

GENERAL LIABILITY RENEWAL PROPOSAL FORM

IMPORTANT NOTICE

- Answer all questions leaving no blank spaces.
- If you have insufficient space to complete any of your answers, continue on your headed paper.
- It is the intention of Underwriters that any Contract of Insurance with the Proposer shall be based upon the answers and information provided in this Proposal Form and any other additional information provided by the Proposer. If a quotation is offered it will be the intention of Underwriters to offer coverage only in respect of those entities named in answer to Question 1.
- Completion of this form does not bind the Proposer or Insurer to complete the insurance transaction.

1 | GENERAL INFORMATION

Details of entities to be insured (the "Proposer")

Policy No:

Renewal Date:

Name of Insured:

2 | REQUIRED COVER

COVER	INDEMNITY LIMIT	EXISTING RETROACTIVE DATE ¹	PREFERRED EXCESS
Public Liability			
All Camargue liability policies are required to have this basic cover. It covers Injury and Damage to third parties. *			
Products Liability			
A Product is any tangible item after the Insured has handed it over to someone else. If that item harms people or their property then that would usually be covered under this section. *			
Products Inefficacy			
This covers the financial losses caused to others because the Insured's product failed to perform properly. *			
Errors & Omissions			
This covers the financial losses caused to others because of the Insured's bad advice or services. The cover is identical to many professional indemnity policies and but on this policy would typically be limited to R1m if selected. *			
Custody and Control			
This provides additional cover for Damage to third party property in the Insured's care. *			
Breach of Copyright			
This covers the Insured's legal defence costs arising out of accidental plagiarism. *			
Data Protection			
This extension covers liability arising out of failing to protect people's confidential information stored on a network or computer (includes hacking). *			
Warehousemen's Liability			
Carriers' Liability			

THE POWER OF KNOWLEDGE

AUTHORISED FINANCIAL SERVICES PROVIDER, LICENCE NUMBER: 6344. APPROVED LLOYD'S COVERHOLDER PIN: 107824DRW
 Camargue Underwriting Managers (Pty) Ltd. Co. Reg. No. 2000/028098/07.
 33 Glenhove Road, Melrose Estate, 2196. Postnet Suite 250, Private Bag X4, Bedfordview 2008
 Telephone: 011 778 9140, Facsimile: 011 778 9199, E-mail: camargue@camargueum.co.za, Website: www.camargueum.co.za

Underwritten by certain underwriters at Lloyds, Compass Insurance Company Limited and Bryte Insurance Company Limited

Note: * These brief explanations have no legal value and must be substituted with the actual policy wording when determining the scope of cover provided.

¹ The event giving rise to a claim must occur on or after the retroactive date.

If this policy is replacing existing cover then the retroactive date on the existing policy should be entered here. If there is no existing cover then please leave it blank.

3 | PREVIOUS LOSSES

1 Is any Principal, AFTER FULL ENQUIRY, aware of any circumstance which might:

i) Give rise to a claim against the Proposer, any predecessor or any past or present Principal?

 Yes
 No

ii) Cause any loss to the Proposer, any predecessor or any past or present Principal?

 Yes
 No

iii) Otherwise affect the consideration of this proposal for insurance?

 Yes
 No

If YES, please provide details:

2 In respect of ANY of the risks to which this proposal relates, has any Claim been made (whether successful or not) against the Proposer or any past or present Principal?

 Yes
 No

If YES, please identify details (including loss date, amount claimed and a brief description):

4 | GENERAL UNDERWRITING INFORMATION

1 What is the Proposer's annual turnover?

5 | MATERIAL CHANGES TO THE RISK

Have there been any material changes to the risks covered under this policy, or to the Proposer's business activities in the last 12 months?

 Yes
 No

If Yes, please provide details:

DECLARATION

Signing this proposal form binds neither the proposer to complete this insurance, nor does it bind the insurer to accept the proposal. It is agreed that all written statements and attachments furnished to the insurer in conjunction with this proposal are hereby incorporated by reference into this proposal and made part thereof. It is understood and agreed that the insurer has relied upon this proposal and attachments, which shall be the basis of the insurance contract.

The undersigned is an authorised signatory of the Proposer and certifies that reasonable inquiry has been made to obtain the answers herein which are true, correct and complete to the best of his/her knowledge and belief. We undertake to inform the insurer of any material alteration to these facts, whether occurring before or after completion of the insurance contract.

.....
NAME	CAPACITY
.....
SIGNATURE OF THE PROPOSER	DATE DD/MM/YYYY

BROKER DETAILS

Broker:

.....
Contact Person:	Tel:
.....
Email:	Fax number:
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