

Chartis Management Liability Insurance Short Application Form - INSTAQUOTE

SA Jun. 2011

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| Policyholder: | | | | | | |
| Address: | | | | | | |
| Total Gross Assets: | ZAR | | | | | |
| STEP 1: Based on the Gross Assets of the Insured for the Latest Financial Year Please Tick (✓) the box that indicates the Premium for the limit of Liability required. | | | | | | |
| All figures in ZAR | Limit of Liability (Each and Every Claim / In the Annual Aggregate) | | | Premium | | |
| | R5,000,000 | | | | R10,000,000 | |
| | R15,000,000 | | | | R15,000,000 | |
| | Annual Premium | | | | Annual Premium | |
| | Annual Premium | | | | Annual Premium | |
| Gross Assets | | | | | | |
| R1m - R75m | R4,680 | <input type="checkbox"/> | R7,550 | <input type="checkbox"/> | R11,700 | <input type="checkbox"/> |
| R76m - R150m | R5,195 | <input type="checkbox"/> | R8,665 | <input type="checkbox"/> | R13,000 | <input type="checkbox"/> |
| R151m - R250m | R5,460 | <input type="checkbox"/> | R9,120 | <input type="checkbox"/> | R13,680 | <input type="checkbox"/> |
| Premium payment will be: | ANNUALLY | <input type="checkbox"/> | MONTHLY - 10 Equal Instalments | <input type="checkbox"/> | | |
| Premiums quoted are Annual Premiums and include 14% VAT and 20% Broker Commission Limits of Liability include VAT | | | | | | |
| (Note: If the Gross Asset value exceeds R 250m or a Limit greater than R15m is required, please complete the standard Management Liability Insurance Proposal Form. Upon receipt of the Proposal form, the Underwriters will assess the application and revert with terms). | | | | | | |

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| STEP2: Confirmation of the Insured's status | |
| I / We confirm that: | |
| 1) The insured is domiciled in SOUTH AFRICA | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 2) The Insured is NOT publicly listed on any Stock Exchange (JSE or other) | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 3) Has the Insured been in CONTINUOUS OPERATION FOR AT LEAST 3 YEARS | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 4) The Insured is NOT a Financial Institution, a Pharmaceutical or Bio- Technology company | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 5) After enquiry, there has been NO claim made against the Company or any past or present director or officer of the company or any of its subsidiaries and the Insured is NOT aware of any circumstances or incidents that may give raise to claim. | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| (Note: If your answer is "NO" to any of the above, please complete the standard "Management Liability Proposal Form" Upon receipt of this Proposal Form the Underwriters will assess the application and revert with terms). | |
| STEP3: Please answer the questions below | |
| 1) The Insured is in a TECHNICALLY SOLVENT position (i.e. current assets exceed current liabilities)? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 2) What Inception Date do you require the policy to commence on (the Policy Period will run for 12 months from this date)? Date: _____ | |
| (Note: If your answer is "NO" to (1) above, an Insolvency Exclusion will apply to the Policy Terms and Conditions). | |
| STEP4: Sign the Declaration | |
| I / We declare that the statements and the particulars in this application are true and that no material facts have been misstated, misrepresented after enquiry. I / We agree that this application, together with any other information supplied by me / us shall form the basis of the contract of insurance effected between the Insurer and me / us. I / We undertake to inform the Insurer of any material attention to those facts occurring before the completion of the contract of insurance. I / We confirm that I / We understand and accept the Conditions stated below. | |
| Signature: _____ | Date: _____ |
| Name and Title: _____ (Authorized signatory of the Company) | |

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| Conditions |
| 1) The policy wording applicable is the Chartis Management Liability NON - SEC and it is subject to the following additional variations: <ul style="list-style-type: none"> - North American Exclusion - Economic Sanctions Endorsement - General Professional Indemnity Exclusion - Secondary Offering and Prospects Exclusion - Insolvency Exclusion - should step 3 (1) be answered "NO" |
| 2) This quotation is valid for 30 days from the date the Declaration is signed or until the date specified in Step 3 (2), whichever is earliest. |
| 3) Confirmation of Cover will be provided only if this form is fully completed and received by Chartis SA within 10 business days of the inception Date stated in Step 3 (2) above; or prior to expiration of this quotation, whichever is earliest. |