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SCHEDULE / CERTIFIC	CATE						الجدول / شهادة التأمين المسؤولية المدنية
رقم الوثيقة.Policy No		رقم الوثيقة.RTA No				Policy Per	مدة التأمينiod
09/601/66S/2025/34698		2566S346 <b>9</b> 8				28/04/25 1	9:50 to 27/05/26 23:59
ات المؤمن لهINSURED DETAIL	بيان	· · · · · · · · · · · · · · · · · · ·					
Name of Insured	RIDE FOUR L	IFE GARAGE					اسم المؤمن له
Address	Dubai, 0000						العنوان
Owner TCN 50340969							الرمز المروري للمالك
E-Mail motor15@nsi							البريد الالكتروني
Phone No 0508463424							رقم هوية المؤمن <mark> ل</mark> ه
Identification No 916452							رقم الهاتف
كبة VEHICLE DETAILS	بيانات المر						
Chassis No	Eng	ine No		Plate No	Registration Type		Engine Capacity
رقم الهيكل / الشاصي	حرك	رقم الم		رقم اللوحة	ىجىل	ُصفة التس	قوة المحرك
JHMFD16387S404568	R18A1	.2021783		1 24533	PR	IVATE	
Vehicle classification	Country of	Manufacture	2	Body Type	Manufac	turing Year	No of Passenger + Driver
فئة المركبة	•	بلد صنع ال	_	شكل الهيكل شكل الهيكل		سنة الم	دد الركاب + السائق
Light Vehicle		- (		SEDAN	_	2007	4+1
	Toppog	o / Woight					
Purpose of use صفة الاستعمال			/ Weight Make & Model & Color				
	الورن	نوع المركبة ولونها الحمولة / الوزن					W # 0 01
PRIVATE					HOI	NDA CIVIC C	IVIC Black
Vehicle`s Insured value Total Agreed Premium	AED 1.00		7 50 \	- AED 787 50	<b>)</b> /-		ة المركبة قيمة ه المتفق التأمين قسط إجمال
_		00 /- + VAT ( 37.50 ) = AED 787.50 /- D Emirates Only			7 /-		ة المنفق النامين فسط إجمال ة التغطية حدود
		•					ه التعطية حدود تصيب الأشياء والممتلكات - درهم حدود
Third Party Property Damage	0,000 /-				تغطية الأضرار التي		
CONDITIONS/RIDERS	انات المؤمن له	بيا					
Personal Accident Driver Personal Accident Passengers (Individuals working for the Insured) ROADSIDE ASSISTANCE SILVER COVER (LIMITED TO 3 SERVICES PER YEAR - WITHIN CITY LIMIT)							
Dubai National Insurance & Reinsurance P.S.C company declares that the Motor Vehicle detailed above in this Schedule is insured with it according to the provisions of this Policy.							
I read all the terms, conditions and exclusions of the po and have agreed to it.REFER TO POLICY WORDINGS FOI FULL COVERAGE & EXCLUSIONS issued pursuant to the Regulation of Unifying Motor Vehicle Insurance Policies according to Insurance Authority Board of Directors' Decision No. (25) of 2016 dated 22.09.2016			راجعة ندا"	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 28/04/25 19:50				ر وتاریخ مرکز		
Signature & Company S Name & Signature of In					وتوقيع	التوقيع والختم عن الشركة اسم و المؤمن له Ver 1.0	



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







on

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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 of compensation
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 injury to such person.
- e) Total number of passengers including the driver shall 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.

Ver 1.0

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MT0044 - Personal Accident Passengers (Individuals working for the Insured) 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 Individuals working for the Insured who under his sponsorship 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 of compensation
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	
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	Db 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, They also undertake to provide the company with the legal documents proving that they are working for the insured at the time of the accident.
- 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 driver shall not exceed the authorized seating of capacity of the vehicle at the time of the accident. 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



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





## **Proforma Invoice**

To:

7133041 - RIDE FOUR LIFE GARAGE

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.** : 24533 **Engine No.** : R18A12021783

Vehicle Make : HONDA CIVIC Chassis No. : JHMFD16387S404568

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.<br/>Policy No.09/601/66S/2025/34698.
750.00

Tax Code: SR-OT

Taxable Amount
750.00

VAT Rate
5%

VAT Amount
37.50

In Words: Seven Hundred and Eighty Eight 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.

787.50

E & O.E Authorized Signatory

