Britam
With you every step of the way

Safaricom

Britam Home Insurance Policy Document



PREAMBLE

WHEREAS the Insured by a proposal and declaration written application or statement which shall be the basis of this contract has applied to **SAFARICOM**.

BRITAM General Insurance (Kenya) Limited (herein after called the **"Company"**) and paid premium as consideration for the insurance herein contained.

NOW THIS POLICY WITNESSES that if at any time during the stated period of insurance or during any other period for which the Company may accept payment for the renewal of this Policy, then the Company will subject to the terms of the Policy indemnify the Insured as hereinafter provided.

1. DEFINITION OF INSURANCE TERMS

The terms defined below shall bear the meanings herein assigned to them and unless inconsistent with the context, all words and expressions importing one gender shall include any other gender, words signifying the singular number shall include the plural and vice versa. Headings are solely for ease of reference and are not to be considered in the interpretation of the policy.

1. **Policy:** Means the Home Insurance policy contracted between the COMPANY and the POLICY HOLDER, together with the schedule attached hereto, as amended from time to time.
2. **Insured:** Shall mean registered Safaricom clients in whose name the Policy is issued and named as Insured in the policy Schedule.
3. **Cover Period**: The duration of the policy which shall encompass the exact date of policy inception and exact date of expiration.
4. **Effective Date:** Cover will become effective once full premium has been paid and written confirmation of application and terms given by Britam Insurance, notwithstanding the fact that payment may have been received. All membership benefits commence after the waiting periods has been served except for hospitalization following an accident, which is covered from the date of commencement of cover
5. **Waiting Period:** The period from the commencement date during which a member is not entitled to any benefit except in the event of an accident, any applicable waiting periods will be indicated herein.
6. **Contents:** Household goods, personal effects, including but not limited to valuables, furniture, fixtures and fittings (including interior decorations) all belonging to the Insured or a member of his household.
7. **Domestic Staff:** A person employed by the Insured to carry out domestic duties associated with the residential premises.
8. **Scope of Cover:** The insured events for which the benefits under this policy shall become payable as detailed in the schedule of this policy, and shall include:
    - Coverage for immovable contents against Fire & related perils
    - Coverage of movable contents against All Risks
    - 24-hour coverage of domestic worker(s) against an accident that leads to death, permanent disability, or hospitalization
    - Ambulance expenses for the Policy owner
9. **Accidental Death:** Means death arising from bodily injury which:
    - Was caused solely and directly by violent accidental and visible means; and
    - Is the sole direct and proximate cause of death; and
    - Was sustained after the policy commencement date but no earlier than 12 months before the date of death.
10. **Death Benefit:** Means the benefit payable upon the death of an insured as set out in the SCHEDULE and subject to the terms and conditions of the POLICY.

11. **Permanent Disability:** Shall mean a condition resulting directly from an Accident occurring within the Policy period, which is not expressly excluded under the Policy Contract, and which causes irreversible loss of physical or mental capacity. It includes:
    - Total and permanent loss of use of limbs, sight, hearing, or speech, rendering the insured unable to perform normal occupational or daily functions
    - Irrecoverable impairment that is medically certified as permanent and beyond reasonable expectation of recovery
    - Functional incapacity that prevents the insured from engaging in any gainful employment or substantially restricts their ability to live independently
    - Medical confirmation by a duly qualified practitioner that the disability is permanent in nature and directly attributable to the accident
12. **Hospitalization:** Means the admission in a Hospital for a minimum period of 36 Inpatient Care consecutive hours.
13. **Home:** The private dwelling used for domestic purposes only, all at the situation of premises shown in the schedule.
14. **Territorial Limits:** This shall mean the geographical area within which the policy shall be applicable. This shall be within the territory of the Republic of Kenya.
15. **Renewal:** Renewal defines the terms on which the contract of insurance can be renewed on mutual consent with a provision of grace period for treating the renewal continuous for the purpose of all waiting periods.
16. **Cancellation:** Cancellation defines the terms on which the policy contract can be terminated either by the insurer or the insured by giving sufficient notice to other which is not lower than a period of fifteen days.
17. **Valuables:** Articles of value including but not limited to jewelry, metals, watches photographic equipment, binoculars, paintings and other works of art, radio televisions other audio or video and /or computer equipment, collections of stamps, coins and medals.
18. **Exclusion:** Category of hazards, perils, circumstances, conditions, activities and their related or consequential expenses that are not covered by this policy for which Britam shall NOT be liable.
19. **Excess:** The amount the Insured must bear as first part of every claim made.
20. **We, us, our, Britam:** Words importing the singular number shall be deemed to include the plural number and vice versa. Where the context so admits, words denoting the masculine gender shall be deemed to include the feminine.

