

Bryte Insurance Company Limited

A Fairfax Company

Registration number: 1965/006764/06 VAT number: 4530103581

Authorised Financial Services Provider No. 17703

15 Marshall Street, Ferreirasdorp, Johannesburg, 2001 PO Box 61489, Marshalltown 2107

Please complete this form in BLOCK CAPITALS and send it to your broker or to Bryte Insurance Company Limited.

| General information | | | |
|---|------------------------------|-----------------------------|---------|
| Legal entity name | | | |
| Name of establishment | | | |
| Date of birth | | | |
| | | Postal code | |
| Name of broker | | | |
| Date completed | | | |
| General | | | Remarks |
| Has your insurance ever been cancelled? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Has your premium collection date be advised to you with pro-rata premiums if applicable? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Do you know that this policy covers both your home and business? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Do you have more than one premises? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Do you know that membership of any association could give you a discount? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Is your establishment star graded by The Grading Council? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Is your establishment a holiday home, self catering or backpacker? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| If your establishment is a holiday home or self catering, does anyone reside permanently on the premises? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Is your establishment a B&B, Guesthouse, Boutique Hotel or Country House? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Do you know that your establishment can be listed for free on our BnB Finder website? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Does the business permanently employ staff? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Have there been any labour disputes in the last 12 months? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Do you have prominently displayed disclaimers on the premises? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Is alcohol available or sold on the premises? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Do you hold a valid liquor licence? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Do you have any fire fighting equipment at the premises? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Has the fire fighting equipment been serviced in the last 12 months and in good condition? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Is your staff trained to use the fire fighting equipment? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Is there smoke / fire detection on the premises? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Do you have any gas cylinders on the premises? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Are the fittings and hoses of the gas cylinders in good condition? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Does your gas installation comply with regulations? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |

