



IMPEX INSURANCE BROKERS LIMITED

Panayotou Building, Simu/Jamhuri Street, P.O. BOX 1654, Dar Es Salaam, Tanzania
Tel: (+255 22) 2137296, 2121708, 2136519, Fax: (+255 22) 2131044
Mobile: (+255) 0784 222 246 <http://www.insurancetz.com>, Email: sadick@insurancetz.com

Date: 17th December, 2013

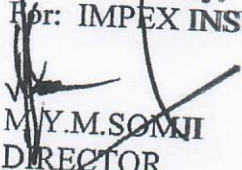
SUSAN LESLEY HUXTABLE
P.O. BOX
DAR ES SALAAM

Dear Sirs/Madam,

RE: KEY PERSON LIFE INSURANCE POLICY

We have pleasure in enclosing herewith Alliance Life Assurance Limited's Policy No. 945576 pertaining to the above insurance and trust you will find the same to be in accordance with your precise requirement.

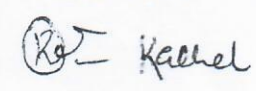
Yours faithfully,
For: IMPEX INSURANCE BROKERS LIMITED


M.Y.M. SOMJI
DIRECTOR

Encl.

c.c. M/S. BARCLAYS BANK (T) LTD
P.O. BOX
DAR ES SALAAM

DAR-ES-SALAAM INDEPENDENT SCHOOL
P.O. Box 32391, TEL 2781515
DAR-ES-SALAAM - TANZANIA

Received at: 9:15 am 18/12/2013
Received by 

RECEIPT

IMPEX INSURANCE BROKERS LIMITED

PANAYOTOU BUILDING, SIMU/JAMHURI STREET
P.O. BOX 1654, DAR ES SALAAM, TEL: 2121708/2131044/2137296, Mob: 0774 - 222246
Email: sadick@insurancetz.com

No./CL 35752

Date: 6/12/2013

RECEIVED From M/s: Dar es Salaam Independent School

P.O. Box 32391, DSM

the sum of ~~Shillings~~ ~~US \$~~ Twenty Nine thousand Eight hundred
Twenty Seven

being payment of 5yr. Renewable level term Assurance Cover Note No: _____

Vehicle No: with Alliance Life Assurance Ltd Policy No: 945576

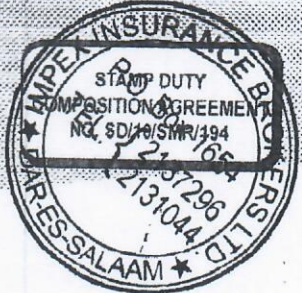
INSURANCE Company: Alliance Life Assurance Ltd Period: 05-12-2013 - 05-12-2014

File No: Nbr 1081

Cash _____

Cheque 100743-4-5 T/T

Shs \$ 29,827/-



WITH THANKS

FOR IMPEX INSURANCE BROKERS LTD



Alliance Life Assurance Limited

Alliance Life
ASSURANCE

16 December 2013

Impex Insurance Brokers Limited
Simu/Jamhuri Street
P.O. Box 1654
Dar es Salaam
Tanzania

Dear Kumail

RE: KEYMAN INSURANCE POLICY
POLICY NO: 945576


We enclose herewith the Keyman Insurance policy document in respect of Susan Huxtable.

The original document is to be submitted to the client and the one marked 'copy' is for your record purposes.

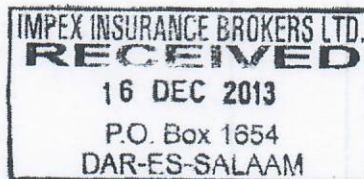
We thank you for your kind support and look forward to the receipt of the premium.

We assure you of our excellent services always.

Kind regards


Hemal Chudasama

Assistant Manager-Operations



Think Life, Think Alliance Life.

P. O. Box 11522, 5th Floor, Exim Tower, Ghana Avenue, DSM. Tel: +255 22 2103300/ 2103301, Fax: +255 22 2103305,
E-mail: lfe@alliancelife.co.tz, Website: www.alliancelife.co.tz

ALLIANCE LIFE ASSURANCE LIMITED

P.O.Box. 11522, Dar es Salaam, Tanzania
Tel: +255 22 2103300/01 Fax: +255 22 2103305
Email: life@alliancelife.co.tz

KEY PERSON LIFE INSURANCE POLICY

POLICY NUMBER :945576

This *Policy* document is issued and administered by Alliance Life Assurance Limited. This document contains the terms and conditions of your insurance *Policy*.

Your contract with *Alliance Life* is made up of the following:

- the fully completed proposal form with the declaration signed by the *Life Insured* and the *Proposer(s)*; and
- any signed declaration presented to the company or personal statement made before a *Medical Examiner* at the request of *Alliance Life*. This includes any representation(s) made by or on behalf of the *Life Insured* or the *Proposer(s)*, which are regarded by *Alliance Life* as being material to the assessment of the risks under the *Policy*; and
- this *Policy* document; and
- the attached *Policy Schedule*, which sets out the details of your cover.