2. POLICY CONTRACT WORDING

Whereas the Policyholder in this Policy Contract has, by declaration, applied to **BRITAM General Insurance (Kenya) Limited for BRITAM Microinsurance Limited**, also referred to as **(HOME INSURANCE COVER),** the **COMPANY** agrees to provide:

Home Insurance Cover as limited by the Schedule of benefits purchased, as outline in **Appendix 1 below.**
Subject to the terms, conditions and exclusions contained or endorsed on this Policy Contract, shall be incorporated in and form the basis of this contract, and the Client shall have, on behalf of the Policyholder, paid the Company the expected premium in advance or on the effective date.

This Policy Contract, the Schedule, any endorsement and Memorandum of Understanding thereon shall be read together as one contract and any word or expression to which a specific meaning has been attached in any part of the Policy Contractor Schedule shall bear such meaning throughout.

The following shall be the conditions precedent to any liability to the Company: -

- Observation of the terms of this Policy Contract relating to any requirement to be complied with by the Policyholder or the Dependent.

- The factual accuracy of the digital application.

3. SUMMARY OF BENEFITS

A. PROPERTY

The Contents of the residence being a private dwelling house or private flat consisting of Furniture, Household Goods and Personal Effects of every description, the property of the Insured or any member of his household and Fixtures and Fittings, the Insured's own or for which he is legally responsible.

Movable items: any items in the home that can be moved, including mobile devices (defined as any piece of portable electronic equipment that can connect to the internet such as laptops, tablets, phones, cameras, handheld gaming consoles, smart watches, e-readers).

Immovable items: including but not limited to valuables, furniture, fixtures and fittings (including interior decorations) all belonging to the insured or a member of his household.
The Insured will be indemnified against loss of or damage to the property insured caused by the following perils:-

1. Fire, Lightning, Thunderstorm, Earthquake or Volcanic Eruption or Underground Fire, Subsidence or landslip
2. Explosion.
3. Malicious Damage caused by any person other than a member of the Insured's household
4. Aircraft or Other Aerial Device or any article dropped there from.
5. Damage caused by Bursting or Overflowing or Escape of water from pipes or other apparatus (Excluding damage caused thereto)
6. Theft
   - Theft accompanied by actual forcible and violent breaking into or out of the buildings or any attempt thereat
   - Theft in any other circumstances but excluding:
     - Theft whilst the buildings or any part thereof are leased, let or sub- let
     - Theft from any outbuilding not directly communicating with the private dwelling house or private flat mentioned in the Schedule or from any verandah thereto
     - Theft occurring whilst the Insured's private dwelling house has been left unoccupied for more than 7 consecutive days. The premises shall not be deemed occupied where a person only inhabits servants' quarters or non-communicating buildings except where a watchman has been employed to continually guard the unoccupied premises.

B. PERMANENT TOTAL DISABILITY COVER (PTD) – DOMESTIC WORKER

1. The benefit shall become payable when the Life Assured becomes permanently unable to engage in any gainful occupation or employment for compensation or profit for which the insured is reasonably qualified by education, training or experience for the remainder of the insured's life because of an injury or illness; a deferred period of three months from the date of disablement;
2. The PTD benefit shall be a lump sum payment of the Sum Assured amount.
3. The Company must be advised of all claims within thirty (30) days of the Life Assured's Permanent and Total Disablement;
4. In order for one to qualify for PTD benefit, the insured must provide a medical report and be certified by a qualified medical practitioner, recommended, recognized and appointed by the Company to be totally and permanently unfit to carry out any gainful occupation or employment for compensation or profit for which the insured is qualified by education, training or experience for the remainder of the insured's life;
5. In case of an employed individual, a letter from the employer confirming that the individual has been terminated from employment due to a PTD will be required;

5. The claimant must present himself to the recommended Company doctor for review within 30 days from the date of advice by the Company to do so, failure to which the claim shall become inadmissible.
6. The Company may request any additional documentation it may require to assess the validity of any claim submitted.
7. The PTD cover will be offered in conjunction with Britam General Insurance Company (Kenya) Limited.

