



## PROGRAM OF COMPREHENSIVE VOLUNTARY PROPERTY INSURANCE AGAINST DAMAGE AND CIVIL LIABILITY FOR HARM TO THIRD PARTIES FOR INDIVIDUALS "QUICK REPAIR"

Insurance Class:	Section No1: Voluntary Property Damage Insurance. Section No2: Voluntary Insurance of Civil Liability.
Policyholder:	An individual who is the owner of the insured property on the right of ownership, lease or other legal grounds.
Insured:	An insurant, members of his family or a tenant (subtenant) permanently or temporarily owning or using the property.
Beneficiary:	Section 1: Insured. Under Section 2: Owner whose property has been damaged through the fault of the Insured (Insured).
Object of insurance:	Section No1: Property interests of the Insured (Insured) related to the possession, use, disposal of property (Premises), as a result of its damage, destruction or loss.  Section No2: Property interests of the Insured (Insured) related to his obligation, established by the civil legislation of the Republic of Kazakhstan, to compensate for damage caused to the property of third parties as a result of possession, use and disposal of the insured property.
Insurance restrictions:	In terms of real estate:  The following are accepted for insurance:  ✓ Individual residential house, apartment, no later than 1955.  The following are not accepted for insurance:  ✓ property related to non-residential premises, with the exception of household and other buildings related to individual residential premises;  ✓ houses, apartments used as commercial real estate;  ✓ adobe/wooden and frame-reed houses, apartments;  ✓ real estate recognized as deteriorated;  ✓ houses, apartments subject to reconstruction, demolition or major repairs;  ✓ houses, apartments in which repair work is being carried out at the time of the conclusion of the insurance contract.  In terms of insurance for Sections No1 and No2:  Under the program, it is allowed to insure Section No1 and Section No2 and Section No1 separately, separate insurance of Section No2 is not allowed.
Subject of insurance:	<ol> <li>Section No1: Property consisting of the following facilities:         <ol> <li>Interior and exterior decoration of the Insured Property (floor, ceiling, walls, doors, windows, glazing of balconies and loggias); communications (ventilation, air conditioning and heating systems, plumbing and engineering equipment);</li> <li>Household items located in the room at the time of the insured event (household appliances, office equipment, furniture, carpets, curtains, etc.).</li> </ol> </li> <li>Section No2: Civil liability of the Insured (Insured) to third parties whose property was damaged as a result of operation:         <ol> <li>Interior and exterior decoration of the premises (floor, ceiling, walls, doors, windows, glazing of balconies and loggias); communications (ventilation, air conditioning and heating systems, plumbing and engineering equipment);</li> <li>Household items located in the room at the time of the insured event (household appliances, office equipment, furniture, equipment, carpets, curtains, etc.).</li> </ol> </li> </ol>
Insured event:	Section No1: Damage or loss (destruction) of the insured property as a result of the following events:  ✓ Fire - uncontrolled burning that creates a threat, causing material damage, including damage caused by fire extinguishing measures, exposure to smoke, explosion, lightning strike;  ✓ Natural disaster – hurricane/storm caused by weather conditions movement of air masses with a wind force corresponding to 8 points on the Beaufort scale – wind speed of more than 60 km/h, hail, flood, mudflow, landslide, rock collapse, flood, release of subsoil water;  ✓ Flooding with water from water supply, sewerage and heating systems;  ✓ Illegal actions of third parties, except for forms of theft not specified below;  ✓ Burglary, robbery, robbery - the insurance does not cover theft without burglary and other types of theft, incl. misappropriation/embezzlement, fraud;

Falls of manned flying objects.

**Section No2:** The fact of the occurrence of civil liability of the Insured (Insured) for damage to residential real estate located in the residential premises adjacent to the residential premises

