

## TAX INVOICE

## From:

Emirates Insurance Company (PSC)  
P.O.Box : 3856, Abu Dhabi  
United Arab Emirates  
**TRN Number** 100000473700003  
**Tel No.** 00971 – 26440400  
**Email** [info@eminsco.com](mailto:info@eminsco.com)

**Invoice Number** BRT300/25807189  
**Product** Third Party Liability  
**Date** 01/05/2025 13:50:33  
**Policy No.** 300/4101/44/25/004915  
**End'mnt No.** Not Applicable  
**Branch** Dubai

## Details

## To:

OMAR TRANSPORT L L C  
242972  
UNITED ARAB EMIRATES  
**TRN Number** 104032294100003  
**Insured** OMAR TRANSPORT L L C  
**Risk Insured** KIA BONGO 2010 | Chassis KNFSTZ74AAK470194 | Reg No /

**A/C Number** 14000218  
**Broker** NEW SHIELD INSURANCE BROKERS  
**Policy From** 01/05/2025 13:40:26  
**Policy To** 31/05/2026 23:59:59

Ref	Description	Amount (AED)
1	Being Policy Premium under Third Party Liability Policy for Policy No. 300/4101/44/25/004915 .	AED 1,000.00
2	VAT 5% on Premium	AED 50.00
3	TOTAL	AED 1,050.00

## Receipt Confirmation

We gratefully acknowledge receipt of **AED 1,050.00** as full and final settlement against the Invoice No. **BRT300/25807189**.  
Kindly treat this as an official receipt for your records.

Payment Mode	Payment Ref No.	Payment Date	Amount	Bank Name
Payment Link	044301	01/05/2025	AED 1,050.00	

E.&amp;O.E

Authorized Signatory



Approved by : Iman NSIB | Approved at : Dubai | Approved on : 01/05/2025 13:50:33 | Printed on : 01/05/2025 13:50:33