222 Atholl Street
Highlands North, 2192
P.O Box 9117, Edenglen 1613
011 440 1975
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Personal Lines Quote Requirements

We thank you for the opportunity to quote on your insurance.
Please can you provide us with the following information to obtain quotes for you.
It is always advisable to rather send your current policy schedule and claims history to us, then we can only request the missing portion of information from you instead of you completing all the information below. A current schedule always gives us better opportunity to do competitive quotes and to also get better rates and cover. However, if you do not have current insurance you need to provide all this required information.
The Personal Details, Current & Previous Insurance, Disclosure, Declaration fields will always be compulsory and then complete the relevant sections only that you want quoted.

PERSONAL DETAILS

Title | Full names

Surname | ID No.

If NO ID, Passport No. & Date Of Birth | D D M M Y Y

Are you a South African citizen? ☐ Yes ☐ No

If NO, which country are you a citizen of?

Occupation | Nature of business or industry

Cell No. | Email

Residential address

Street name & number

Complex / Estate name & number

Suburb | Postal code

CO-INSURED

Full names & surname

ID No. | Relation to insured

Should the above be a Trust, please provide details of the trustees as well as the Trust name and number

Should the above be a company, please provide company name, company registration number & VAT number. Please confirm if you are the sole owner of the company

CURRENT & PREVIOUS INSURANCE HISTORY

Have you been insured in the past 5 years? ☐ Yes ☐ No

If YES, please provide detailed information on where and the period insured (whether insured in your own name or that of a spouse/parent where you were noted as a co-insured or regular driver on the vehicle).

Have you suffered any losses or damages in the last 3 years, whether you were insured or not? ☐ Yes ☐ No

Detailed claims history for the past 5 years, including a short description of each claim, the date, and the amount of claims is required (all losses whether insured or not).

Date of loss	Insurer	Description of loss	If it is a motor claim, please provide driver's name at the time of loss	Value of claim in rands

DISCLOSURE OF MATERIAL INFORMATION

Please ensure that the information you provided to us is true and accurate, as any discrepancies in the information may influence your claim.

Has any insurer ever refused any proposal of yours, cancelled any policy (or section thereof), refused to renew any policy (or section thereof), or imposed any special conditions? ☐ Yes ☐ No

If YES, please provide detailed information below

BUILDINGS

Your building value should not be based on the amount you bought the house for, nor the municipal value, but on the full replacement building costs.

Full physical address of property to be insured

Street name & number

Complex / Estate name & number

Suburb Postal code

Total sum amount that needs to be insured

Please complete the risk and security questionnaire at the back of the form regarding your home.

OPTIONAL COVER

Accidental damage cover to fixed machinery	☐	Yes	☐	No	R
Power Surge cover	☐	Yes	☐	No	R
Maintenance of geysers limits avaliable - R5 000 / R10 000 / R15 000 / R20 000	☐	Yes	☐	No	R

HOME CONTENTS

Your contents value is calculated at the total replacement value of everything you take with you the day you move. This includes furniture, appliances, ornaments, paintings, loose carpets, cutlery, groceries, clothing, etc.

Full physical address of property to be insured (where goods are kept overnight)

Street name & number

Complex / Estate name & number

Suburb

Postal code

Total sum amount that needs to be insured

Please complete the risk and security questionnaire at the back of the form regarding your home.

OPTIONAL COVER

Accidental damage cover	☐	Yes	☐	No	R
Power Surge cover	☐	Yes	☐	No	R
Mechanical and electrical breakdown cover	☐	Yes	☐	No	R

ALL RISKS

UNSPECIFIED ALL RISKS

This is to cover items designed normally to be worn on you as a person, personal effects away from home. This will also cover things like your handbag, clothing bags, luggage, etc. However, note that certain items MUST be specified to enjoy coverage, as listed below.

Unspecified All Risks cover	☐	Yes	☐	No	R

SPECIFIED ALL RISKS

Items taken away from home, which are not specified, will not enjoy coverage.

