

Please answer **ALL** questions completely.
Should any question or part thereof not be applicable, please state "N/A".
Should insufficient space be provided, please continue on your company letterhead.

1. Name of your business _____
2. Your Business address (physical) _____ Post code _____
3. Your Business website address _____
4. Your Business email address _____
5. Your Business contact number _____
6. Your Business VAT number _____
7. Your company registration number _____
8. **Criteria:**
You need to have less than R20m anticipated turnover or revenue for the coming year to qualify for SMEasy Yes ☐ No ☐
9. **Exclusions:** Unfortunately, we can't insure the following activities under SMEasy.
(please send us an email and we may be able to underwrite these separately)
Please view and confirm _____
10. Select your Business Type from the dropdown list _____
11. What does your business do? Please give a clear explanation in a sentence or 2

12. Who is your customer?

13. Do you manufacture products and if so, what? Yes ☐ No ☐ _____
14. Do you export your products and if so, where to? Yes ☐ No ☐ _____
15. Do you have quality control procedures in place? Yes ☐ No ☐
16. Have you had any claims or know of any circumstances that could give rise to a claim? Yes ☐ No ☐
If Yes, provide details: _____
17. Do you do any work on mines? Yes ☐ No ☐
If Yes, the following exclusion will apply:
Consequential Loss: Arising out of consequential loss following an interruption in mining activities.

QUOTATION FOR PUBLIC LIABILITY, PRODUCT LIABILITY, DEFECTIVE WORKMANSHIP:

Choose Limits R1m, R2.5m, R5m, and R10m with a tick box in the column that represents your estimated income for the year ahead.

ESTIMATED TURNOVER	Under R1 000 000	R1 000 001 to R2 500 000	R2 500 001 to R5 000 00	R5 000 001 to R10 000 000	R10 000 001 to R20 000 000
CHOOSE LIMITS:	PREMIUM	PREMIUM	PREMIUM	PREMIUM	PREMIUM
R1 000 000	☐ R2 500,00	☐ R2 625,00	☐ R2 756,25	☐ R2 894,06	☐ R3 038,77
R2 500 000	☐ R3 050,00	☐ R3 202,50	☐ R3 362,63	☐ R3 530,76	☐ R3 707,29
R5 000 000	☐ R4 178,50	☐ R4 387,43	☐ R4 606,80	☐ R4 837,14	☐ R5 078,99
R10 000 000	☐ R5 348,48	☐ R5 615,90	☐ R5 896,70	☐ R6 191,53	☐ R6 501,11

THE COVER IS FOR: Public liability, products / defective workmanship liability, and the automatically-included extensions below.
With Defective Workmanship, the part worked on is included (excluding motor and motor parts), but sub limited to R500 000 in the annual aggregate.
Retroactive Date as per the expiring policy, subject to there being proof of uninterrupted cover in place.
If no Retroactive Date is in place then 1 years automatic Retro Cover is included.



The following additional extensions are added at no additional charge:

EXTENSION SECTION	DEDUCTIBLE	LIMIT PER CLAIM
Employer's Liability including: Employee to Employee Liability RSA Only	Nil	Follows the main limit
Statutory Legal Defence Costs	Nil	R1 000 000
Wrongful Arrest and Defamation	Nil	R1 000 000
Claims Preparation Costs	Nil	R1 000 000
Pollution Clean Up Costs	R50 000	R1 000 000
Incidental Medical Malpractice	R5 000	R250 000
Care, Custody and Control	R10 000	R100 000
Spread of Fire	R50 000	R500 000

- The deductibles for Public Liability is R5 000 and for Products Liability is R10 000.
- South Africa Jurisdiction.
- Premiums are VAT Inclusive.
- Currency of premiums and limits are in ZAR.
- Limits are VAT Exclusive.
- Intermediary Commission: 20% included in quoted premium.
- Quotation valid for 30 days from date issued.
- Your submission of this form is an acceptance of the premium and the terms and conditions. Once we have received the form, we will issue a policy in accordance with the indications on it.
- We reserve the right to query any information or seek additional information and adjust the premium and policy limit accordingly.
- Cover only in respect of RSA registered entities.

PRIVACY CLAUSE

In accordance with the applicable laws, we may be required to share your personal information with other insurers, industry bodies, credit agencies and service providers. This includes information about your insurance, claims and premium payments. We do this to provide insurance services, prevent fraud, assess claims and conduct surveys. We will treat your personal information with caution and have put reasonable security measures in place to protect it. By signing this application for insurance, you agree to the processing and sharing of your personal information.

DECLARATION

I/We, the undersigned, declare that the statements set forth in this proposal form together with any other information supplied are true and correct and that I/we have not misstated or suppressed any material facts.

I/We agree that this proposal form together with any other information supplied by me/us shall form the basis upon which the contract of insurance is concluded and shall be incorporated therein.

I/We further undertake that in the event that the information provided changes between the date of this application and inception of cover, I/We will notify iTOO of such changes as soon as reasonably possible.

CONSENT

Name (duly authorised)

Designation

Signature _____

Date _____

