

KCB INSURANCE AGENCY LTD	
P.O BOX 48154 , 00100 - NAIROBI KENCOM HOUSE, MOI AVENUE	
TEL: 0711087000 FAX: +254 20 22424801	
EMAIL: bancassurance@kcbgroup.com WEBSITE: www.kcbbankgroup.com	
STUDENTS PA RISK NOTE	
FULL CUSTOMER NAME	MS. LYDIA NAFULA
NATIONAL ID NO.:	37128142
POSTAL ADDRESS:	P.O. BOX 56 CODE: 50200
MOBILE	0712047150
E-MAIL:	lydiasimiyu2017@gmail.com
OCCUPATION:	STUDENT
INSURER:	UAP INSURANCE COMPANY LTD
RISK NOTE NO:	NBD0186850
POLICY NO.	401/092/1/013828/2019
BRANCH CODE	4059
POLICY PERIOD FROM:	01/01/2021
TO:	30/06/2021
SCOPE	
Cash benefit in respect of accidental death and/or injury including loss/damage to personal property in accordance with the benefits specified.	
INSURED	
Name	
1	LYDIA NAFULA
BENEFITS	
Accidental Death	200000
Permanent Total Disablement	200000
Accidental medical Expenses	100000
Artificial Appliances	20,000
Accidental dental expenses	20,000
Funeral Expenses	40,000
Accidental Optical Expenses	20,000
PREMIUM COMPUTATION	
Basic Premium	398.00
Policyholders Fund	1.00
Training Levy	1.00
First Premium	400.00
Mode of Payment: Premiums are payable to KCB Insurance Agency Limited; AC NO 1148785078 ,Moi Avenue Branch	
CUSTOMER SIGNATURE:	DATE: 08/12/2020
ISSUING INSURANCE OFFICER: CHARLES KIPKEMOI SANG	DATE: 08/12/2020
VERIFIED BY: CHARLES KIPKEMOI SANG	DATE: 08/12/2020