This *Policy* shall be governed by and interpreted according to the laws of the United Republic of Tanzania.

Please read this document carefully and store it in a safe place. In the event of a claim, the *Policy* document must be returned to *Alliance Life*.

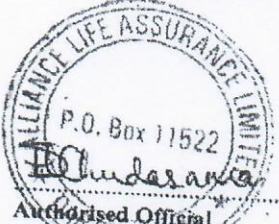
If you have any questions please contact us on:
Telephone: +255 22 2103300, or Fax +255 22 2103305

Please forward all written correspondence to:
Alliance Life Assurance Limited, P.O. Box 11522, Dar es Salaam, Tanzania

In this policy, where the context so permits, words signifying the singular include the plural; words indicating the masculine include the feminine, and vice versa.

Any provision contained in this policy shall be read, understood and interpreted in the context of the provisions of this *Policy* as a whole.

Dated at DAR ES SALAAM on 16th DAY OF DECEMBER 2013.


P.O. Box 11522
Dar es Salaam
Authorised Official
Alliance Life Assurance Limited

POLICY SCHEDULE

Policy Number	945576
Proposer:	DAR ES SALAAM INDEPENDENT SCHOOL
Life Insured:	SUSAN LESLEY HUXTABLE
Date of Birth:	22 ND JANUARY 1948
Gender	FEMALE
Occupation:	PRINCIPAL/INVESTOR
Benefits:	INSURED AMOUNT CEASE DATE
Death Benefit:	USD 1,150,000 04 DECEMBER 2018
Benefits ceded to:	BARCLAYS BANK TANZANIA LIMITED
Type of Cover:	5 YEAR TERM ASSURANCE
Annual Premium:	USD 29,827
Commencement Date:	05 DECEMBER 2013
Broker:	IMPEX INSURANCE BROKERS LIMITED

Policy Number 945576

Page 2 of 6



DEFINITIONS

A number of words and phrases which have been printed in italics have been used in this policy document. Those words or phrases shall be deemed to have the following meanings for the purpose of this policy document:

"Alliance Life" means Alliance Life Assurance Limited. (Registration no. 73479);

"Benefit" means the right to receive payment of either:

- the Death Benefit; and/or
- the Permanent and Total Disability Benefit;

according to the insurance cover included and stated on the *Policy Schedule*. All Benefit payments are payable in United States Dollars and are payable subject to the conditions and *Exclusions* of this *Policy*.

"Cease Date" means the date, as stated in the *Policy Schedule*, on which this *Policy* is terminated and from which time no *Benefits* may be claimed.

"Cede/Ceded" means the act of registering a *Cession* on the *Policy*.

"Cession" means a contract formalizing the act of transferring the rights and *Benefits* due under the *Policy* to a third party, who is not a party to the contract between the *Proposer* and *Alliance Life*.

"Cessionary" means the person, persons or body to whom the rights and *Benefits* due under the *Policy* have been transferred to by means of a *Cession*.

"Commencement Date" means the date from which the *Proposer(s)*, *Deceased Estate* will be entitled to claim any of the *Benefit* under the *Policy*. After acceptance of the *Policy* by *Alliance Life* and receipt of the first *Premium*, cover will begin on the *Commencement Date* appearing on the *Policy Schedule*.

"Death Benefit" means the right to payment to the *Proposer(s)*, the *Deceased Estate* or the *Cessionary* of the amount stated on the *Policy Schedule* as the insured amount in the event of the *Life Insured's* death.

"Deceased Estate" means the property of a person who has died, which is to be administered by an executor until the property has been distributed to the heirs. If the *Proposer* and the *Life Insured* are the same person and no *Cession* registered, then the *Death Benefit* will be paid to the *Deceased Estate*.

"Event" means any of those occurrences for which you are covered by this *Policy* as stipulated in the *Policy Schedule*.

"Exclusion" means any limitation(s) to the *Benefit* as defined where certain conditions or actions will result in a *Benefit* not being paid in accordance with the *Policy Conditions*.

"Grace Period" means a period of 30 calendar days allowed for the payment of the second and each subsequent *Premium*, during which time *Benefits* are payable. Cover will not commence until *Alliance Life* has received the first *Premium*.

"Insurable Interest" means the potential for the *Proposer* to suffer a genuine loss upon the death or disablement of the *Life Insured*.

"Life Insured" means the person whose life is being insured under this *Policy*, as stipulated in the *Policy Schedule*. Where the *Proposer* and the *Life Insured* are the same person, the *Total and Permanent Disability Benefit* will be paid to the *Life Insured* in the absence of a valid *Cession* registered on the *Policy*.

