



**Liberty**  
**Seguros**

MANAGING AGENCY: 03-3211585

INSURANCE AGENT: ROSA FERRER PEREZ

Through this document, Liberty Seguros, Compañía de Seguros y Reaseguros, S.A. certifies that:

**PETER STIJFS STIJFS**

Is insured by the policy: 04 ER3 7023776

INSURANCE CERTIFICATE


Contact telephone number:  
Customer Service 934890567  
(8AM to 8PM, Monday to Friday)

The policy takes effect: starting at 00 on 18/04/2024  
at 0:00 on 18/04/2025

The covers taken out, summarised in the invoice attached, will be regulated by the Specific Conditions which you will receive shortly.



**Liberty**  
**Seguros**

INVOICE NO.	PLACE OF ISSUE	AGENT	COLLABORATOR	COLLECTOR
0134144256	Barcelona	03 3211585	0000	03 3211585
PAYMENT	TERM OF VALIDITY			ISSUE DATE
YEARLY	18/04/2024 to 18/04/2025			18/04/2024
INVOICE TYPE	POLICY NO.	CERTIFICATE NO.	TYPE OF INSURANCE POLICY	
Aut. Renewal	04 ER3 7023776		Yachts-Pleasure Crafts	
NET PREMIUM	CONSORTIUM	TAXES	DISCOUNT	AMOUNT DUE
1.981,77	0,41	161,52		2.143,70 Eur
<p>Embarcación asegurada: FJORD 38 OPEN Matrícula: 00-8-YF-525          Nombre: Mind Your Step!          Incluida R.C. Obligatoria según R.D.607/1999 de 16 de Abril (B.O.E. 30/04/99)          Insured sum DAMAGE: 447.120,00</p>				
NAME AND ADDRESS OF PAYER			We have received the amount indicated in amount due	
PETER STIJFS STIJFS IBAN: NL06INGB0002123533 This invoice is only valid when accompanied by proof of bank payment			 CEO LIBERTY SEGUROS	
LIBERTY SEGUROS, Compañía de Seguros y Reaseguros, S.A. Domicilio Social: Paseo de las Doce Estrellas, 4, 28042 Madrid. Registered in the Companies Register of Madrid, Tomo 29777, Secc. 8ª, Hoja M-377257, Folio 2, CIF: A-48037642.				