

**IMPORTANT INFORMATION – PLEASE READ CAREFULLY – DISCLOSURE AND OTHER LEGAL REQUIREMENTS**

(This notice does not form part of the Insurance Contract or any other document)

**As a short-term insurance policyholder, or prospective policyholder, you have the right to the following information:****Financial Advisory & Intermediary Services Act No. 37 2002 “FAIS Act”**

The FAIS Act requires compliance by Product Suppliers (insurers) and Financial Services Providers (intermediaries or brokers) with a General Code of Conduct that was introduced to assist you in making informed decisions about the insurance products that you purchase. It also aims to ensure that your Product Supplier, Underwriting Management Agent (if applicable) and Financial Services Provider (if applicable) render financial services honestly, fairly, with due skill and diligence and in your interests and the integrity of the financial services industry.

You will receive a Disclosure Notice at the inception of your policy and at each subsequent Renewal (or Anniversary) date. The Disclosure Notice contains certain information about your Product Supplier and Financial Services Provider (if applicable, your broker may have a separate disclosure notice) that you are entitled to together with information about the Ombud and the Registrar. Should you experience any difficulties in obtaining required details, please contact your Financial Services Provider for further assistance.

<b>1. ABOUT THE BINDER HOLDER (UNDERWRITING MANAGEMENT)</b>													
Name	Tradesure Commercial Specialists (Pty) Ltd												
Company Registration Number	2002/018156/07												
FSP Number	17607												
Postal Address	PO Box 3512, Rivonia, 2128												
Physical Address	13 Reynolds Street, Bryanston, 2191												
Tel Number	087 353 2577												
Fax Number	086 687 3353												
Email	info@tradesure.co.za												
Website													
Whether professional indemnity insurance, fidelity guarantee and premium guarantees (IGF) is held	We hold professional indemnity insurance.												
Details of complaints procedure <i>All complaints must be reduced to writing and any of our representatives will be able to provide you with a copy of our complaints procedure on request.</i>	Contact Person / Department: The Manager Tel: 087 353 2577 Fax: 086 687 3353 Email: info@tradesure.co.za												
Details of compliance arrangements	Contact Person / Department: Key Comply cc (Practice No. 6090) Tel: 011 447 0747 Email: admin@keycomply.co.za												
<b>2. ABOUT THE PRODUCT SUPPLIER (INSURER)</b>													
Name	Centriq Insurance Company Limited												
Company Registration Number	1998/007558/06												
FSP Number	3417												
Postal Address	PO Box 55674, Northlands, 2116												
Physical Address	The Oval, Second Floor, West Wing, Wanderers Office Park, 52 Corlett Drive, Illovo, 2196												
Tel Number	011 268 6490												
Fax Number	011 268 6495												
Email	info@centriq.co.za												
Website	www.centriq.co.za												
Details of the compliance department	The Internal Compliance Officer is assisted by Compli-Serve (Pty) Ltd, and is contactable at the numbers above. Email: compliance@centriq.co.za												
Details of claims department	The Claims Specialist is contactable at the numbers above. Email: claims@centriq.co.za												
Details of complaints department <i>All complaints must be reduced to writing and any of our representatives will be able to provide you with a copy of our complaints procedure on request.</i>	In the event of a complaint, please contact the Claims Specialist at the number above. Email: faiscomplaints@centriq.co.za / claimscomplaints@centriq.co.za												
<b>3. ABOUT THE SERVICE</b>													
<b>The Product</b>	Commercial Insurance Policy												
The Intermediary and Binder Holder have agreements with the insurer in terms of which the following remuneration is payable for the insurance business:													
<table border="1"> <thead> <tr> <th>Party</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>Intermediary (Financial Services Provider)</td> <td>Commission</td> </tr> <tr> <td>Intermediary (Financial Services Provider)</td> <td>Broker Fee</td> </tr> </tbody> </table>	Party	Description	Intermediary (Financial Services Provider)	Commission	Intermediary (Financial Services Provider)	Broker Fee	<table border="1"> <thead> <tr> <th>Remuneration</th> <th>Frequency</th> </tr> </thead> <tbody> <tr> <td>R or % of the premium payable</td> <td>Monthly or Annually</td> </tr> <tr> <td>5% of GWP</td> <td>Monthly or Annually</td> </tr> </tbody> </table>	Remuneration	Frequency	R or % of the premium payable	Monthly or Annually	5% of GWP	Monthly or Annually
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Intermediary (Financial Services Provider)	Broker Fee												
Remuneration	Frequency												
R or % of the premium payable	Monthly or Annually												
5% of GWP	Monthly or Annually												
If the policy was sold to you by the Intermediary's telemarketer, the same details as those of the Intermediary are applicable. Recordings of the telephone discussion with the telemarketer can be made available to you on request.													
<b>4. PARTICULARS OF SASRIA LIMITED</b>													
<i>Should you have requested cover provided by SASRIA SOC .IMITED then you are entitled to details as follows:</i>													
Name	Sasria Soc Limited												
Company Registration Number	1979/000287/06												

