

# EQUITY Life Assurance Kenya Limited (ELAK)

**Incorporated in Kenya** 

Registered Office: Equity Centre, Hosp'dal Road - Upperhill, Nairobi P.O BOX 75104-00200

## **Annuity Policy**

Whereas this policy has been effected with the EQUITY Life Assurance Kenya LTD, (hereinafter called "the Company") by the person or persons named in the schedule hereto (as and hereinafter called "the Person Assured") and whereas the Person Assured has delivered to the company, as the basis of the Contract herein contained, a Proposal and Declaration referred to in the said schedule.

Now this Policy Witness that in consideration of the payment akeady made to the Company of the first premium or the first instalment thereof for the Annuity mentioned in the said schedule, and on condition that the subsequent premiums or instalments of premiums (if any) be duly paid as hereby provided, the Company will pay to the Person or Persons to whom in terms of the said Schedule the Annuity hereby assured is payable the Annuity mentioned in the said Schedule upon proof satisfactory to the Company that the Person or Persons on whose lifeor lives the Annuity is to depend is or are alive on the dates when the several payments of the said Annuity shall respectively become due.

And it is hereby declared that this Policy is subject to any conditions and Provision endorsed or written hereon or contained in the said schedule.

Notices of assignment under this Policy must be deposited at the Head Office of the Company Equity Centre, Hospital Road-Upperhill, Nairobi, or at such other office of the

Company as the Directors may from time totime appoint.

Class of Policy: {#custom}{typeOfProduct}{/} Policy Number: {#custom}{policyCode}{/} Name of Person Assured {#custom}{nameOfAssured}{/} Address of Person Assured {#custom}{addressOfAssured}{/} {#custom}{nameOfPolicyHolder}{/} Sponsor Name: Name of the Life or Lives {#custom}{#namesOfInsuredMembers}{names}{/} upon which Annuity is to depend: { #custom } { nameOfSpouse } { / } Address : { #custom } { addressOfSpouse } { / } Income Tax P.I.N of the Annuitant: { #custom } { kraPin } { / } KES { #custom } { purchase Price | written Number: 'en' } { / } Shillings Only. Purchase Price: KES{#custom} {purchasePrice|formatNumber:'en-US'} {/} Last Expense Cover of {#custom}{lastExpense| writtenNumber:'en'} { / } Only. KES Rider Benefit: {#custom} {lastExpense|formatNumber:'en-US'} {/} {#custom}{commencementDate}{/} Commencement Date: Guarantee Period: {#custom}{gur anteedPeriodInMonths}{/} Months Guarantee Expiry Date: {#custom}{gur anteedExpiryDate}{/} Annuity: KES {#custom}{annuityAmount| writtenNumber: 'en' } {/} Only. Amount: KES. #custom} {annuityAmount|formatNumber: 'en-US'} {/} escalating at {#custom} {escalationg} {/} per annum In equal {#custom}{frequency}{/} instalments of KES {#custom}{annuityAmount|formatNumber:'en-US'} **How Payable:** {#custom}{startDateOfPayment}{/} and on the first day of every month thereafter Dates When Payable: {#custom}{nameOfInsured}{/} To whom Payable:

NAIROBI (KENYA)

Where Premiums and Annuties are Payable

Birth of the life and lives upon {#custom}{dobInsured}{/} which the annuity is to depend					
as stated in the Pro	is to depella posal	{#custom}{ageOfInsured}{	<b>/</b> }		
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IN WITNESS WHEI	REOF this Policy has	s been signed at Nairobi o	n {#custom}{dateToday}{/}		
Examined					
Countersigned				By Authority of the Board	
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Age Last Birthday and Date of

# EQUITY LIFE ASSURANCE KENYA LIMITED

Continuation Sheet attaching to Policy No {#custom}{policyCode}{/} and relative thereto.

This is to Certify that the amount of Stamp Duty Payable is Kshs. {#custom} {stampDutyPayableAmount   formatNumber.'en-US'} {/}						
IMMEDIATE LIFE ANNUITY is Kshs. {#custom}{annuityAmount   formatNumber:'en-US'} {/}						
	END					

For The Company

# SPECIAL CONDITIONS AND PROVISIONS

### **PAYMENT OF ANNUITY**

- 1. The Annuity is guaranteed for  ${\text{months}}{\text{months}}$  Months.
- 2. The last payment of Annuity under this policy shall be on the due date immediately preceding the date of death of the Annuitant, or the {#custom}{annuityPeriodInMonthsWords}{/} ({#custom}{annuityPeriodInMonths}{/}) Monthly instalment, whichever is later.
- 3. If the death of the Annuitant occurs before the expiry of guaranteed period of {#custom}{annuityPeriodInMonths}{/} months, the outstanding benefits are paid to beneficiaries nominated either as a lump sum or in the outstanding instalments.
- 4. If the annuitant survives the guarantee period of {#custom}{annuityPeriodInMonths}{/} months, payment continues until death.
- 5. The Benefits under this Policy are Non-Assignable and Non-Commutable.
- 6. This **Annuity** Contract is subject to physical completion of verification of existence form in the presence of an eligible verifier at intervals determined by the Company from time to time.

END