

Policy Schedule of Medical Malpractice Insurance

A-SALM-1-C-16-031

16/07/2025	Policy issuance date تاريخ إصدار الوثيقة	94/22/954/2025	Policy Number رقم الوثيقة
1094923396	Insured ID رقم الهوية	ZAHRAH ESSA H BARNAWI	Insured المؤمن له
Residence: Building:8512,Flat:3061,Zip Code:24223,City:Jeddah,Region:Region,Block:0,Road:بن عمرو بن شيه			National Address of the Insured العنوان الوطني للمؤمن له
			Scope of Medical Practice مجال الممارسة الطبية
			Place of Work مكان العمل
Professions		Limit any one occurrence and aggregate (annually) حد المسؤولية لكل واقعة وفي (الإجمالي سنويا)	التخصصات
General Surgeon		100000 - 100000	جراح عام
Inception date of insurance coverage	17/07/2025	تاريخ بدء سريان التغطية التأمينية	
Expire date of insurance coverage	17/07/2026	تاريخ انتهاء سريان التغطية التأمينية	
Extended Reporting Period (if any)		(تمديد مدة التبليغ عن المطالبات (ان وجدت)	
Retroactive type		نوع الأثر الرجعي	
Retroactive Date (Compulsory / Additional)	17/07/2025	تاريخ الأثر الرجعي الإلزامي/ الإضافي	
			Deductible التحمل
SPECIAL CONDITIONS/WARRANTIES:			
<ul style="list-style-type: none"> Warranted that this insurance is subject to review of terms, premium rate and other conditions at the expiry of policy. "Salama" reserves the right to review premium contribution annually according to the claim experience. Warranted that the company's maximum liability per occurrence and/or successive incidents does not exceed Limits of Indemnity as mentioned above. Salama for Cooperative Insurance Company shall not be obliged to indemnify for any Medical Malpractice occurred within either Compulsory or Additional Retroactive Insurance unless it is unknown to the insured at the time the policy is being concluded. All other Terms, Conditions & Exclusions as per standard "Salama" Medical Malpractice policy wording. 			
Riyals Seven Hundred Twenty One and 5 Halala Only		Saudi Riyal 721.05	Premium القسط
لشركة التأمين أو من ينوب عنها For and on behalf of the Insurance Compan			
			Date التاريخ
			Company Seal ختم الشركة