"Key Person" means a natural person who holds a relationship to the *Proposer* which gives rise to the *Insurable Interest*.

"Medical Examiner/Practitioner" means a Medical Examiner/Practitioner, suitably qualified in relation to the examination being conducted or the opinion being expressed and holding a current registration with an internationally recognised professional medical association or statutorily recognised body or any other medical examiner approved by *Alliance Life*.

"Policy" means this contract of insurance between the *Proposer* and *Alliance Life*, defined in this document, inclusive of the conditions of the insurance cover.

"Policy Anniversary" means each anniversary of the *Commencement Date*.

"Policy Conditions" means the *Proposer's*, *Life Insured's* and *Alliance Life's* responsibilities under the contract.

"Policy Schedule" means the document included with this *Policy* and headed "Policy Schedule".

"Premium" means the agreed annual payment by the *Proposer* to *Alliance Life* of the amount stipulated on the *Policy Schedule* issued by *Alliance Life*. All *Premiums* are payable in United States Dollars.

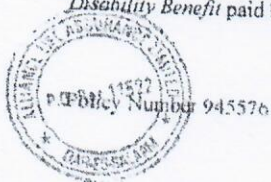
"Proposer" means the owner of the *Policy* as stated on the *Policy Schedule*. In the absence of a valid *Cession* all *Benefit* payments will be made to the *Proposer*.

"Reinstatement Date" means the date from which the *Proposer(s)*, *Cessionary* or the *Deceased Estate* will once again be entitled to claim any of the *Benefit* under the *Policy*. The *Policy* may be reinstated at *Alliance Life's* sole and exclusive discretion after all requirements under the *Policy Conditions* have been met by the *Proposer*.

"Total and Permanent Disability, also referred to as Total and Permanent Disablement"

This means having suffered a disability through injury or illness which totally and permanently prevents the *Life Insured* from being engaged or employed in any occupation for remuneration or profit.

"Total and Permanent Disability Benefit" means the right to payment to the *Proposer* or the *Cessionary* of the amount shown in the *Policy Schedule* as the "Total and Permanent Disability Benefit" in the event of the *Total and Permanent Disability* of the *Life Insured*. This benefit constitutes an accelerated payment of the *Death Benefit* as if the *Life Insured* had died on the day preceding the event which led to the disability and the *Death Benefit* will be reduced by the amount of the *Total and Permanent Disability Benefit* paid by *Alliance Life*.



POLICY CONDITIONS

1. Events covered by this policy

This Policy only covers the Events specified on the Policy Schedule and only once Alliance Life has accepted the risk of providing a Benefit on the life of the Life Insured. These Events may include the following:

- The death of the Life Insured; or
- The Life Insured becoming Totally and Permanently Disabled.

Total and Permanent Disability Benefits may only be purchased with the Death Benefit.

2. Basis of Cover

This Policy is based on the Insurable Interest which exists between the Life Insured, as a Key Person, and the Proposer.

If, for any reason, the Key Person ceases to be a Key Person the contract will lapse, unless Alliance Life at its sole discretion agrees in writing to allow the cover to continue. No Benefits are payable under a lapsed contract.

3. Benefits

Provided that all Premiums due under the Policy have been received within the Grace Period, the following Benefits, if selected on the Application Form and stated on the Policy Schedule, are available, subject to the Conditions and Exclusions contained in this Policy:

3.1. Death Benefit:

In the Event of the Life Insured's death, Alliance Life will pay the Death Benefit

3.2. Total and Permanent Disability Benefit:

If this Benefit is stated on the Policy Schedule then, in the Event of the Life Insured's Permanent and Total Disability, the Permanent and Total Disability Benefit becomes due and payable. The Death Benefit will be reduced by the amount of the Permanent and Total Disability Benefit payment.

Benefits will be paid after all Alliance Life's reasonable claim requirements have been met and Alliance Life is satisfied that the claim is valid.

4. Premiums

Premiums are payable as set out in the Policy Schedule. A Premium is only regarded as paid once Alliance Life's bank account has been credited and provided the payment is not subsequently reversed.

If any Premium is not paid on time, a thirty day grace period is allowed. If the Premium is still not paid after thirty days the contract will lapse. No Benefits are payable under a lapsed contract.

5. Reinstatement

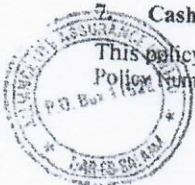
A lapsed contract may be reinstated subject to Alliance Life's requirements at the time.

6. Renewal of cover

Alliance Life will renew the cover for a further period equal to the original term of the Policy at a revised premium to reflect the age of the Life Assured and rate structure of Alliance Life at the time of renewal, provided that notice of the intention to renew is given to Alliance Life not less than thirty days prior to the Cease Date and provided the Proposer agrees to pay the revised premium. The Death Benefit provided in terms of the renewal option, will be limited to the Death Benefit stated in the Policy Schedule. The Policy may only be renewed once and will lapse at the end of the renewed contract term.

