Building Insurance Specialists

APPLICATION FOR INSURANCE

Broker Agency number

Name of Insured……..……...
Postal Address……Postal code……..…..
Tel. No……Fax No……E-mail……..……..……
VAT No…..……..……..……

Period of insurance: From……to……
Method of payment: Annually / Monthly debit order (please delete which is not applicable)

Risk Details (Please supply full details of the following)

Street Address……
……Postal code……
Construction Roof……Walls……
Occupation……

Please provide full details of the occupancy / tenancy of the building. If the application is in respect of a Body Corporate – please provide a copy of the participation quota schedule (P Q)

Sum Insured of Building: R……

NB. Please include all outbuildings, structures as well as common property

PREVIOUS INSURANCE

1. Have you ever had any insurance declined or any underwriting conditions or special excesses imposed? Yes No If "Yes", please supply the details on a separate sheet.
2. History of previous losses / claims. Please supply the details of all losses you sustained during the past three years, including all claims that were paid out and not paid out.

Type of loss	Year	Amount	Insurer
……	……..	……	……
……	……..	……	……
……	……..	……	……
……	……..	……	……

3. Name of previous insurer……

DEBIT ORDER AUTHORITY

Name of Account holder	
Name of Bank	
Branch	
Account number	
Account Type (cheque/savings/transmission)	
Branch clearance number	

I/We authorise Commercial and Industrial Acceptances (Pty) Ltd, on behalf of Compass Ins. Co. Ltd to draw on my/our account the amount of the premium payable and all such withdrawals shall be treated as though they had been signed by me/us personally.

…… ……
Signature of account holder Assisted by

DECLARATION

I/We hereby declare that the particulars and declarations in this respect are correct and complete and include all information known to me/us and which concern the risk to be insured, and that and any other written declaration made by or on behalf of me/us for the sake of the requested insurance will be the foundation of, and will be incorporated in, the agreement between the insured and Compass Insurance Company Ltd. and that it will be binding. It is further declared and understood that should this application be completed and signed by the broker/agent of the insured, the broker/agent will be considered to have been authorised by the insured to act as the insured's agent for the purpose of filling out the application.

…… …… or ……
Date Signature of applicant Signature of broker