

## TAX INVOICE

|                                                                                                                                   |  |                                                    |                                                           |
|-----------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------|-----------------------------------------------------------|
| <b>ADAMJEE INSURANCE COMPANY LIMITED</b>                                                                                          |  | <b>TAX INVOICE NO:</b> 10081818                    | <b>NAME OF INSURED :</b> BISWAJIT RAKSHIT SUKUMAR RAKSHIT |
| <b>ADDRESS :</b> Dubai Branch,Unit No. 301,302, 3rd Floor, One Business Bay Building   P.O. Box 4256 Dubai - United Arab Emirates |  |                                                    | <b>P.O.BOX :</b> 00                                       |
| <b>VAT REGISTRATION NO :</b> 100000253300003                                                                                      |  |                                                    | <b>AGENT/BROKER :</b> AB00000033                          |
|                                                                                                                                   |  |                                                    | <b>AGENT VAT REG NO:</b>                                  |
| <b>REFERENCE NO :</b> 2510071826                                                                                                  |  | <b>CUSTOMER :</b> BISWAJIT RAKSHIT SUKUMAR RAKSHIT |                                                           |
| <b>POLICY NO :</b> P-2507-10-1011-071826                                                                                          |  | <b>CUST VAT REG NO :</b>                           |                                                           |
| <b>ENDORSMENT NO :</b>                                                                                                            |  | <b>SUM INSURED :</b> AED 47,000.00                 |                                                           |
| <b>POLICY TYPE :</b> Loss, Damage and Third Party Liability                                                                       |  | <b>TOTAL PREMIUM :</b> AED 2,100.00                |                                                           |
| <b>CERTIFICATE NO :</b>                                                                                                           |  |                                                    |                                                           |
| <b>DATE OF ISSUE :</b> 16/07/2025 15:48                                                                                           |  |                                                    |                                                           |

PERIOD OF INSURANCE : FROM 16/07/2025 00:00 TO 15/08/2026 23:59 Hrs

### Specification of Insured Vehicle(s)

| رقم التسجيل<br>Registration No  | رقم الشاسية<br>Chassis No             | رقم المحرك<br>Engine No       | قوة المحرك<br>بالاحصنة<br>Horse Power | لون السيارة<br>Colour of Vehicle                  | الوزن بالطن<br>Tonnage     |
|---------------------------------|---------------------------------------|-------------------------------|---------------------------------------|---------------------------------------------------|----------------------------|
| Dubai                           | WDC0G4KB6JV0667<br>94                 |                               | 0                                     | WHITE                                             |                            |
| شكل الهيكل<br>Vehicle Body Type | الغرض من<br>الترخيص<br>Use of Vehicle | النوع والطراز<br>Make & Model | سنة الصنع<br>Year of<br>Manufacture   | عدد الركاب بما فيهم<br>السائق<br>Seating Capacity | لون اللوحة<br>Plate Colour |
| SUV                             | PRIVATE                               | MERCEDES BENZ<br>G-CLASS      | 2018                                  | 5                                                 |                            |

Premium Details (Including Commission & all allowance):

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



For and behalf of Adamjee Insurance Company Limited

Authorized Insurer