INTERIM COVER NOTE

RISK NOTE NO : 250218608

Insured Name	**BMC TOURS $ SAFARI COMPANY LIMITED**	**TIRA Cover Note No**	12725-28388-99912
		Policy No	40//2025/10
Insurance Type	Tour Operators Liability	**Debit No**	250216393
Account	BMC TOURS $ SAFARI COMPANY LIMITED	**File No**	
Address	P.O.BOX2 TIN: 140638773,	**Tax Invoice No**	MAXL112237
Insurer Name	Maxinsure (Tanzania) Limited.	**Intermediary** Head Office	
Cover Period From	10-Oct-2025 12:22PM To 09-Oct-2026		

DETAILS OF COVERAGE	DESCRIPTION OF RISK
GENERAL AND TENANT LIABILITY	Excess 5%minimum USD500 of claim amount for each and every loss

Items Covered	Sum Insured (in TZS)	Premium (in TZS)
Standard Rate		
Standard Rate	100,000,000.00	200,000.00
Total	**100,000,000.00**	**200,000.00**
VAT Amount		**36,000.00**
Total Premium		**236,000.00**

Scan QR code to Validate

Mulika Alama Kuhakikisha

Date of Issue : 10-Oct-2025

ISSUED BY, MLIMANI AGENCY TWO

Authorized Signatory

TIN: 110-433-301,

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