- Items such as cellphones, tablets, jewelry, laptops, sports equipment, iPads, portable GPS devices, and any handheld electronic equipment, photographic equipment, etc.
- Please note that cellphones and laptops must be specified at all times and are not covered under household contents.

Specified items MUST be listed individually with descriptions and replacement values.

Description	Sum insured

VEHICLES

Motor/Motorcycles	Vehicle 1	Vehicle 2
Year of manufacture		
Make		
Model		
M&M code preferably (attach the OTP or purchase invoice)		
Registration number		
VIN number		
Engine Number		
Colour of vehicle		
Value of vehicle		
Are there any extras fitted to the vehicle post-manufacturing that increased its value, such as a tow bar, smash and grab protection, etc.?	☐ Yes ☐ No	☐ Yes ☐ No
• If YES, please list item description & value		
Registered Owner		
• Full names & surname		
• ID Number		
Regular Driver		
• Full names & Surname		
• ID Number		
• Email Address		
• Cellphone Number		
• Occupation		

• Date of driver's license first issue (dd/mm/yyyy)		
• Code of driver's license obtained (B, EB - A, A1, C, C1, EC, EC1)		
• Marital Status		
• Relation to insured (if different driver than the insured)		
• Use of vehicle private to & from work / business use (please give details of occupation if business use)		
Is there a tracking device installed?	☐ Yes ☐ No	☐ Yes ☐ No
• If YES, please note make and model		
Physical address where vehicle is kept overnight		
Overnight parking (locked garage, carport, behind locked gates, in the open)		
Physical address where vehicle is kept during the day (at workplace)		
Parking during the day (locked garage, carport, behind locked gates, in the open, access controlled with or without security guards)		
Optional extra cover		
Car hire (in the event of a claim)	☐ Yes ☐ No	☐ Yes ☐ No
• If YES, standard vehicle, or do you want "like for like" or luxury vehicle hire		
Credit shortfall		
• Do you have finance on the vehicle?	☐ Yes ☐ No	☐ Yes ☐ No
• If YES, please confirm with who for interest to be noted		
• If YES, was the above vehicle bought with or without residual?	☐ With ☐ Without	☐ With ☐ Without
• If WITH, what % residual was taken?		

CARAVAN / TRAILERS

Caravan/Trailer	Vehicle 1	Vehicle 2
Year of manufacture		
Make		

M&M code preferably (attach the OTP or purchase invoice)		
Registration number		
VIN number		
Value of vehicle		
Are there any extras fitted to the vehicle post-manufacturing that increased its value, such as a tow bar, smash and grab protection, etc.?	☐ Yes ☐ No	☐ Yes ☐ No
• If YES, please list item description & value		
Registered Owner		
• Full names & surname		
• ID Number		
Use of vehicle private to & from work / business use (please give details of occupation if business use)		
Physical address where vehicle is kept overnight		
Overnight parking (locked garage, carport, behind locked gates, in the open)		
Credit shortfall		
Do you have finance on the vehicle?	☐ Yes ☐ No	☐ Yes ☐ No
• If YES, please confirm with who for interest to be noted		
• If YES, was the above vehicle bought with or without residual?	☐ With ☐ Without	☐ With ☐ Without
• If WITH, what % residual was taken?		

WATERCRAFT

Examples: Motorboat, Canoe, Kayak, Sailboat, Wetbike, Jetski, Inflatable boat, Yacht

Should you want to insure any of the above, please advise in order for us to request the required information from you. This can be insured on a personal policy; however, we do have a specialised coverage option through our Marine department.

Comments

DECLARATION

I hereby declare that all particulars and answers provided herein are true and complete in every respect and that no material facts are withheld

I am aware that this document will form part of my insurance contract and that any important omission or misrepresentation may lead to a claim being rejected and cancellation of the coverage.

We respect the confidentiality of our client's information and abide by confidentiality principles. By making use of this document, you confirm that you give us the necessary consent to collect, share, and process your personal information. Kindly note that we may be required to share your personal information with our service providers, who are bound by the same principles. We may further request and disclose this information relating to your claims, insurance, and financial history with our other insurers, government bodies, and credit bureaus.
This is applicable to anyone who will be covered under this insurance policy for the duration that the policy is active.