	charified in the Delicy and belonging to third parties, which accurred during the energtion of the
	specified in the Policy and belonging to third parties, which occurred during the operation of the residential premises due to reasons beyond the control of the Insured, family members living
	with him/her, namely:
	✓ Fire - uncontrolled burning that creates a threat, causing material damage, including
	damage caused by fire extinguishing measures, exposure to smoke, explosion, lightning
	strike;  Flooding with water from plumbing, sewerage and heating systems.
	✓ Flooding with water from plumbing, sewerage and heating systems.  The sum insured is determined in accordance with Appendix 1 to the Insurance Program.
Insurance amount, insurance premium and tariff from the insured amount:	The insurance rate is approved by the decision of the Insurer's authorized body, within the
	framework of the tariff by class: property damage insurance (0.01%-10.53%), civil liability
	insurance (0.0084%-51.0928%) and is established in accordance with Appendix No1 to the
	Insurance Program.
Procedure and terms of	The insurance premium is paid by the Insured in a lump sum in cash/non-cash payment on the
payment of the insurance premium:	day of conclusion of the Policy to the bank account or to the cash desk of the Insurer.
Franchise:	Approved by the decision of the authorized body of the Insurer.
Transmise.	It is paid to the Beneficiary in the amount of actual damage, but not higher than the insurance
	amount established in the Policy for each section.
Insurance payment:	The insurance payment is made according to the assessment of an independent appraiser, taking
msurance payment.	into account depreciation and deductible established by the Policy.
	When calculating the insurance payment, the proportion to the actual value of the property is
	not applied.  The insurance payment is made to the Beneficiary in the amount of actual damage, but not
	higher than the insurance amount established in the Policy for each section.
	Section No1:
	1. The amount of actual damage caused as a result of an insured event is determined on
	the basis of a written assessment report drawn up by an appraiser recommended by
	the Insurer, taking into account depreciation as of the date of occurrence of the insured event. In case of disagreement with the assessment report of an independent appraiser,
	payment for a re-assessment of damage is made by the initiating Party of the Policy.
	2. The cost of restoration of damaged property is calculated based on market prices
	effective on the day of the insured event.
	3. The insurance payment for Section No 1 is made minus the amounts received as
	compensation for this damage from third parties in the event that the insured event
	occurred through their fault.  4. If the damage does not exceed the amount of the unconditional deductible, the Insurer
	is exempt from making the insurance payment. If the damage exceeds the amount of
	the unconditional deductible, then when determining the amount of insurance
	payment, the franchise is deducted from the amount of damage.
Procedure and conditions for	<b>5.</b> The insured does not have the right to refuse the property remaining after the insured event, although damaged.
making an insurance	6. In case of double property insurance (insurance of the same insured object with several
payment:	insurers under independent contracts with each), each insurer is liable to the Insured
	within the limits of the contract concluded with him, but the total amount of insurance
	payments received by the Insured from all insurers cannot exceed the actual damage.
	Section No2: 7. The amount of damage caused by damage to property is determined based on the
	calculation of the cost of restoration of the damaged property minus the accrued
	depreciation (depreciation) of the property that occurred before the occurrence of the
	insured event.
	8. The cost of restoration of damaged property is calculated based on market prices
	effective on the day of the insured event.  9. The amount of actual damage caused as a result of an insured event shall be determined
	on the basis of a written assessment report drawn up by an appraiser recommended by
	the Insurer. In case of disagreement with the independent appraiser's assessment
	report, the payment for the re-assessment of damage shall be made by the initiating
	Party of the Policy.  10. In case of excess of the amount of damage over the amount of the insurance amount,
	the insurance payment is made no more than the insurance amount established by the
	Policy.

11. If the insured event caused damage to two or more victims, then the insurance payment to each victim is made in proportion to the degree of damage caused to his property, but not more than the insurance amount

## Section No1:

- 1. In order for the Insurer to make a decision on the insurance payment, the Insured (Insured) shall be obliged to provide the Insurer with the following documents on the risk of damage or loss of the insured property:
- 1) application for an insured event;
- 2) a copy of this Policy or its duplicate in case of its loss;
- 3) copies of documents confirming the right of possession of the insured real estate;
- 4) an assessment report to determine the amount of damage caused to the property, carried out by an appraiser, while the costs of the assessment are borne by the Insured/Beneficiary;
- 5) photo and video of the incident;
- 6) copies of documents confirming the value of the damaged movable property (if any);
- 7) a claim for insurance payment from the Beneficiary indicating the details for the transfer;
- 8) originals or copies of the relevant documents of the competent authorities certified by authorized persons confirming the occurrence of the event:
- ✓ In case of flooding with water from water supply, sewerage and heating systems:
- 1) POA report or other authorized organization, drawn up and signed by all participants in the inspection of the crime scene;
- ✓ In case of fire, explosion:
- 1) fire report;
- 2) act of fire technical expertise;
- 3) an application to the internal affairs authorities on the fact of fire/explosion, a protocol on the inspection of the scene of the incident, a decision to initiate a criminal case, a decision to suspend proceedings in a criminal case and/or a decision to involve as an accused);
- 4) a procedural document that has entered into force (a judicial act issued by a court of the Republic of Kazakhstan), which is the final decision on the case (if any).
- √ in case of natural disasters, including lightning strikes, as well as in case of collision or fall
  of manned flying objects, their parts or cargo transported on these objects:
- 1) acts, conclusions, documents drawn up by the territorial services of Kazhydromet, emergency departments, state commissions and other state bodies authorized to investigate the event.
- ✓ In case of burglary, robbery and robbery, illegal actions of third parties:
- 1) a statement to the internal affairs authorities on the fact of the incident;
- 2) the protocol of the inspection of the scene of the incident;
- 3) a decision to initiate a criminal case (administrative proceedings);
- 4) a decision on recognition as a victim in the case;
- 5) a decision to involve a person as a suspect or accused person (if any);
- 6) a procedural document that determines the outcome of the case: a decision on refusal, suspension or indictment, a court verdict that has entered into legal force.
- 2. Documents of the competent authorities must be submitted in original, or copies certified by the seal and signature of the responsible person of the competent authority that issued this document.
- **3.** Acceptance of documents on the claimed insured event shall be formalized by the Insurer by issuing a certificate of submitted/notification of non-submitted documents indicating the full list of submitted documents and the date of their acceptance. The list and number of documents may be reduced at the discretion of the Insurer
- **4.** When requesting the insurance payment, the Insured/Beneficiary is obliged to document:
  - ✓ the fact of occurrence of an insured event;
  - ✓ the amount of loss.
- **5.** The obligation to collect and provide documents, as well as the costs of proving the amount of damage caused, lies with the Insured/Beneficiary.
- **6.** If the Insured or other person who is the Beneficiary fails to submit all the documents provided for in the Policy, the Insurer is obliged to notify them in writing of the missing documents within 10 (ten) business days.

