RS
Updated
2026/10/5
LS

ANJANIE ROHOMAN
MUSTAPHA ROHOMAN
LOT 184 FIRST STREET SUCCESS
EAST COAST DEMERARA

Pd: 2026/10/2
Rect # 53279
Rect # 45944.

Renewed 2026/12/30.

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

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	10M006132	Gross Premium	$78,750
Insured	(see above)	Less Discount(s)	
Vehicle Number	PAH1797	10.0 % NCD	$7,875
Renewal Period	2026/01/03 to 2026/07/02	10.0 % Fleet	$7,087
Sum Insured	$4,500,000	5.0 % Fire	$3,189
Excess	$225,000	% Life	
Due Date	2026/01/03	% Staff	
Customer Number	ROHAE01	Sub total	$60,599
Agent code	00006	Other benefits	$6,000
Premium Mode	SEMI-ANNUALLY	Please pay	$66,599

PLEASE BRING VEHICLE FOR INSPECTION ON RENEWAL

IMPORTANT $3m | $5m.

AR to Pay $53,279.

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: 10M006132 Minimum Act Cover Only

1. Index mark, if any and registration number of vehicle PAH1797
2. Name of policyholder ROHOMAN, ANJANIE
3. Effective date of the commencement of Insurance for the purposes ACT 2026/01/03
4. Date of expiry of Insurance 2026/01/16
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