New System updated 2026/07/08 by

New Application - Motor Insurance

Date Paid: 2026/06/26

Amount: $50,000

Receipt #: 40672

(2) Paid 2026/07/08 Amt $67,300 Rec No: 40788 Paid in full

Policy No:	10M0006518.
Insured:	Malini Bramnarain
Vehicle No:	PAR 1422
Type of Cover:	Comprehensive
Limits of Liability:	$1,500,000 $1,500,000
Period of Cover:	2026/06/26 - 2027/06/25
Mode of Payment:	Annual.
~~Annual~~/Semi-Annual Premium:	GP $117,000 Rate 4.5% 10% NCD 105,300 +12,000 VIP 5%. ~~$117,300~~ $117,300.
Insurer:	Nafico.
Sum Insured:	$2,600,000.
Excess:	$ 130,000
Postal Address:	Lot 129 Third Street Foulis East Coast Demerara c/o Brian Seecharan
Telephone No:	623-4754
Remarks:	Premium confirm with akeeta @ Nafico.

AAD.