENT/BROKER : AB00000273 AGENT VAT REG NO: 273
ADDRESS : Dubai Branch, Unit No. 301,302, 3rd Floor, One Business Bay Building   P.O. Box 4256 Dubai - United Arab Emirates		
<b>VAT REGISTRATION NO :10000253300003</b>		
REFERENCE NO : 2610020040 POLICY NO : P-2602-10-1011-020040 ENDORSMENT NO : POLICY TYPE : Loss, Damage and Third Party Liability CERTIFICATE NO : DATE OF ISSUE : 23/02/2026 12:23		CUSTOMER : HALED KHADER SUBHI CUST VAT REG NO : SUM INSURED : AED 47,172.00 TOTAL PREMIUM : AED 1,890.00

PERIOD OF INSURANCE : FROM 28/02/2026 00:00 TO 27/03/2027 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
Sharjah	JTDWF9EV3GD085 548	F177956	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	2016	5	

Premium Details (Including Commission & all allowance):

Description	Amount ( in AED)
Third Party Property Damage Cover	1,200.00
Own Damage Cover	800.00
POLICY HOLDER DISCOUNT-D-P	(200.00)
<b>Premium Excluding VAT Amount :</b>	<b>1,800.00</b>
VAT@5%	90.00
<b>Net Premium : Premium Including VAT Amount :</b>	<b>1,890.00</b>
THE SUM OF AED - ONE THOUSAND EIGHT HUNDRED AND NINETY ONLY	



For and behalf of Adamjee Insurance Company Limited

Authorized Insurer