

NURSE STEPHEN JAMES

Achaion 11, Building ORPHGEUS, Apartment 11

8509 ΚΟΥΚΛΙΑ ΠΑΦΟΥ

**RENEWAL OF MOTOR INSURANCE POLICY**

It is hereby understood and agreed that this Policy is Renewed for the period the period specified below.

Agent:	651 - ΒΟΛΟΥ ΜΥΡΟΦΟΡΑ
Policy Number:	409829
Renewal Period:	From 24/1/2024 to 23/1/2025, both dates inclusive.

Registration Number: **PNT.256**  
Make and Model: **VOLKSWAGEN POLO**  
Vehicle Type: **HATCH BACK**  
Cubic Capacity: **999**  
Year of Manufacture: **2019**  
Cover Provided: **Comprehensive**

Passenger Capacity: **5**  
Vehicle Value: **€15.000**  
Excess: **€225**

	Debit	Credit
Premium:	433,00	
	433,00	

**Persons Authorised to Drive:**

- 1 The Policyholder
- 2 MULLER SANDRA

Provided that the person driving holds a driving licence allowing him to drive the Motor Vehicle or has held and is not disqualified from holding such a licence. The term "licence" is within the meaning of the Law.

**Limitations as to Use:**

Use only for social domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover use for hire or reward racing pacemaking reliability trial speed-testing or use for any purpose in connection with the Motor Trade or whilst towing trailer vehicle that is not registered under the relevant law.

**The following Extensions of Cover, as define in the Policy, are in force in relation to the above Insured Vehicle**

1	<b>Driving Other Cars</b>
2	<b>Extension of "Road"</b>
4	<b>Trailer (Third Party Cover)</b> Whilst towing trailer vehicle that is registered under the relevant law.
5	<b>Cover for Perils of Nature</b>
11	<b>Vehicle replacement with New</b> when stolen and not found or the damage is over 50% of its market value (valid only for vehicles of the age of one year old and less)
12	<b>Strike and Civil Commotion Cover</b>
3	<b>Windscreen Cover</b> Sum Insured: €1000
8	<b>Personal Accident for Authorized Driver</b> Sum Insured €20000

This Policy is subject at issue to the following **ENDORSEMENTS** attached to and forming part of this Policy.

It is hereby understood and agreed that, notwithstanding anything contained in the Policy to the contrary, in case of an accident where the insured vehicle was being driven, or was in the charge for the purpose of being driven by any authorized driver who is:

- (a) The holder of a Learners Driving Licence, the excess amount shall be equal to three times the amount specified in the Policy Schedule
- (b) Aged between 18 and 23 years old , the excess amount shall be equal to twice the amount specified in the Policy Schedule
- (c) Aged between 23 and 25 years old or over 70 years old, the excess applicable shall be the Excess Amount specified in the Policy Schedule increased by €100.

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**For the Company**



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ΚΥΠΡΟΣ - CYPRUS**ΠΙΣΤΟΠΟΙΗΤΙΚΟ ΑΣΦΑΛΙΣΗΣ - CERTIFICATE OF INSURANCE**

Το παρόν πιστοποιητικό εκδίδεται για τους σκοπούς του περί Μηχανοκινήτων Οχημάτων (Ασφάλιση Ευθύνης έναντι Τρίτου) Νόμου του 2000, ή οποιουδήποτε Νόμου που τον τροποποιεί ή τον αντικαθιστά

This certificate is issued for the purpose of the Motor Vehicle (Third Party Liability Insurance) Law of 2000, or any law amending or substituting the same