Date

Signature

Broker Name - Select One -

ADDITIONAL COMMENTS

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Risk & Security Questionnaire

PERSONAL DETAILS

Name & Surname

Street name & number

Complex / Estate name & number

Suburb / Town

Postal code

Cell No.

Email

Signed

Date

TYPE OF RESIDENCE

- ☐ Main dwelling / residential detached house
- ☐ Cottage (garden)
- ☐ Farm
- ☐ Plot / small holding
- ☐ Game lodge
- ☐ Security complex / high security village / estate
- ☐ Caravan park
- ☐ Storage facility
- ☐ Flat / apartment
- ☐ Retirement village

If flat / town house / cluster / apartment

- ☐ Ground floor
- ☐ First floor
- ☐ Above ground floor (state floor No.)

LOCALITY

- ☐ Established residential area (not enclosed)
- ☐ Gated village / boom access controlled area
- ☐ Near open field (within 200m)
- ☐ Industrial area
- ☐ Agricultural holding

OCCUPANCY

- ☐ Not occupied during working hours
- ☐ Occupied 24 hours per day / always
- ☐ Occupied during working hours (by whom)
- ☐ Unoccupied LESS than 60 days
- ☐ Unoccupied MORE than 60 days
- ☐ If unoccupied, reason

USE OF PREMISES

- ☐ Private residential home
- ☐ Commune
- ☐ Holiday home
- ☐ Farming
- ☐ Business from home (if YES - confirm type)

ROOF TYPE

- ☐ Flat roof
- ☐ Pitched roof

ROOF CONSTRUCTION

Standard

- ☐ Tiles
- ☐ Harvey tiles
- ☐ Corrugated iron
- ☐ Chromedek
- ☐ Concrete
- ☐ Shingles

Non Standard

- ☐ Wood
- ☐ Asbestos
- ☐ Thatch (please complete Addendum A as well)

WALL CONSTRUCTION

Standard

- ☐ Brick
- ☐ Concrete
- ☐ Stone

Non Standard

- ☐ Wood
- ☐ Precast
- ☐ Shingles
- ☐ Asbestos
- ☐ Corrugated iron
- ☐ Other (please specify) _____

GENERAL INFORMATION

Owner or tenant of property _____

Standard / conventional geyser	☐ Yes	☐ No
Solar geyser	☐ Yes	☐ No
Solar system	☐ Yes	☐ No
Value	_____	
Inverters	☐ Yes	☐ No
Value	_____	
How many geysers on the property?	_____	
Are they inside or outside?	_____	
Surge arrestors/surge protector	☐ Yes	☐ No
Lightning conductor	☐ Yes	☐ No

Smoke detectors	☐ Yes	☐ No
Thatched structure/lapa located on property attached to the main residence and/or within 5m of the building?	☐ Yes	☐ No
If YES, please specify	_____	
Fire retardant/treated	☐ Yes	☐ No
Fire extinguisher	☐ Yes	☐ No
Swimming pool	☐ Yes	☐ No
Is the property within 100m from any water - dam/lagoon/river/sea natural or man-made?	☐ Yes	☐ No

SECURITY PERIMETER

If you live in a complex/estate this applies to your complex/estate

- ☐ Residence perimeter wall of brick/palisades/vibracrete
- ☐ Outer perimeter wall of brick/palisades/vibracrete
- ☐ Electric fence NOT linked
- ☐ Electric fence linked with NO armed response
- ☐ Electric fence linked WITH armed response
- ☐ Remote access control
- ☐ Guarded access control 24 hours
- ☐ Guards patrolling 24 hours
- ☐ Guards patrolling with armed response 24 hours
- ☐ Gated village/boom control
- ☐ Neighbourhood watch (active)

