


Medical Malpractice Policy Schedule

THE INSURED:ATHAL KAMAL N FILEMBAN INSURED ID: 1085865176 ADDRESS: ▪ ▪ Mobile No: ▪ Tel: ▪ Fax No:	PERIOD OF INSURANCE ▪ 31/08/2020 To 30/08/2025 (Both Days Inclusive) ▪ Retroactive Date: 31/08/2020	Policy No: 289/2020 Branch: Telesales Code : 38309
DESCRIPTION OF MEDICAL PROFESSION AND PLACE OF WORK: ▪ طبيب أشعة تشخيصية - Diagnostic radiologist ▪		
LIMITS OF INDEMNITY: ▪ SR 100,000/- Any one occurrence and SR 100,000/- in the aggregate.		
GEOGRAPHICAL LIMITS OF THIS INSURANCE: Kingdom of Saudi Arabia		
SPECIAL CONDITIONS/WARRANTIES: ▪ 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.		
SPECIAL EXCLUSIONS: ▪ All other Terms, Conditions & Exclusions as per standard "Salama" Medical Malpractice Policy wording.		
PREMIUM CONTRIBUTION:	PREMIUM	SR 1,134/-
 Aya Mohammed Sabra 31/08/2020 Signed for the Company	VAT	170.10
	PREMIUM CONTRIBUTION	1,304.10