C. ACCIDENTAL DEATH BENEFIT – DOMESTIC WORKER

The policy covers the insured (homeowner and/or the domestic worker) if he/she suffers an accident during the Policy Period and this is the sole and direct cause of his death from the date of the accident, then we will pay the Sum Insured.

D. HOSPICASH – DOMESTIC WORKER

In the event of hospitalization of the insured (homeowner and/or the domestic worker) in any of NHIF Inpatient accredited hospitals due to any illness for a consecutive period of more than **72 hours**, a daily benefit as mentioned in the Schedule of the Policy is payable for a maximum of **30 days** during the entire policy period.

Admissions due to chronic conditions will be payable for a maximum of **15 days**.

Benefits will be payable by the Insurer in KES to the Insured person, by way of the direct deposit or electronic transfer of immediately available funds into the Insured person's M-PESA account.

E. AMBULANCE BENEFIT

The Insurer will reimburse the Insured or Policy owner the sum of expenses incurred as a result of ambulance evacuation subject to provision of ETR receipts.

4. POLICY EXCLUSIONS

The Insurer will not be liable under this Section for:

1. Property more specifically insured under any other Policy.
2. Loss or damage arising from wear and tear.
3. Loss or damage arising from electrical or mechanical breakdown, faulty manipulation or mechanical defects.
4. Theft or attempted theft by any member of the Insured's household.
5. Property in transit unless accompanied by the Insured or any member of his household.
6. Breaking of Articles of brittle nature (other than lenses).
7. Destruction of or damage to the buildings or the contents by order of the Government or any public municipal or local authority of the country or area in which the buildings are situated.
8. Deeds, bonds, bills of exchange, promissory notes, cheques, travelers' cheques, securities for money, stamps, documents of any kind, cash currency notes, manuscripts, medals, jewelry, coins, motor vehicles and accessories and Livestock unless specially mentioned herein.
9. Any part of the structure or ceilings of the buildings, wallpapers and the like or external television and radio antennae, aerial fittings masts and towers.
10. Property outside the territorial limits.

The company shall not be liable under this section in respect to Hospicash:

1. Hospitalization and/or treatment within the waiting period and hospitalization and/or treatment following the diagnosis within the waiting period.
2. Expenditure incurred by a member or dependents arising from any illegal or criminal act.
3. Treatment which is not medically necessary.

4. Diseases classified as pandemic, both spread through single source, propagated source or mixed endemic will not be covered with the exception of COVID-19. Pandemic diseases or conditions as declared by the World Health Organization or National Government.
5. Expenses arising from injuries sustained as a result of participation in professional sport or hazardous pursuits such as motor racing, skydiving, parachute jumping and Bungee jumping.
6. Operations, treatments and/or procedures of own choice for purely cosmetic purposes or obesity, and any complications that may arise from such operations, treatment and/or procedures.
7. Expenses incurred for recuperative or convalescent holidays.
8. All expenses in respect of illness conditions that were subject to waiting periods when the member and dependents joined the Scheme.
9. Any treatment arising from an accident or event because the insured and/or dependents was/were under the influence of alcohol or drugs, unless prescribed and taken according to the instructions of a medical practitioner.
10. Exercise and/or guidance programs inclusive of antenatal exercises.
11. Treatment of impotence not related to a sickness that is harmful or a threat to essential bodily functions or treatment of impotence that is merely recommended for Psychiatric reasons.
12. Hormonal treatment.
13. Accommodation and costs in convalescent or old age homes or similar institutions catering for the aged, Vocational Guidance, Child Guidance, and Marriage Guidance.
14. Illness, injury or disablement directly or indirectly caused by or contributed to by: active participation in Wars, Riots or Civil Disobedience or political activity.
15. The willful non-compliance on the part of the Policyholder with a registered doctor(s) or health care officer(s) medical advice.
16. Admissions for routine or regular Dialysis.
17. Admissions for experimental treatments.