SECURITY PERIMETER

If you live in a complex this applies to your unit

- ☐ Burglar bars all opening windows
- ☐ Burglar bars all windows
- ☐ Shutters/transparent burglar bar proofing
- ☐ Security gates all exterior doors (excluding swivel/pivot doors)
- ☐ Security gates all exterior doors (excluding sliding doors)
- ☐ Security gates all exterior doors
- ☐ Additional pin locks on sliding doors
- ☐ Alarm NOT linked
- ☐ Linked alarm with no armed response
- ☐ Linked alarm with armed response
- ☐ CCTV cameras inside
- ☐ CCTV cameras outside
- ☐ Laser beams/passives outside

SECURITY INFORMATION

Flats / Townhouses extra above ground

- ☐ Bulgar bars on passage side
- ☐ Bulgar bars on balcony side
- ☐ Security gates on passage side
- ☐ Security gates on balcony side

THATCH QUESTIONNAIRE - ADDENDUM A

To be completed ONLY <u>if your main residence</u> is thatch OR if you have a thatched structure <u>attached or within 5 metres</u> of your main building.

=< - lesser or equal to | => - greater or equal to | < - lesser than | > - greater than

LOCATION/SIZE	
Total roof surface size of this thatch roof	☐ =<250m² ☐ >250m²
LAPA or OUTBUILDING (thatch construction)	
Attached to main residence?	☐ Yes ☐ No
Distance of this thatch structure from the main structure (if not attached to main residence)	☐ = < 4m ☐ > 4m
Roof surface size of this thatch roof in relation to the total roof surface size	☐ = < 15% ☐ > 15%
Total square meterage covered by thatch roof	☐ = < 50m² ☐ > 50m² = < 250m²
THATCH INFORMATION	
Thatch roof last maintained, combed or replaced within the last 5 years?	☐ Yes ☐ No
Ridge plate	☐ Cement ☐ Fibreglass ☐ Metal ☐ Thatch
Do you use LP gas inside this residence?	☐ Yes ☐ No
Is LP gas bottle inside > 19kg	☐ Yes ☐ No
THATCH PROTECTION	
Fire blanket on the entire thatch roof	☐ Yes ☐ No
Drencher system	☐ Yes ☐ No
Sprinkler system	☐ Yes ☐ No
Brick chimneys through thatch roof	☐ Yes ☐ No
Spark arrestors inside chimney	☐ Yes ☐ No
Metal chimney through thatch roof	☐ Yes ☐ No
Flash plate between chimney and roof	☐ Yes ☐ No
SABS compliant lightning conductor	☐ Yes ☐ No
FIRE EQUIPMENT	
Fire hose	☐ Yes ☐ No

DOLOMITE QUESTIONNAIRE - ADDENDUM B

To be completed ONLY if your residence is in or around Laudium, Centurion, Eldoraigne, Raslouw, Wierdapark and their immediate surrounding areas.

NOTE: ALL ANSWERS MUST BE COMPLETED TO ENABLE US TO ASSESS THE RISK

1. Has the property or neighbouring properties ever experienced areas of soil subsiding (sagging paving or soil)?

☐ Yes ☐ No

2. Do you know of a historic sinkhole in your suburb?

☐ Yes ☐ No

3. Does the property have any issues with standing water during heavy rainfall?

☐ Yes ☐ No

4. Does the building have sufficient guttering that will divert water away from the foundation of the property?

☐ Yes ☐ No

5. Has there ever been a leaking water supply pipe, irrigation pipe or sewer around or close to the property?

☐ Yes ☐ No

6. Does the property have a swimming pool?

☐ Yes ☐ No

IF QUESTION 6 WAS ANSWERED YES, A RESPONSE TO QUESTIONS 6A AND 6B IS COMPULSORY.

6a. Has the swimming pool ever leaked due to a crack or for any other reason?

☐ Yes ☐ No

6b. Please indicate where the pool waste outlet is located (for example, into the street or municipal stormwater drain or onto an open piece of land/garden).

☐ Yes ☐ No

Please specify

☐ Garden ☐ Stormwater drain ☐ Street

If the answer to above is **Garden**, please describe the location, share imagery and provide coordinates indicating the location of the pool waste outlet:

Coordinates	

If none of the above options describe the waste outlet location, please describe the location, share imagery and provide coordinates indicating the location of the outlet:

Coordinates	