Agent: 651

ACX2D

- Αρ. Πιστοποιητικού / Ασφαλιστηρίου - Certificate / Policy No.** : 409829
1. **Αρ. Εγγραφής Οχήματος** : PNT.256  
Index mark and registration number of the vehicle.
2. **Όνομα προσώπου προς όφελος του οποίου εκδόθηκε το ασφαλιστήριο** : NURSE STEPHEN JAMES  
Name of policy holder.
3. **Αριθμός ταυτότητας του προσώπου προς όφελος του οποίου εκδόθηκε το Ασφαλιστήριο (policyholder) ή σε περίπτωση Εταιρείας ο αριθμός εγγραφής της** : 127806354  
Policyholder's identity card number or in the case of a company its registration number.
4. **Ημερομηνία έναρξης της ισχύος της ασφάλισης για τους σκοπούς του Νόμου** : 24/1/2024 17:19  
Effective date of the commencement of insurance for the purpose of the law.
5. **Ημερομηνία λήξης της ασφάλισης** : 23/1/2025  
Date of expiry of Insurance
6. **Πρόσωπα ή κατηγορίες προσώπων που δικαιούνται να οδηγούν\***  
Persons or classes of persons entitled to drive.\*
- 1 The Policyholder  
The policyholder may also drive any private saloon motor car vehicle (excluding - but not limited - to vans, saloon derived vans, double cabins, trucks, lorries, trailers, buses, minibuses motorcycles and special purpose vehicles) not belonging to him/or spouse or hired (under a hire purchase agreement or otherwise) to him or his employer or his partner.
- 2 MULLER SANDRA

Νοούμενου ότι το πρόσωπο που οδηγεί κατέχει άδεια οδήγησης που να του επιτρέπει να οδηγεί το Μηχανοκίνητο Όχημα ή κατείχε άδεια και δεν στερήθηκε του δικαιώματος να κατέχει ή να αποκτά τέτοιαν άδεια. Η Έννοια του όρου "άδεια οδήγησης" είναι αυτή που του προσδίδεται από το Νόμο.

Provided that the person driving holds a driving licence allowing him to drive the Motor Vehicle or has held and is not disqualified from holding such a licence. The term "licence" is within the meaning of the Law.

**7. Περιορισμοί ως προς τη Χρήση\*:****Limitations as to use. \***

Use only for social domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover use for hire or reward racing pacemaking reliability trial speed-testing or use for any purpose in connection with the Motor Trade or whilst towing trailer vehicle that is not registered under the relevant law.

\*Περιορισμοί που καθίστανται ανεφάρμοστοι δυνάμει του άρθρου 9 του Περί Μηχανοκινήτων Οχημάτων (Ασφάλιση Ευθύνης Έναντι Τρίτου) Νόμου του 2000 δεν πρέπει να συμπεριλαμβάνονται.

\*Limitations rendered inoperative by section 9 of the Motor Vehicles (Third Party Liability Insurance) Law of 2000, are not to be included under this heading.

Με το παρόν πιστοποιείται ότι το Ασφαλιστήριο στο οποίο το Πιστοποιητικό αυτό αναφέρεται, έχει εκδοθεί σύμφωνα με τις διατάξεις του περί Μηχανοκινήτων Οχημάτων (Ασφάλιση Ευθύνης έναντι Τρίτου) Νόμου του 2000, η οποιοδήποτε Νόμου που τον τροποποιεί ή τον αντικαθιστά.

It is hereby certified that the Policy to which the certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Liability Insurance) Law of 2000, or any Law amending or substituting the same

COSMOS INSURANCE COMPANY PUBLIC LTD

Examined \_\_\_\_\_



24/01/2024



Dear Mr./Mrs. **NURSE STEPHEN JAMES**,

Respecting the environment, we at **Cosmos Insurance Company Public Ltd** have decided to limit the number of documents printed and sent in hard copy form.

For this reason, by following the link **[www.cosmosinsurance.com.cy/motorbookletv4-2/](http://www.cosmosinsurance.com.cy/motorbookletv4-2/)**, you can find in electronic form the **Motor Insurance Policy Booklet** which includes Definitions, Coverage, General Exceptions, General Terms and Optional Coverage and constitutes (together with the Insurance Schedule, the Insurance Certificate, the Premium Payment Schedule and any endorsement) part of your Insurance Policy with number **MT/409829** for the insurance period from **24/01/2024** to **23/01/2025**.