5. POLICY TERMS AND CONDITIONS

1) ELIGIBILITY AND MEMBERSHIP

An eligible person shall be eighteen (18) years and above and should be a duly registered Safaricom Home Fibre user or a domestic worker of the Safaricom Home Fibre user.

2) PREMIUMS

- Premiums shall be payable on the basis and rates set out in the policy schedule assured.
- If the insurer does not receive the full amount of all premiums due, the cover shall cease unless expressly agreed otherwise in writing by the Company.
- The Company reserves the right to review the premium payable in future. If, in the opinion of the Company's Actuary, the future premiums are insufficient to maintain the benefits under the policy, the Policyholder shall be required to either:
  - Increase the premium payable at renewal in order to maintain the current benefits OR,
  - Have benefits reduced or restrict proportionately to match the revised premium.

3) WAITING PERIOD

One-month waiting period applies on initial sign up, policy upgrade and delayed renewals where a customer has missed one or more monthly repayments. In the event of non-payment of premiums, all the attached benefits and cover shall lapse and become void.

4) EXCESS

Excess of 10% is applicable to every claim raised with a minimum of KES 3,000 applicable per claim.

5) ENTRY DATE/PERIOD OF COVER

This policy provides Home Insurance and Personal Accident cover and shall remain valid and enforceable for the period expressly agreed upon by the Policyholder and the Insurer. The agreed will be subject to renewal by mutual consent.

6) PAYMENT OF DEATH BENEFITS

- The company shall remit the proceeds of this policy, i.e. the death benefit to the insured's dependents and Heirs upon the demise provided the death is as a consequence of an accident.
- The amount of death benefit payable will be determined on the basis set out in the schedule of assured lives.

7) CESSATION OF BENEFITS

Notwithstanding any other provisions in the policy, the cover in respect of an insured shall cease immediately upon:

- For Home Insurance and Personal Accident; the non-payment of monthly premiums
- For Personal Accident; the payment of the DEATH BENEFIT

8) CURRENCY

All payments to the Company shall be made at its Head Office as contained in the bilateral agreement and in the currency of the Republic of Kenya.

9) GEOGRAPHICAL AREA

The cover granted under this insurance is valid for claims incurred in Kenya only.

10) FRAUDULENT OR DELIBERATE ACTS

Insurer will terminate the contract and reject the claim if:

- Any claim under this policy is in any respect fraudulent.
- It is found that fraudulent means or false information was used to benefit from the cover granted.
- The insured knowingly allowed anyone acting on their behalf to provide false information so as to obtain a benefit; or
- The insured deliberately and willfully conspired to cause, aggravate, or accelerate the illness.

The Insurer will make no refunds for premiums already paid and may initiate legal proceedings against the defrauding party.

11) TAXATION

Should the Company be required by law to deduct and account for tax/levy payments under the provisions of this Policy, it shall be entitled to make such deductions as dictated by the law.

12) DISPUTE ROSOLUTION

Any claim, controversy or dispute between the COMPANY and the POLICYHOLDER and or the Insured, other than any claim, controversy or dispute in which a Party seeks equitable relief, will be settled as follows:

- All disputes arising out of interpretation of this agreement between the Parties with respect to any subject listed in the preceding paragraphs will be escalated through normal business procedures to the Head of Emerging Consumers and Head of General Insurance. If the same is deemed irresolvable, the injured party shall refer the issue for Arbitration.
- Any disputes not resolved as per clause (a) above shall be referred to Arbitrators, one to be appointed by each party and subject to the provisions of the Arbitration Act 1995 or any other statutory replacement or modification thereof for the time being in force in Kenya.
- Any claim, controversy or dispute in respect to implementation of this agreement will be escalated through normal business procedures to the Director of Emerging Consumer. If the same is deemed irresolvable, the injured party can seek redress from a Kenyan Court of appropriate jurisdiction.

