

## PROPOSAL FORM

### RESIDENTS ASSOCIATIONS LIABILITY QUESTIONNAIRE

This Proposal Form, together with the information provided, has been compiled in such a manner as to provide the Underwriters with as much information as possible with regard to the evaluation of the risk and the insurance requirements of the Proposer as named herein. Completion of the Form does not bind the Proposer or the Underwriters to complete the insurance transaction.

To assist Underwriters in assessing liability for rating purposes, The Proposer is requested to answer all questions. Should there be insufficient space provided herein, please provide balance of information on additional pages.

**PLEASE NOTE THAT NO QUOTATION CAN BE PROVIDED UNLESS ALL QUESTIONS HAVE BEEN ANSWERED AND THIS PROPOSAL SIGNED, DATED AND INITIALLED ON ALL PAGES**

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Tradeforth 6 (Pty) Ltd trading as Abelard Underwriting Agency  
Reg No 1996/008912/07  
Manor House, 6 Conrad Drive, Blairgowrie, Johannesburg  
P.O. Box 2155 Pinegowrie 2193  
Tel +27 11 326-2951, Fax 0866 351 124 (Local) +27 326 2952 (Int)  
Web Site [www.aua.co.za](http://www.aua.co.za)  
Directors: D J C Cox (Managing), C E Diederiks, C P Norrington (British)

F.A.I.S Compliance Details  
FSP Licence Number: 28  
Compliance Practice: Intelligent Compliance and Education (Pty) Limited  
FSB Practice No. 554  
Compliance Officer: Peter Veal

Member of  
SAUMA



**RESIDENTS ASSOCIATIONS LIABILITY QUESTIONNAIRE**

- 1. Name of Full Legal Entity \_\_\_\_\_  
to be Insured: \_\_\_\_\_
  
- 2. Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
- 3. Please provide the Company:  
Registration Number \_\_\_\_\_ Vat Number \_\_\_\_\_
  
- 4. Telephone Number: \_\_\_\_\_ Fax No: \_\_\_\_\_
  
- 5. Number of Private Dwellings within the area under the control of the Association:  
Houses \_\_\_\_\_  
Townhouses/Clusters \_\_\_\_\_
  
- 6. (a) Do you employ a Professional Security Contractor?: Yes  No   
  
(b) If "Yes" (i) Name of Security Contractor \_\_\_\_\_  
  
(ii) Are Firearms used? Yes  No   
  
(iii) Has full recourse been retained? Yes  No
  
- 7. (a) Please provide details of all claims made against the Proposer, whether or not insured:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
  
(b) Is the Proposer aware, after enquiry, of any circumstances which may subsequently give rise to a claim or claims being made against them, whether or not insured?  
  
Yes  No   
  
If "Yes", please provide full details:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
- 8. Please indicate the Indemnity Limit required: R\_\_\_\_\_

9. Please provide the following documentation:

- (a) Copy of a map of the area under the control of the Association. Please outline the relevant area and indicate those access roads which have been closed and those which have Boom/Access Control
  
- (b) Copy of final permission from the relevant Authorities, including any requirements of such Authorities.

**DECLARATION AND SIGNATURE**

**The answers given above and in the attached Sections represent the true position to the best of my knowledge and belief and I agree that they shall form the basis of the contract of insurance proposed, should such contract be effected.**

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_

For and on behalf of the Proposer

Name of Authorised Signatory: \_\_\_\_\_

Position held: \_\_\_\_\_

Signed: \_\_\_\_\_

### **ENDORSEMENTS AND MEMORANDA**

Please note that the insurance provided will be subject to the following:-

- Endt 1. It shall be a condition precedent to the liability of the Underwriters to provide indemnity under this Certificate that the Assured shall at all times comply with all Statutory, Provincial and/or Municipal regulations governing the conduct of the Business.
- Endt 2. It shall be a condition precedent to the liability of the Underwriters to provide indemnity under this Certificate that the Assured shall at all times retain all rights of recourse against those providing any service to or on behalf of the Assured.
- Endt 3. It is understood and agreed that the indemnity granted by this Certificate excludes the personal liabilities of the Owners and/or Occupiers of the premises within the area which forms the subject of the insurance by this Certificate.
- Endt 4. It is understood and agreed that the indemnity granted by this Certificate excludes claims arising out of the ownership possession or use of firearms unless such claim arises from the employment by the Assured of professional Security Contractors and then subject to special Endorsement Endt 2 above.

Subject otherwise to the terms, Exclusions, Conditions and limitations of this Certificate