In addition, you may scan the above QR code or visit the follow link **[www.cosmosinsurance.com.cy/motor-additional-info/](http://www.cosmosinsurance.com.cy/motor-additional-info/)** and have easy access to:

- ♦ The Terms and conditions of the Road Assistance and Accident Care services.
- ♦ The Personal Data Modification Form.
- ♦ The Motor Insurance Policy Booklet

Should you wish to receive any of the above in hard copy form, you may request it from any of our offices.

We would like to thank you for choosing us and we remain available for any assistance or clarification you may require.

With regards,

On behalf of Cosmos Insurance Company Public Ltd



Kyriakos Tyllis  
General Manager

COSMOS INSURANCE COMPANY PUBLIC LTD

**HEAD OFFICE**

46, Griva Digeni Avenue, 1080 Nicosia

P.O.Box 21770, 1513 Nicosia

T: +357 22 796 000 | F: +357 22 022 000



[cosmosinsurance.com.cy](http://cosmosinsurance.com.cy)



**77773001**

**GN AUTO ODYKY EXPRESS**  
ROAD SERVICE LTD

## **SCHEDULE**

Contract Number: 314793

Period of Service: From 24/01/2024 to 23/01/2025 both dates inclusive

Vehicle Registration: PNT.256

Make and Model: VOLKSWAGEN - POLO

Type: HATCH BACK

Cubic Capacity: 999

Year of Manufacture: 2019



Client Name: 321691 NURSE STEPHEN JAMES

ID Number: 127806354

Date of Birth: 12/4/1971

Occupation: RETIRED

Address: Achaion 11, Building ORPHGEUS, Appartment 11  
8509 KOUKLIA PAFOU

Home Phone:

Business Phone:

Mobile Phone: 00447588717515

Fax Number:

Signed in Nicosia on 26/01/2024

For and behalf of the Company

# **PREMIUM PAYMENT SCHEDULE**

Intermediary: 651 - ΒΟΛΟΥ ΜΥΡΟΦΟΡΑ

Policy No: MT /409829

Company: Cosmos Insurance Company Public Ltd

Policyholder/Insured:

Name: NURSE STEPHEN JAMES

Debtor Code: CLN321691

Address: Achaion 11, Building ORPHGEUS, Appartment 11

8509 KOUKLIA PAFOU

Occupation: RETIRED

Endorsement Date: 24/01/2024

Instalment Number	Date of Payment	Instalment Amount (€)	Amount Paid (€)	Outstanding Balance (€)
1039111	24/01/2024	144,33	0,00	144,33
1039112	24/02/2024	144,33	0,00	144,33
1039113	24/03/2024	144,34	0,00	144,34
<b>Total</b>		433,00	0,00	433,00

The present Premium Payment Schedule replaces any prior.

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**Invoice**

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NURSE STEPHEN JAMES

Achaion 11, Building ORPHGEUS, Appartment 11

8509 KOUKLIA PAFOS PAFOS

Invoice No.: SINV2070803

Invoice Date: 26/01/2024

Account No.: DCLN321691

Client Code: 321691

Home Phone/Mobile: 00447588717515

Work Phone:

Agent Code: 651

Please note that your account has been debited as follows:

Description	Debit	Credit
1 Ανανέωση Ασφ. MT/409829-PNT.256 End.:1856305 - 453406 NURSE STEPHEN JAMES	433,00	
	433,00	
Balance Due (€):	433,00	

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Recipient's Signature\_\_\_\_\_  
Date\_\_\_\_\_  
For the Company

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**Methods of Payment**

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1. With a Debit / Credit Card by contacting us on 77 77 6006 or by scanning the QR Code.
2. Online through [www.jccsmart.com](http://www.jccsmart.com) under Insurance Companies category.
3. With cash to any of our offices.
4. Via Direct Debit / for more info please contact us on 77 77 6006.
5. Through bank transfer to any of the below accounts:



Bank of Cyprus

0113-05-052282

BCYPCY2N

CY42002001130000000505228200

Hellenic Bank

105-11-392889-00

HEBACY2N

CY11005001050001051139288900