

SME BROADFORM LIABILITY

Cover is only available to SME businesses with annual turnover up to R10,000,000.

NOTE: A COMPREHENSIVE PROPOSAL MUST BE COMPLETED FOR BUSINESSES OUTSIDE THE ABOVE CRITERIA

(CLAIMS MADE BASIS)

1. **Name of Firm** (Your legal entity - please be accurate - to be used on your policy contract)

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2. **Postal Address**

3. **Physical Address of Principal Firm/Office**

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4. **Phone Number**..... **E-mail address**

5. **Registration Numbers (a) Firm** **(b) VAT**

6. **Date of Commencement of Firm**

7. **Website Address**

8. **Business activities/description** (please be accurate – your policy contract is based on this information)

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9. **Products Liability**

- (a) List of Product types **manufactured, produced, supplied or distributed** and to which this insurance is to apply.
(b) List the Countries outside South Africa to which your Products are exported to.

(a) List of Product types	% of Total Turnover	Date first marketed	(b) Countries: Exported to

Defective Workmanship Liability

Do you require cover in respect of Products **installed, treated, serviced, altered**, YES/NO **repaired or worked upon** by you or on your behalf?

If YES, please give full details and provide the estimated annual turnover from each such activity

10. Please provide your audited or equivalent figures (**excluding VAT**) as at your last three financial year ends.

PERIOD FROM	PERIOD TO	TURNOVER (excluding USA/Canada)
		R
		R
		R
ESTIMATED TURNOVER NEXT 12 MONTHS		R

11. Have you during the past 5 years had a claim made against you?
If yes, please provide full details.

YES / NO

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12. Please select required the required limit of Indemnity (minimum R1,000,000, but maximum R10,000,000)
Kindly note that all options are inclusive of costs and expenses.

R1,000,000

☐

R2,500,000

☐

R5,000,000

☐

R10,000,000

☐

Sub-limited extensions included in the cover

Care, Custody and Control – R250,000, Claims Preparation costs – R1,000,000,
Data and Information Costs (previously Loss of Documents) – R250,000, Defamation and Wrongful Arrest – R1,000,000,
Incidental Medmal – R500,000, Pollution – R1,000,000, Spread of Fire – R1,000,000 and
Statutory Defence costs – R1,000,000

YOUR DECLARATION

13. I/we hereby declare that the above statements and particulars are true and complete and that at the present time, other than as stated above, I/we have no reason to anticipate any claim being brought against me/us that would constitute a claim under the insurance now being requested.

I/we agree that this proposal and declaration, together with any other material information supplied by me/us shall be the basis of the contract between me/us and Insurers. I/we undertake to inform Insurers at all times of any material changes to the risk including material changes between the date of signing this Proposal Form and the date of acceptance of the risk or the date of commencement of the Policy whichever occurs last.

I/we acknowledge that, for the purposes of dealing with this proposal, it will be necessary to process our private information, including making that information available to our associated parties, insurers or reinsurers. In addition, I/we consent to the transfer of that information to the reinsurers, even if those reinsurers are situated outside the Republic of South Africa, for use in connection with this proposal and any related reinsurance matters.

Authorised signatory of the Proposer

Full name of signatory

Position in Firm

Date