DEOWLALL SINGH
NO 74 VILLAGE CORENTYNE
BERBICE

Pd 2026/03/19
Amt Pd $10,000
Rec # 70043

R.S.I software updated 10/13

Bundle 2026/3/9
2026/03/15

c'tm client

NORTH AMERICAN FIRE AND GENERAL INSURANCE COMPANY LIMITED
30/31 REGENT & HINCKS STREETS, ROBBSTOWN, GEORGETOWN.
P.O. Box 10607 Telephone No: 226-5885-8 Fax: 226-5880

Dupd 2026/6/15

RENEWAL NOTICE

Dear Customer

We wish to remind you that your policy will become due for renewal on the date shown below. If it is your intention to renew the policy, kindly let us have your instructions along with your remittance on or before the duedate.

Policy Number	10M005833	Gross Premium	~~$6,250~~ $12,500
Insured	(see above)	Less Discount(s)	
Vehicle Number	GAH86	20.0 % NCD	~~$1,250~~ $2,500
Renewal Period	2026/03/16 to ~~2026/09/15~~ 2027/03/17	% Fleet	
Sum Insured		% Fire	
Excess		% Life	
Due Date	2026/03/16	% Staff	
Customer Number	SINDL49	Sub total	~~$5,000~~
Agent code	00006	Other benefits	
Premium Mode	~~SEMI~~-ANNUALLY	Please pay	~~$5,000~~ $10,000/-

Due dates extended and MOP amended to annual

IMPORTANT $250/$500
OUR TEMPORARY COVER NOTE when attached provides only **MINIMUM "ACT" INSURANCE** for fourteen days from the due date in the event you are unable to renew on time. The renewal premium must be paid within this period in order for you to benefit from this temporary cover. After payment, your original cover will be reinstated from the date of payment.
This Cover Note will not be effective if you obtain cover elsewhere or implies that you do not accept this offer.

Please present this notice at the time of renewal. Also advise us of any changes you would like to make to your cover, e.g. the insured, type of cover, persons to drive, etc.

The Motor Vehicle Insurance (Third Party Risks) Act
Temporary Cover Note

Policy No: 10M005833 Minimum Act Cover Only

1. Index mark, if any and registration number of vehicle GAH86
2. Name of policyholder SINGH, DEOWLALL
3. Effective date of the commencement of Insurance for the purposes ACT 2026/03/16
4. Date of expiry of Insurance 2026/03/29
5. Person or class of persons entitled to drive: As per last Certificate of Insurance issued for this policy.
6. Limitations as to use: As per last Certificate of Insurance issued for this policy

I/WE hereby certify that this policy to which the Cover Note relates is issued in accordance with the Provisions of the above mentioned ACT.

AUTHORISED SIGNATURE

NORTH AMERICAN FIRE & GENERAL INSURANCE CO. LTD. NAFICO MOTOR DIVISION

2026 03/03 HM