

Policy Excess: The insured shall be responsible for the first Ksh. 5,000/= of each and every claim, excluding claims for funeral expenses.

This policy is subject to the following Endorsements/Clauses:

1. Reinstatement Clause (optional)

24 HOURS COVER CLAUSE, AUTOMATIC ADDITIONS AND DELETION OF STAFF, CANCELLATION (30 DAYS), CASH & CARRY PREMIUM WARRANTY, DISAPPEARANCE CLAUSE, EXPOSURE CLAUSE, HIJACK CLAUSE, INSURANCE PREMIUM FINANCE WARRANTY, JURISDICTION CLAUSE, RESTRICTIVE CLAUSE, TRANSPORTATION OF WORKERS, TRUSTEE CLAUSE, WAIVER OF FORMAL PROPOSAL FORM

Remarks :

This policy without exception will be subject to submission of current total payroll as on date of commencement of cover and inclusion of all employees of the insured with current salary/wages as provided under the WIB Act,2007

BASIC PREMIUM	ITL	PCF	STAMP DUTY	FUTURE ANNUAL PREMIUM
KShs 31,777		KShs 64	KShs 79	KShs 31,777

Subject to adjustment in the terms of Condition 8

Prepared by FAITH Approved by _____
Signed at Occidental Ins. Co. Ltd. on 25-01-2024

ATTORNEY



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

Policy Renewal Advice

COMPANY	OCCIDENTAL INSURANCE COMPANY LIMITED	
POLICY NO.	OIC/WPLUS/11/78142/12	
RENEWAL NO.	OIC/R/11/184863/12	
INSURED	MORGAN FOREX BUREAU LTD (KIPRO CENTRE)	
	AND	
ADDRESS	P.O. Box 79012-00400 ,NAIROBI ,KENYA	
Pin No.	P051219519C	
Nature of Trade	FOREX BUREAU	
Applicable Law(s): The Work Injury Benefits Act, 2007		
Agency	NORTHRIDGE 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 29-12-2024

GEOGRAPHICAL AREA: Kenya Only

LIMITS OF COMPANY'S LIABILITY:

- (a) Any one person Kshs. 100,000,000/=
- (b) Any one occurrence Kshs. 100,000,000/=
- (c) Any one year Kshs. 200,000,000/=

SCHEDULE OF EMPLOYEES

See Attached List

BENEFITS

COVERAGE	COMPENSATION- PER EMPLOYEE
A) Death:	96 months earnings subject to the maximum amounts set out under the limit of liability above
B) Permanent Total Disablement:	Percentages as set out in the First Schedule of Work Injury Benefits Act, 2007 subject to the maximum amounts set out under the limit of liability above
C) Temporary Total/ Partial Disablement:	As per the Work Injury Benefits Act, 2007 subject to a maximum of twelve months earnings
D) Medical Expenses:	ACTUAL EXPENSES INCURRED BUT LIMITED TO KSHS 100,000/-
E). Funeral Expenses:	KSHS 30,000/- PER DECEASED EMPLOYEE