| General (continued) | Remarks |
|--|---------|
| Do you use a cooker hood? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Is your cooker hood filters serviced regularly? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you use a deep fryer? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Is there a fire blanket near your cooking appliances? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are you aware that should you be underinsured in the event of a claim that average will apply? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are you aware of the excess structure that is applicable to your policy? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Buildings | Remarks |
| Do you know that the policy provides subsidence and landslip cover? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| R22 500 power surge is included, is this enough? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| R25 000 accidental damage cover is included, is this enough? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are any parts of the buildings thatched? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| If thatched construction do you have a lightning conductor? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you have any solar panels? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are any geysers bigger than 250 litres? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you currently have insurance for your buildings on your bond? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Have you noted the interest of the bank that holds your bond? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are you aware of the Mortgagee Clause in the policy wording and do you understand it? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you have retaining walls? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Would you like to insure your retaining walls? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are you satisfied with your current value of your buildings, including replacement / reinstatement costs? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you know that glass cover for your premises is included? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Accidental damage for R20 000 is included, is this enough? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Contents | Remarks |
| Are you aware that should your premises be a holiday home, back packer or self-catering that there are certain exclusions to the cover? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Power surge cover of R22 500 is included, is this enough? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are the premises completely unoccupied for longer than 24 hours? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Up to R30 000 cover if your guests leave without paying is included, is this enough? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Uninsured personal effects belonging to your guests is covered up to R25 000, is this enough? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you know that there is no theft restriction on B&B's and Guesthouses? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you know that cover for theft by guests is included? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Have you insured all your contents both business and personal at what it would cost you to replace them at the current prices? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are you satisfied with your current sum insured and is it adequate? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| R10 000 money cover at the premises is included, do you need more? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| R35 000 cover for goods in the open or 1% of the sum insured for contents is included, is that enough? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| R12 500 cover for the contents of each fridge or deep freezer is included, is this enough? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| R20 000 accidental damage cover is included for contents, is this enough? <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| All risks | | Remarks |
|---|--|---------|
| Do you require cover for your personal belongings whilst away from your premises? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you know the difference between general all risks and specified all risk? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you have valuation certificates for any items in excess of R2 000 | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Is jewellery kept in a locked safe when not being worn? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you require cover for sunglasses, cellphones, navigator systems and tablets when you leave your home? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Electronic equipment | | Remarks |
| Do you know that you don't have to specify your electronic equipment if it doesn't get removed from the premises, it can be included in your contents sum insured | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Does your premises have adequate protection by suitable safeguards and electrical supply fluctuations? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you require cover for laptops? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Liability | | Remarks |
| Do you have any restaurant or conference facility operating from your premises? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Does the turnover of the restaurant or conference facility exceed 40% | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Is the restaurant part of the main building? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Does the restaurant cater for patrons other than the guests staying at the premises | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you have more than 30 guests rooms | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you have dormitory type rooms | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you have a trampoline at the premises? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| If you have a trampoline, do you have a notice displayed that the trampoline is used at own risk? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you keep any animals other than domestic dogs, cats and caged birds? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you offer any activities other than a domestic gym, swimming pool, squash court or tennis court? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Does the premises cater for weddings? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Does the turnover of the weddings exceed 40%? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you have a disclaimer at the premises even though this is not a requirement? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you transport customers other than guests staying at your establishment? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you require spread of fire cover if you do not live in an urban area? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you offer horse riding as an activity? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you run any other business from the premises? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you have a PDP licence if you transport paying guests? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you have a certificate of fitness for your vehicle if you transport paying guests? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Business interruption | | Remarks |
| Would you require financial assistance should you lose income due to a variety of insured circumstances such as fire, storm, flood etc? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you know that loss of revenue following the cancellation of an event within 50km is included in the policy? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you know that loss of revenue following a murder, suicide or rape at your establishment is included? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are you aware that loss of revenue following hospitalisation of a "key person" being a spouse, partner or manager is included? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are you aware that loss of revenue following cancellation by a guest beyond the control of the guest is included? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| Business interruption (continued) | Remarks |
|--|---------|
| Are you aware that loss of revenue following breakdown of essential equipment at your establishment is included? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Would you require SASRIA cover under this section which is not automatically included? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Motor | Remarks |
| Are you aware that the policy covers the vehicle for private and B&B activities? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you know that even using the vehicle to buy groceries is business use? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you require basic excess waiver for vehicles under the value of R500 000? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are you aware that car hire is automatically included for theft and accident? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Standard car hire cover - Group B is given would you like to buy this up? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you have any factory fitted anti-theft devices in the vehicles? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you have a tracking device installed? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are your vehicles registered in the business name or your name? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you use any vehicle for any other business? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are you satisfied that the current value of your vehicle is correct? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you know that windscreen glass is automatically covered? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you require assistance with collision and breakdown for a premium of R4.50 per vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are any of your vehicles financed? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| If the vehicles are financed, are the interests of the finance company noted? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| If you are over the age of 80, do you have a medical certificate stating you are fit and proper to drive? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are you and your spouse / partner the main drivers? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you have children that drive your vehicles and are they living at home? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are you aware of the BnB Sure No Blame Bonus for vehicles valued under R500 000? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are you aware that you have passenger liability to the liability limit on this policy in terms of any private car up to 9 seats insured on this policy? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Are all passengers being transported also guests at the establishment? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you operate the vehicle as a tour guide? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you require cover for death and bodily injury following a loss for fare paying passengers? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Money | Remarks |
| R10 000 free cover is on the policy under the Contents and R5 000 under All Risks, is this enough? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you have a safe? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Guest medical evacuation | Remarks |
| Do you wish to have cover for your guests should they require emergency medical treatment or evacuation? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Fidelity | Remarks |
| R10 000 free cover is on the policy for up to 10 employees <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Appliance maintenance | Remarks |
| Do you know that the policy provides cover for appliances or electronics should they break down and need repair up to an amount of R3 000 for each? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you require cover for repairs to pool, jacuzzi, electric gate and electric garage door motors? <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| Appliance maintenance (<i>continued</i>) | | Remarks |
|--|--|---------|
| Do you require additional cover for air conditioners or intercoms? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you require cover for solar panels? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Personal accident | | Remarks |
| Do you wish to provide death and disability cover for your employees? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you require cover for death, disability, critical illness, accidental medical expenses and income protection? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Do you require cover for motor personal accident? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Pleasure Craft Section | | Remarks |
| Do you have any boats that you want to insure? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Accounts Receivable | | Remarks |
| R10 000 free cover is on the policy should a loss of records occur and you lose money as you are not able to collect it. Is this enough? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Tax and CPA Legal Costs Section | | Remarks |
| Do you require cover for legal costs up to R300 000 per annum in the event that you have to defend a matter arising from a Tax or CPA claim against you? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |