

PROPOSAL FORM

GENERAL PUBLIC LIABILITY & PRODUCTS LIABILITY

Please note:

Answer every question fully as incomplete answers can cause delays. If there is not enough space provided in this proposal form, attach an additional sheet and note the question number.

Disclose all material facts to underwriters. A 'material fact' shall be deemed to be one that would likely influence an underwriter's judgment and acceptance of your proposal.

Upon acceptance of the Underwriters terms and conditions and payment of the premium, all information provided by the Proposer will be deemed to be incorporated in the contract between Underwriters and the Insured.

Please submit with the Proposal any additional information, which will assist Underwriters in accessing the risk such as contract conditions, brochures etc.

Company Name			
Subsidiary Companies			
Principal Address of the Company			
Postal Address of the Company			
Telephone		Fax No.	
Name of Risk Manager		E-Mail Address	
Company Registration No.		VAT No.	
For how long has the Company been operating			



SPECIALIZED INSURANCE COMPANY LIMITED | Registration Number 50508

+266 2232 0837/ 8 | info@sic.co.ls | www.sic.co.ls

Address | 5th Floor, MGC Park, Corner Pope John Paul II & Mpilo Boulevard, Maseru, Lesotho, 100

Directors | Managing Executive, Mr M Lazaro | Non-Executive, Mrs F Khabo & Mr S Beeton | Chairman, Mr N Letele

Number of Employees	
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Provide a comprehensive description of all your activities (state clearly whether you manufacture, service, repair, retail, install, construct, maintain, distribute)

Please state your Turnover (Vat inclusive) for the past 4 years

Year		Budget (R)		Year		Budget (R)	
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Year		Budget (R)		Year		Budget (R)	
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Please state your budgeted for the fourth coming year (R)	
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Please detail territories to which you export, the Product concerned and the related percentage of turnover

Territory	Nature of Product	Percentage
		(%)
		(%)
		(%)
		(%)
		(%)

Are there any known or potential hazards associated with your Products or Activities? If "yes" provide detail of what the hazards are and what warnings are given to users to alert them of these hazards:	Yes		No	
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Does the Company have assets or operations outside of South Africa? If "yes" describe:	Yes		No	
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Are any of your products designed or manufactured to be included into other products? If "yes" what other products would these be?	Yes		No	
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Do you employ sub-contractors? If 'YES' describe what work is sub-contracted:	Yes		No	
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Do you retain rights of recourse retained against the sub contractor?	Yes		No	
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Do you use raw materials or components supplied by other parties in the manufacture of any of your products?	Yes		No	
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If 'YES' to the above, do you retain rights of recourse retained against the supplier?	Yes		No	
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How are you able to identify your products?

Undertake any work offshore?	Yes		No	
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Are there any other facts or circumstances of which you are aware and may affect Underwriters assessment of the risk? If 'YES' provide full details:	Yes		No	
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CLAIMS HISTORY

Please provide details of all Liability claims made against the Proposer and mark which have been paid, which are still outstanding and which have been rejected by Underwriters

YEAR	DESCRIPTION OF CLAIM	AMOUNT PAID	AMOUNT OUTSTANDING

COVER AND LIMITS REQUIRED

General Public Liability		Limit	
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Products Liability		Limit	
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OR

General Public Liability		Limit	
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Employers Liability		(follows the General Public Liability limit)	
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Is there any other liability cover that you would like to enquire about?	Yes	No	
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DECLARATION

I confirm that the particulars in this questionnaire are true and complete.

Name		Date	
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Title/Position	
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Signature	
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