7. Cash surrender value and paid up status

This policy does not acquire a cash surrender value and cannot be made paid up.
Policy number 945576



8. Rights of parties:

The *Proposer* may *Cede* the *Policy*. No *Cession* will be binding on *Alliance Life* unless it is recorded by *Alliance Life*. *Alliance Life* is not responsible for the validity of any *Cession*. Where an absolute *Cession* has been recorded, the *Cessionary* becomes the owner of the *Policy*.

Any *Benefits* due will be paid to the *Proposer* or his estate. Where a *Cession* has been recorded, any *Benefits* due will be paid to the *Cessionary*.

Subject to any *Cession*, the *Proposer* may exercise all rights under this *Policy*. Where the *Policy* has more than one owner, the rights must be jointly exercised by all the owners.

Notwithstanding anything in this *Policy*, no *Cession* of this *Policy* may be made in favour of or *Benefit* become payable to the *Life Insured* without the prior written approval of *Alliance Life*.

9. Proof of age

If the date of birth of the *Life Insured* proves to be incorrect, *Alliance Life* shall make an adjustment to the *Benefits* or a retrospective adjustment to the *Premium* as it considers appropriate.

10. Claims Procedure

A benefit will only be paid once it has been proven to the satisfaction of *Alliance Life* that the *Event*, which is covered under the *Benefit*, has occurred. Confirmation of the age of the *Life Insured* and of the identity of who, is to receive the *Benefit* payment shall also be required. The *Proposer*, *Cessionary*, *Beneficiary* or *Executor* of the *Estate* must at his/her own expense provide *Alliance Life* with whatever certificates, information and evidence *Alliance Life* requires to decide on the validity of the claim. *Alliance Life* will not be liable for interest or penalties when payment of the *Benefit* has been delayed pending receipt of the requested documentation to verify a *Benefit* payment. All *Benefit* payments will be paid in the United Republic of Tanzania.



HC

Policy Number 945576

EXCLUSIONS

1. The *Death Benefit* is not payable and the Policy becomes void, with all *Premiums* forfeited, in the *Event* of the death of the *Life Insured* by suicide (whether sane or insane), within two years of the *Commencement Date* or *Reinstatement Date* of the *Policy*.
2. The *Total and Permanent Disability Benefit* is not payable if:
 - 2.1. *Alliance Life* has not been notified in writing before the *Life Insured* changes his/her residence to a country other than the *United Republic of Tanzania*
 - 2.2. The *Event* giving rise to the claim arose directly or indirectly through or is attributed or traceable to the following:
 - 2.2.1. any injury wilfully self-inflicted by the *Life Insured* (whether sane or insane);
 - 2.2.2. any intentional violation of criminal law
 - 2.2.3. alcoholism, wilful inhalation of gas or taking poison or drugs unless this is in accordance with a prescription specified for the *Life Insured's* use by a qualified *Medical Practitioner* for the treatment of a current ailment.
 - 2.2.4. the *Life Insured* engaging in aviation other than air travel which shall mean mounting into, travelling in or dismounting from any fully licensed passenger-carrying aircraft as a passenger, but not as a member of the crew for the purpose of engaging in any trade or technical operation;
 - 2.2.5. war, invasion, act of foreign enemy, hostilities (whether war be declared or not);
 - 2.2.6. active participation in civil war, rebellion, revolution, insurrection, terrorist activity, military or usurped power, riot or civil commotion;
 - 2.2.7. active participation in horse racing, motor car or motor cycle racing or pace-making, any speed contest or trial, polo, mountaineering (necessitating the use of ropes or guides), pot-holing, hang-gliding, scuba-diving or any underwater activity requiring the use of artificial breathing apparatus; or any other form of sport or occupation that *Alliance Life* considers to be dangerous.
 - 2.2.8. employment underground in a mine;
 - 2.2.9. radio-activity or nuclear explosion



HC



IMPEX INSURANCE BROKERS LIMITED

Panyotou Building, Simu/Jamhuri Street
(Motor, Fire, Miscellaneous, Marine & Accident)

P. O. Box 1654
Dar es Salaam, Tanzania
Tel: 2122119 / 2137296
2136519
Fax: 2131044
E-mail: sadick@insurancetz.com

DEBIT NOTE

M/S. DaresSalaamIndependentSchool
P.O.Box 32391
Dar es Salaam
Tanzania
Cover Note:
Policy No: New
Certificate No:

No: 21312308
Date: 02/12/13

File No: NOV1081
Expiry Date: 30/11/14

Description	Amount
Type of Cover : 5YearRenewableLevelTermAssuran	US\$ 29827.00