FSP Number	39117
Postal Address	PO Box 653367, Benmore, 2010
Physical address	36 Fricker Road, Illovo, 2196
Tel Number	011 214 0800 / 086 172 7742
Fax Number	011 447 8630 / 086 172 7329
Email	info@sasria.co.za
Website	www.sasria.co.za

Details of the compliance department	The Compliance Officer is Nomsa Wabanie who is contactable at the numbers above. Email: nomsa@sasria.co.za
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#### 5. PARTICULARS OF FAIS OMBUD

Name	The FAIS Ombud
Postal address	P O Box 74571, Lynnwood Ridge, 0040
Physical Address	Sussex Office Park, Ground Floor, Block B, 473 Lynnwood Road Cnr Lynnwood Road & Sussex Ave, Lynnwood, 0081
Tel Number	012 470 9080
Fax Number	012 348 3447
Email	info@faisombud.co.za
Website	www.faisombud.co.za

#### 6. PARTICULARS OF SHORT-TERM INSURANCE OMBUD

Name	The Ombudsman for Short-Term Insurance
Postal address	PO Box 32334, Braamfontein, 2017
Physical Address	Sunnyside Office Park, 5 <sup>th</sup> Floor, Building D, 32 Princess of Wales Terrace, Parktown
Tel Number	011 726 8900 / 0860 726 890
Fax Number	011 726 5501
Email	info@osti.co.za
Website	www.osti.co.za

#### 7. PARTICULARS OF REGISTRAR OF SHORT-TERM INSURANCE

Name	Registrar of Short-Term Insurance
Postal address	PO Box 35655, Menlo Park, 0102
Physical Address	Riverwalk Office Park, Block B, 41 Matroosberg Road (Corner Garsfontein and Matroosberg Roads), Ashlea Gardens, Extension 6, Menlo Park, Pretoria
Tel Number	012 428 8000
Fax Number	012 347 0221
Website	www.fsb.co.za

#### 8. PROCEDURES FOR REGISTERING CLAIMS OR COMPLAINTS

Procedures for the submission of claims are detailed in your policy and are important. If you have difficulties in determining the correct procedures, please contact your Financial Services Provider, Underwriting Management Agent (if applicable) or Product Supplier for assistance. Generally, you are required to advise the Product Supplier or Underwriting Management Agent (if applicable) within a prescribed number of days of a loss, provide written details of the loss, provide proof in support of the claim, report theft to the police and provide any other details that may be required by the Product Supplier. Should you remain dissatisfied with the assistance provided, then you may contact the Compliance Officer at the address provided on the Statutory Notice. In addition, the addresses of both the Registrar of Short-Term Insurance and the FAIS Ombud are provided should your complaint still not be satisfactorily resolved.

#### 9. NAME, CLASS OR TYPE OF POLICY

Full details about the name, class and type of policy involved are reflected on your policy schedules and are also contained in the policy wording. Policy schedules should always be read in conjunction with the policy wording. Should you require any explanation about the terms, conditions, exclusions, provisions, premiums, excesses (or deductibles) or any other information, please contact your Financial Services Provider for assistance.

#### 10. EXTENT AND NATURE OF PREMIUM OBLIGATIONS

Your policy document reflects the premiums payable, the due date of payment and the frequency of payment (e.g. monthly or annually). When amendments are made to the policy an additional or refund premium may become due and such amounts are also reflected on the policy schedules. All premiums are inclusive of Value Added Tax at the prescribed rate.

Financial Services Providers are authorised to accept premium payment on behalf of Product Suppliers and should your Financial Services Provider be authorised to do so, then you may make payment to such Financial Services Provider. Where a Financial Services Provider is not authorised to receive payment on behalf of the Product Supplier, your payment should be made in favour of the Product Supplier. Should you not operate through a Financial Services Provider, then your payment should be made directly to your Product Supplier or Underwriting Management Agent (if applicable). In the case of monthly premiums by debit order, payment is usually made to the Product Supplier directly, unless you have authorised such payment via your Financial Services Provider or other third party, who has authority to collect premium on behalf of the Product Supplier.

