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PROPOSAL FOR RESIDENTIAL BODY CORPORATE, SHARE BLOCK

AND WHOLE OWNERS ASSOCIATIONS

Broker Name		TRA Broker Code	
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To ensure best possible rates, the Proposer is to complete all sections and questions in full

Details of Proposer

Full Name of Insured			
Occupation of the Insured			
Sectional Plan Number			
Postal Address			
		Postal Code	
Full Risk Address			
		Postal Code	
Contact Details	E-Mail Address		
Telephone Number		Fax	Cellular Phone

Previous Insurance and Losses sustained

Please provide details of your existing Insurer			
Please provide your existing Insurer's Policy Number			
Has any insurer ever cancelled, declined or refused to renew your insurance or imposed special terms?			
Yes	<input type="checkbox"/>	No	<input type="checkbox"/> If yes, please provide the details hereunder

Please provide and/or attach details of any losses, whether claimed for or not, in the last 3 years.

Date of loss	Type of claim	Brief detail	Amount Paid	Insurer Name

Proposer's Initials

Underwriting Information							
Thatch Buildings							
Is any business or profession carried out at the premises?							
No		Yes		If yes please provide full details			
Is your property surrounded by Fynbos within a 100m radius ?							
Yes		No		If yes please provide full details			
Kindly indicate the name of and distance from the nearest town / city with a Fire Brigade							
Is the building protected by a drencher system?							
Yes		No		If yes is it	Manual	or	Automatic
Are any fire fighting hose reels installed at the premises?							
Yes		No		If yes please provide full details			
Are there Municipal water supplies available for fire fighting?							
Yes		No		If no please provide full details of other water supplies available			
What is the Construction of the Walls? (For example Brick & Mortar and /or Timber) Please provide full details							
Brick & Mortar		Timber		Other (Please provide details)			
What is the Construction of the Roof? (For example Thatch and /or Timber) Please provide full details							
Thatch		Timber		Corrugated Iron		Tiles	
Other (Please provide details)							
What is the name of your Thatching Company?							
What is the age of the roof?							
What is the present condition of the roof?							
Does the building have an approved lightning conductor?							
Yes		No					
Has a Fire Blanket or Sisalation been installed in the Thatched Roof ?							
Fire Blanket		Sisalation					
(Please attach Proof of the fire blanket installation to the proposal form)							
Has the thatch been treated with any of the following Fire Retardants ?							
Thatchsayf		Thatchbor		Thatch Guard		Supercote	
Date of application							
(Please attach Proof of the fire retardant application thereof to the proposal form)							
Does the kitchen have a concrete ceiling?							
Yes		No		If no please provide full details			
Do you have an Electrical Compliancy Certificate ?							
Yes		No		If yes please provide the date of issue			
(If available, please attach a copy of the Electrical Compliancy Certificate to this proposal form.)							
Is there a lapa on the premises?							
Yes		No		If yes please confirm the following ?			
Is the lapa attached to the premises and if not, what is the distance from the building ?							
Yes		No		Distance from the building			
						Proposer's Initials	

Underwriting Information Continued				
Thatch Buildings				
Does the kitchen have a concrete ceiling?				
Yes		No		If no please provide full details
Do you have an Electrical Compliancy Certificate ?				
Yes		No		If yes please provide the date of issue
(If available, please attach a copy of the Electrical Compliancy Certificate to this proposal form.)				
Is there a lapa on the premises?				
Yes		No		If yes please confirm the following ?
Is the lapa attached to the premises and if not, what is the distance from the building ?				
Yes		No		Distance from the building
Does the building and/or lapa and/or braai area have one or more chimney(s)?				
Yes		No		If yes please confirm the following ?
Chimney extends 1 metre or more above the roofline ?		Yes		No
Chimney penetrates the thatch roof ?		Yes		No
Chimneys are fitted with Spark Arrestors / wire mesh?		Yes		No
Are the chimneys maintained on a regular basis?		Yes		No
Are there any fire places installed and are these fuelled by solid fuels (e.g. wood)?				
Yes		No		If yes please provide full details
Is LP Gas used on the premises ?				
Yes		No		If yes please provide full details
Is the building presently under construction?				
Yes		No		If yes please provide full details
Are you planning any alterations to the building(s) in the near future ?				
Yes		No		If yes please provide full details
The following minimum requirement is a condition of cover.				
The Insured must install fire extinguishers in each kitchen and / or cooking area as well as in each storey/loft of the building if not a single storey. The capacity of the total amount of fire extinguishers per floor / storey / kitchen must not be less than 4,5kg respectively.				
Subsidence and Landslip				
What is the proximity of the premises to the closest body of water?				
Please indicate the type of body of water, ie Dam, River, Ocean, Swimming Pool :				
How far are the premises from the 50 and/or 100-year flood line?				
Have there been any cases of flood, subsidence or landslip at the premises or in the immediate neighbourhood?				
Yes		No		If yes please provide full details
Please Indicate if Subsidence and Landslip Cover is required				
Yes		No		
				Proposer's Initials