## **Section No2:**

- 1. In order for the Insurer to make a decision on the insurance payment, the Insured/Beneficiary shall provide the Insurer with the following documents:
- 1) copies of identity documents of the victims;
- 2) copies of documents confirming the ownership of the property that was damaged as a result of the occurrence of an insured event;
- 3) an appraisal report to determine the amount of damage caused to the property, carried out by an appraiser, while the costs of the assessment are borne by the Insured/Beneficiary;

## List of documents required to make an insurance payment

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	<ul> <li>4) a claim for insurance payment from the Beneficiary indicating the details for the transfer;</li> <li>5) originals or copies of the relevant documents of the competent authorities (documents of internal affairs bodies, prosecutor's office, investigation, inquiry, judicial authorities, etc.) certified by authorized persons, confirming the occurrence of the insured event, the damage caused, identifying the persons guilty of causing damage:</li> <li>6) a court decision that has entered into legal force, if the dispute was resolved in court;</li> <li>✓ In case of flooding with water from water supply, sewerage and heating systems:</li> <li>1) a POA report or another authorized organization, drawn up and signed by all participants in the inspection of the crime scene.</li> <li>✓ In case of fire, explosion:</li> <li>1) fire report;</li> <li>2) act of fire technical expertise;</li> <li>3) an application to the internal affairs authorities on the fact of fire/explosion, a protocol on the inspection of the scene of the incident, a decision to initiate a criminal case, a decision to suspend proceedings in a criminal case and/or a decision to involve as an accused);</li> <li>4) a procedural document that has entered into force (a judicial act issued by a court of the Republic of Kazakhstan), which is the final decision on the case (if any).</li> <li>The insurer has the right to reduce the above list of documents.</li> </ul>
Information about the	The program provides for the issuance of Policies through the partners of Basel Insurance
insurance agent/broker:	Company JSC.
Insurance area:	The Republic of Kazakhstan, the location of the property (the exact address is indicated).
Validity period of the Policy:	The policy comes into force on the 3rd day following the day of payment of the insurance premium and is valid depending on the selected period (1 month, 3 months, 6 months, 12 months) or until the first insured event, whichever occurs first.
Form of conclusion of the Policy:	The policy is issued by issuing it on paper or in electronic form.
Form of the Application Form:	The application form may be filled out, formed and submitted by drawing it up on paper or in electronic form by exchanging electronic information resources between the Insured and the Insurer.
The amount of the agent's fee in % gross:	Approved by the decision of the authorized body of the Insurer.
Additional conditions:	<ol> <li>Everything that is not covered by this Insurance Program is governed by the Rules of Property Damage Insurance and the Rules of Civil Liability Insurance.</li> <li>The insurance program provides for changes in the name of the insurance product within the framework of these terms and conditions for advertising and marketing purposes. The property is accepted for insurance without inspection.</li> <li>Early termination of the Policy at the initiative of the Insured is made only if there is a written application of the Insured.</li> <li>The calculation of the part of the premium to be returned to the Insured is made from the next day from the date of submission of the application for termination of the Policy to the Insurer. The refund of the insurance premium is made within 5 (five) business days after the submission of all the necessary documents confirming the reason for termination of the Policy.</li> <li>The Insurer shall return to the Insurant-individual a part of the insurance premium from the date of submission to the Insurer of an application for early termination of the Policy if the Policy is terminated at the initiative of the Insured-individual within 14 days from the date of its conclusion.</li> <li>If the Policy is terminated at the initiative of the Insured, except for clause 5, the Insurer shall return to the Insured a part of the insurance premium from the date of submission to the Insurer of the application for early termination of the Agreement and the insurance premium withheld by the Insurer according to the following formula:</li></ol>