	ject to the followi : Clause (optional)	-	ents/Claus	ses:				
	(30 DAYS), CASH		EMTUM W	ARRANTY. L	TEN CLAUSE			
Remarks :								
of commence	rithout except ement of cove as provided (r and inclu	usion of	f all emplo				
BASIC PREMIUM	ITL		PCF		STAMP DU	TY	FUTURE ANNUA	
	104,224	KShs 208	Q	KShs 261				KShs 104,224
Prepared by	ment in the terms PMASESE	Approved b						
Signed at	Occidental Ins. C		-	024				
							ATTORNEY	

Policy Excess: The insured shall be responsible for the first Ksh. 25,000/= of each and every claim, excluding claims for funeral expenses.

Crescent Business Centre, 7th Floor, Parklands Road, Parklands P.O.Box 39459 Nairobi 00623, Kenya Tel. 254-709896000

Policy Renewal Advice

COMPANY OCCIDEN	ITAL INSUF	RANCE COM	1PANY LI	MITED
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POLICY NO. OIC/ECL/11/8937/02

RENEWAL NO. OIC/R/11/184265/02

INSURED SPENOMATIC SOLAR LTD

ANDI & M BANK LTD

ADDRESS P.O. Box 39935-00623 ,NAIROBI ,KENYA

Pin No. P051123085U

Nature of Trade TBA

Agency SHIV INSURANCE BROKERS LIMITED Account No.

PERIOD OF INSURANCE

a) FROM 01-01-2024 TO 31-12-2024

both dates inclusive

b) Any subsequent period for which the Insured shall pay and the Company shall agree to accept a

renewal premium

c) Each renewal of this policy shall be a separate Period of Insurance

NEXT RENEWAL DATE 01-01-2025

GEOGRAPHICAL AREA: Kenya Only

LIMITS OF COMPANY'S LIABILITY:

(a) Any one person Kshs. 8,000,000/=
(b) Any one occurence Kshs. 25,000,000/=
(c) Any one year Kshs. 50,000,000/=

SCHEDULE OF EMPLOYEES

See Attached List

Name / Number of Employees	Occupation of Employees	Estimated Annual Salaries / Wages and Other Earnings on which Premium is Based	Applicable Endosements & Warranties
3	MANAGERS	3,600,000.00	
2	PROCUREMENT STAFF	1,680,000.00	
2	ACCOUNTS STAFF	1,680,000.00	
5	PROJECT ENGINEERS	3,600,000.00	
15	CASUALS	2,700,000.00	

Occidental Insurance Company Ltd.

ATTACHED TO AND FORMING PART OF THE POLICY NUMBER OIC/ECL/11/8937/02

AMENDMENT OF CANCELLATION CONDITION CLAUSE

Notwithstanding anything contained here it is hereby declared and agreed that the cancellation notice period is amended to read thirty (30) days and not as otherwise indicated.

CASH & CARRY PREMIUM WARRANTY

Pursuant to the amendment of Section 156 sub-section (2) of the Insurance Act Cap. 487, you are required to pay your full premium on or before the effective date. Please note that the Company shall only assume risk upon receipt of the full premium.

LIEN CLAUSE

Loss if any payable under this Policy is payable to <<REPLACE WITH NAME>> as their interest may appear whose receipt will be a valid discharge.