Underwriting Information Continued						
Thatch Buildings						
Security Precautions of the Main Residence						
Are you and your family the sole occupants of the premises?						
Yes		No		If no please provide full details		
Are all opening windows protected by burglar bars?						
Yes		No				
Do all external doors have security gates?						
Yes		No				
Do you have an Alarm system?						
Yes		No		If yes please provide full details		
Is the alarm system linked to a 24-hour control centre?			Yes		No	
Does your security company provide armed response?			Yes		No	
Will the residence be unoccupied for a period longer than 60 days of each calendar year?						
Yes		No		If yes please provide full details		
Proposed Covers Required						
Buildings						
As per Participation Quota to be provided		Roof Construction Type /Replacement Value				Please note type of Non Thatch Roofing
Description	No of Units	Type	Sum Insured	Type	Sum Insured	
Residences		Thatch		Non-Thatch		
Outbuildings		Thatch		Non-Thatch		
Holiday homes		Thatch		Non-Thatch		
Residence		Thatch		Non-Thatch		
Outbuildings		Thatch		Non-Thatch		
Holiday homes		Thatch		Non-Thatch		
Common Property	Please provide information in respect of items noted to be insured					Sum Insured
Roads and Paving						
Tennis Courts						
Swimming Pools						
Estate Boundary Walls						
Electric Fences						
Entrance Gates						
Electrical Infrastructure						
Solar Panels						
Generators						
Intercom Systems						
Additional Costs						
					Proposer's Initials	

Proposed Covers Required Continued			
Office Contents			
Full Description of items to be insured			Sum Insured
Money			
			Limits
Major Limit Required			
Minor Limit			
Electronic Equipment			
Full Description of items to be insured			Sum Insured
All Risks to be specified			
Full Description of items to be insured			Sum Insured
Machinery Breakdown			
Full Description of items to be insured			Sum Insured
Fidelity Guarantee			
Details Of Postion Held	Name of Person	Number of Persons	Sum Insured
SASRIA			
SASRIA cover is included automatically.			
			Proposer's Initials

Liability Cover Required					
Property Owners Liability of R 2 500 000 is included					
Additional Covers required				Limit of indemnity Required	
General Tenants and Property Owners					
Trustees Indemnity R 200 000 included					
Employers Liability					
Extended Liability Cover					
(Available limits are R 10 000 000 or R 20 000 000)					
Spread of Fire Cover to a maximum of R 5 000 000					
(Please complete the Spread of Fire Section of the Proposal Form)					
Proposed Covers Required					
Spread of Fire					
Please complete this section should the risk be situated in a rural and/or farming district.					
General					
past, or has any incident arisen which may have or may	Yes		No		
If yes please provide full					
Please detail the adjoining property and what the property is occupied as:					
North					
West					
South					
East					
Is the property situated in a Fire Control Area as	Yes		No		
If yes please provide full details					
Fire prevention and detection					
Please provide detail of the following:					
Fire Breaks	Yes		No		
Type					
Width					
What maintenance programme is in place?					
How frequently are the firebreaks cleared and brush cut or mowed?					
Do any of the firebreaks adjoin public roads?	Yes		No		If yes please provide detail.
Do any of the firebreaks adjoin railway reserves?	Yes		No		If yes please provide detail.
Does the public have access to the firebreaks?	Yes		No		If yes please provide detail.
Watch Towers	Yes		No		
How many fire watchtowers are there on the property?					
Are there any fire watchtowers on adjoining property?	Yes		No		If yes please provide detail.
					Proposer's Initials