13) CANCELLATION OF COVER

The cancellation clause applies as follows:

- **Cancellation by Safaricom:** Safaricom may cancel this policy by giving 30 days' notice through an appropriate mode of communication. Britam shall cancel the policy without any premium refund, as premiums are paid on a pro-rata basis.
- **Cancellation by the Company:** The Company may cancel this policy by giving 30 days' notice to the Insured through an appropriate mode of communication. No premium shall be refunded upon cancellation.

6. CLAIMS PROCEDURE

THEFT

1. Customer experiences theft claim event.
2. Customer reports to police and obtains an abstract.
3. Customer provides police abstract, ETR replacement receipts (or quotations) of stolen items, ID copy and completed claim form to Britam.
4. Britam assesses the claim, provides approval/decline, and issues digital discharge voucher to Customer.
5. Britam pays the customer via M-Pesa.

DAMAGE FROM ACCIDENT, FIRE AND FLOODS

1. Customer experiences damage claim event.
2. Customer reports to police and obtains an abstract.
3. Customer provides police abstract; pictures (with visible serial number), ETR repair receipt of damaged items, ID copy and completed claim form to Britam.
4. Britam assesses the claim, provides approval/decline, and issues digital discharge voucher to Customer.
5. Britam pays the customer via M-Pesa.

AMBULANCE BENEFIT

1. Customer experiences an accident requiring ambulance transport.
2. Customer uses ambulance service to get to hospital for treatment.
3. Customer shares ETR payment receipts for ambulance bill & hospital bill (if hospitalized), medical report, police abstract, ID copy and completed claim form to Britam.
4. Britam assesses the claim, provides approval/decline, and issues digital discharge voucher to Customer.

7. CLAIM DOCUMENTATION

Permanent Total Disability

1. Original Full and complete Medical Report showing Diagnosis, Future Prognosis and specifying any percentage of disability from the NHIF accredited hospital Doctor.
2. Original Discharge summary if In-Hospitalization was involved from the treating Doctor or Hospital.
3. Original Copies of results of any diagnostic tests.
4. ID copy
5. Completed claim form
6. Any other documents pertaining to the claim which the Company may require.

Hospicash

1. Hospital invoice and receipt
2. A digital copy of the original discharge summary from the treating doctor or hospital
3. ID copy
4. Completed claim form
5. Any other documents pertaining to the claim which the Company may require.

Accidental Death

1. Certified true copy of the original Death Certificate and police abstract.
2. ID or Passport Copy of deceased valid at the time of Death.
3. Wherever legally possible, a Postmortem Report will be required, along with a Police Report.
4. A detailed Medical Report is to be submitted if the actual cause of Death is not clearly mentioned on the Death Certificate.
5. Completed claim form
6. Any other documents pertaining to the claim which the Company may require.

Ambulance

1. Receipts of ambulance bill & hospital bill (if hospitalized)
2. Medical report & discharge summary (if hospitalized)
3. Police abstract (for road accident)
4. ID copy
5. Completed claim form

8. DECLARATION

The purchase of this Home Insurance Cover constitutes the customer's acceptance of the terms and conditions governing the provision of the cover, as set out in this policy document.

SIGNED BY:
FOR: BRITAM GENERAL INSURANCE COMPANY (KENYA) LIMITED

NAME: _____ SIGNATURE: _____ DATE: _____

AUTHORIZED SIGNATORY

Covered Items	Tier 1 (Kes)	Tier 2 (Kes)	Tier 3 (Kes)	Tier 4 (Kes)
Maximum Sum Insured	100,000	500,000	1,000,000	2,000,000
Household Contents	Up to 10,000 Per Single Item	Up to 50,000 Per Single Item	Up to 100,000 Per Single Item	Up to 200,000 Per Single Item
Portable Items against damage or loss arising from a fire, floods or theft.	Not Covered	Up to 50,000 Per Single Item	Up to 100,000 Per Single Item	Up to 200,000 Per Single Item
Number of Domestic Workers Insured	Nil	1	1	2
Domestic Worker Accident Benefit (Death / Permanent Disability)	Not Covered	75,000	100,000	125,000
Domestic Worker Accident Benefit (Hospicash)	Not Covered	700/Day Subject To A Minimum Hospitalization Duration of 3 Nights, Up To Thirty (30) Days/Year		
Ambulance Benefit	Not Covered	5,000	7,500	10,000
Payment Frequency	**Monthly**			