

14/01/2024

**REQUEST FOR MOTOR VEHICLE INSURANCE
QUOTATION – THIRD PARTY**

REFERENCE NAME: BVUMBWE AGRICULTURAL RESEARCH STATION
P.O BOX 5748, LIMBE.

PHONE NUMBER : 01899567378

CONTACT PERSON: MRS. F. SHABA (ACTING PROCUREMENT OFFICER)
CELL NO.: +265 999 64 99 26

MR. B. PHUZIWA

CELL NO.: +265 999 07 83 63

MOTOR VEHICLE REG. NO.	MAKE	BODY TYPE	INSURANCE ISSUED DATE	EXPIRY DATE
MG 469 AE	FORD RANGE	D/CAB	19/02/2024	18/02/2025
MG 477 AH	TOYOTA D4D	D/CAB	01/12/2023	30/11/2024
MG 482 AH	TOYOTA D4D	D/CAB	01/12/2023	30/11/2024
MG 686 AH	TOYOTA D4D	D/CAB	01/12/2023	30/11/2024
MG 707 AH	ISUZU	D/CAB	19/02/2024	18/02/2025
MG 733 AD	NISSAN	T/CAB	19/02/2024	18/02/2025
MG 746 AG	TOYOTA HILUX	T/CAB	19/02/2024	18/02/2025
MG 742 AQ	TOYOTA GD6	T/CAB	19/02/2024	18/02/2025
MG 634 AE	TOYOTAL D4D	T/CAB	19/02/2024	18/02/2025

H. L. CHIFUNDA

(TRANSPORT OFFICER)