Proposed Covers Required					
Spread of Fire					
What percentage of the farm is visible from fire watchtowers?					
(a)	on the property				
(b)	on adjoining property				
Are the towers manned 24 hours per day during the fire season?	Yes		No		If yes please provide detail.
What percentage of the farm is visible from fire watchtowers?					
What form of communication is used to and from the towers?					
Radio Communications					
Is there a radio network on the property?	Yes		No		
Number of sets on the property:					
Base stations:					
Other:					
Is there a radio network in the district?	Yes		No		
Number of sets on the property:					
Base stations:					
Other:					
Does your radio network link into any other network?	Yes		No		If yes please provide detail.
Is the radio network manned 24 hours per day during the fire season?					
Yes		No			If yes please provide detail.
Fire fighting equipment					
List all the fire fighting equipment available on the property:					
What is the main source of water supply for fire fighting?					
What is the availability of water to the main source of supply?					
What alternative sources of water are available on the farm?					
How can the water be moved from the source to fight a fire?					
Are there established fire fighting teams on the farm?	Yes		No		
If yes, how are they trained?					
Who controls the fire fighting team(s)?					
What is the makeup of the Fire Fighting Team(s)					
What training has the controller of the fire fighting teams had?					
					Proposer's Initials

Proposed Covers Required						
Trailers : Comprehensive Cover only						
Trailer 1						
Make and Model				Registration Number		
Year of Manufacture				Current replacement Value		
Trailer 2						
Make and Model				Registration Number		
Year of Manufacture				Current replacement Value		
Motor						
Approved security tracker systems need to be fitted to vehicles with sums insured of R 500 000.00 and more.						
Credit Shortfall Cover is available on request. Vehicles must be registered in South Africa.						
Vehicle 1						
Make and Model				Registration Number		
Year of Manufacture				Registered owner		
Chassis Number				Vin Number		
What security System has been fitted to the vehicle						
Use of Vehicle and Cover Required	Private		Professional		Business	
Comprehensive	Third Party Fire & Theft		Third Party only		Current Retail Value	
Current No Claim Bonus earned by the usual driver of the vehicle. Proof thereof will be required						
Loss Of Use Cover Required	Yes		No			
Usual Driver Details	Full Name					
South African Identity Number						
Passport Number				Passport Expiry Date		
Date of Birth						
Date of issue of South African Drivers Licence						
Date of issue of current International Drivers Licence				Expiry date		
Vehicle 2						
Make and Model				Registration Number		
Year of Manufacture				Registered owner		
Chassis Number				Vin Number		
What security System has been fitted to the vehicle						
Use of Vehicle and Cover Required	Private		Professional		Business	
Comprehensive	Third Party Fire & Theft		Third Party only		Current Retail Value	
Current No Claim Bonus earned by the usual driver of the vehicle. Proof thereof will be required						
Loss Of Use Cover Required	Yes		No			
Usual Driver Details	Full Name					
South African Identity Number						
Passport Number				Passport Expiry Date		
Date of Birth						
Date of issue of South African Drivers Licence						
Date of issue of current International Drivers Licence				Expiry date		
						Proposer's Initials

Proposed Covers Required			
Motorcycles - Comprehensive Cover Only			
Motorcycle 1			
Year of Manufacture		Registered owner	
Chassis Number		Vin Number	
Registration Number		Current Retail Value	
Current No Claim Bonus earned by the usual driver of the vehicle. Proof thereof will be required			
Usual Driver Details			
Full Name			
South African Identity Number			
Passport Number		Passport Expiry Date	
Date of Birth			
Date of issue of South African Drivers Licence			
Date of issue of current International Drivers Licence		Expiry date	
Motorcycle 2			
Make, Model & Engine Capacity			
Year of Manufacture		Registered owner	
Chassis Number		Vin Number	
Registration Number		Current Retail Value	
Current No Claim Bonus earned by the usual driver of the vehicle. Proof thereof will be required			
Usual Driver Details			
Full Name			
South African Identity Number			
Passport Number		Passport Expiry Date	
Date of Birth			
Date of issue of South African Drivers Licence			
Date of issue of current International Drivers Licence		Expiry date	
SASRIA COVER IS ISSUED AUTOMATICALLY			
ADDITIONAL INFORMATION / DOCUMENTS REQUIRED IF AVAILABLE			
Please request your broker to assist you in this regard.			
Your current loss ratio			
The probable maximum loss % should a fire occur at the premises.			
Any risk survey reports in respect of the premises should these be available			
Is there any further information which could negatively affect Thatch Risk Acceptances decision in accepting to insure this risk.			
Yes		No	
			If yes please provide full details
Declaration to be signed by the Proposer			
I confirm that the completed proposal shall form the basis of the contract between Thatch Risk Acceptances (Pty) Ltd on behalf of Compass Insurance and myself on acceptance of cover. I further confirm that the information provided above is correct and that there is no further information which could negatively affect Thatch Risk Acceptances decision in accepting to insure this risk.			
Signature of Proposer		Date	
Should the Proposer accept our quotation, then a Confirmation of Proposal Form needs to be completed by the Proposer.			