#### 11. CONSEQUENCES OF NON-PAYMENT OF PREMIUMS

The due date for the payment is reflected on your policy schedule, certificate of cover, renewal notice or premium advice as the case may be. Your payment should be made on or before the due date / payment date reflected to avoid the cancellation of the policy. Should you fail to make payment on or before the due date / payment date, you have a period of grace for the payment of premiums. You will be notified of the non-payment and given a grace period of 15 days to pay the outstanding premium. Your policy will remain in force for a period of 15 days after that due date / payment date. In the case of a monthly policy, this provision will apply with effect from the second month of the currency of the policy.

#### 12. FIRST AMOUNTS PAYABLE

It is important that you are aware of any amounts that you will be required to pay in the unfortunate event of a claim. Your policy schedule or wording contain the amounts that you pay as a portion of a claim and your Financial Services Provider or Product Supplier can assist you with any queries you have in this regard.

#### 13. OTHER MATTERS OF IMPORTANCE

- (a) You must be informed of any material changes to the information referred to in paragraphs 1, 2, 3 and 4.
- (b) If any complaint to the intermediary or insurer/UMA is not resolved to your satisfaction, you may submit your complaint to the FAIS Ombud.
- (c) Polygraph or similar tests are not obligatory and claims may not be rejected solely on the basis of a failure of such a test.
- (d) If your premium is paid by debit order, the debit order must be in favor of either the intermediary or the Product Supplier (insurer) and may not be transferred without your approval.
- (e) The Product Supplier (insurer) must give you 30 days' notice in writing of its intention to cancel your debit order.
- (f) The Product Supplier (insurer) and not the intermediary must give reasons in writing for the rejection of any claim submitted by you. (g) The Product Supplier (insurer) must give you written notice of its intention to cancel your policy.
- (h) You are entitled to a copy of your policy free of charge.

#### **14. WARNING**

- (a) Do not sign any blank or partially completed application form.
- (b) Complete all forms in ink.
- (c) Keep all documents you receive.
- (d) Make notes as to what is said to you.
- (e) Ask for a letter of representation from your advisor.
- (f) Do not be pressured into buying the product.
- (g) Failure to provide correct or full relevant information may influence an insurer on any claims arising from your contract of insurance.

#### **15. SHARING OF INSURANCE INFORMATION**

Insurers share information with each other regarding policies and claims with a view to prevent fraudulent claims and obtain material information regarding the assessment of risks proposed for insurance. By reducing the incidents of fraud and assessing risks fairly, future premium increases may be limited. This is done in the public interest and in the interest of all current and potential policyholders.

The sharing of information includes, but is not limited to information sharing via the Information Data Sharing System operated by TransUnion ITC on behalf of the South African Insurance Association. By the insurer accepting or renewing this insurance, you or any other person that is represented herein, gives consent to the said information being disclosed to any other insurance company or its agent.

You also similarly give consent to the sharing of information in regards to past insurance policies and claims that you have made. You also acknowledge that information provided by yourself or your representative may be verified against any legally recognised sources or databases.

By insuring or renewing you insurance you hereby not only consent to such information sharing, but also waive any rights of confidentiality with regards to underwriting or claims information that you have provided or that has been provided by another person on your behalf.

In the event of a claim, the information you have supplied with your application together with the information you supply in relation to the claim, will be included on the system and made available to other insurers participating in the Information Data Sharing System.

#### **16. USE OF YOUR PERSONAL INFORMATION**

When you enter into this policy you will be giving us your personal information that may be protected by data protections legislation, including but not only, the Protection of Personal Information Act, 2013 ("POPI"). We will take all reasonable steps to protect your personal information. You authorise us to:

- (a) Process your personal information to
  - (i) Communicate information to you that you ask us for.
  - (ii) Provide you with insurance services.
  - (iii) Verify the information you have given us against any source or database.
  - (iv) Compile non-personal statistical information about you.
- (b) Transmit your personal information to any affiliate, subsidiary or re-insurer so that we can provide insurance services to you and to enable us to further our legitimate interests including statistical analysis, re-insurance and credit control.
- (c) Transmit your personal information to any third party service provider that we may appoint to perform functions relating to your policy on our behalf.

You acknowledge that this consent clause will remain in force even if your policy is cancelled or lapsed.

#### **17. WAIVER OF RIGHTS**

The General Code of Conduct stipulates that no financial services provider may request or induce in any manner a client to waive any right or benefit conferred on the client by or in terms of any provisions of the said Code, or recognise, accept or act on any such waiver by a client. Any such waiver is null and void.

#### **18. CONFLICT OF INTEREST**

We have considered the conflict of interest provisions in terms of the FAIS Act 37 of 2002 and have not identified any actual or potential conflicts of interest, either ownership interest, financial interest, third party relationships, associates or distribution channels as defined.

We adopted a values based approach where the spirit of the legislation is embraced. This is reviewed at least annually and reported on to the Financial Services Board. A conflict of interest management policy is available to clients upon request.