





## Broker application form

<b>Registered brokerage/trading name</b>	
<b>Previous trading names, agencies or brokers with whom you have been associated</b>	
<b>FSP no.</b>	
<b>FSP contact person</b>	
<b>Full name of applicant</b>	
<b>ID no.</b>	
<b>Language preference</b>	Afrikaans/English

### Is the brokerage a

<b>Sole proprietary</b>	Yes	No
<b>Partnership</b>	Yes	No
<b>Close corporation</b>	Yes	No
<b>Registered company</b>	Yes	No
<b>Company registration no. (if applicable)</b>		

### Tax information

<b>VAT registered</b>	Yes	No
<b>VAT registration no.</b>		
<b>Tax in order with SARS</b>	Yes	No

Please note: You need to supply us with your tax certificate within 48 hours, if requested.

### Applicant's contact details

<b>Work no.</b>	
<b>Cell no.</b>	
<b>Email</b>	
<b>Website</b>	

## Address of brokerage

Physical address		Postal address	
<b>Postal code</b>		<b>Postal code</b>	

Should the brokerage have branches in other areas please supply the above information for each additional branch on a separate sheet.

## Key individual details

Full name	ID no.	Work no.	Cell no.	Email

## Representative's details

Please attach a separate sheet if necessary.

Full name	ID no.	Work no.	Cell no.	Email

## Compliance officer of brokerage's details

<b>Full name</b>	
<b>Address</b>	
<b>Work no.</b>	
<b>Cell no.</b>	
<b>Fax no.</b>	
<b>Email</b>	
<b>Website</b>	

## Preferred channel

<b>FSP</b>	Yes	No
<b>iPlatform</b>	Yes	No
<b>Obelix</b>	Yes	No
<b>Procuvo (business insurance)</b>	Yes	No

## Broker fee

Your broker fee, if required R \_\_\_\_\_

Supply details to justify your broker fee?


## Authorised admin staff details

Please attach a separate sheet if necessary.

<b>Full name</b>	<b>ID no.</b>	<b>Work no.</b>	<b>Cell no.</b>	<b>Email</b>

Are all the key individuals and representatives of the business FAIS compliant and accredited?

Yes  No If no, please provide details on a separate sheet.

Has your FSP licence ever been suspended or withdrawn?

Yes  No If yes, please provide details on a separate sheet.

Have any of the above persons been convicted of any criminal offence during the past 10 years?

Yes  No If yes, please provide full details on a separate sheet.

### Other short term insurance contracts

Please attach a separate sheet if necessary.

Insurer/UMA	Contact person	Broker code

Do you have Professional Indemnity Cover (compulsory)?

Yes  No If yes, please attach your PI certificate.

Have any of your insurance agencies ever been cancelled by an insurer or UMA?

Yes  No If yes, please supply details on a separate sheet.

### Additional information

<b>Total book size</b>	
<b>Personal split</b>	
<b>Commercial split</b>	

### Banking details of brokerage

Please attach a separate sheet if necessary.

<b>Bank</b>	<b>Branch</b>
<b>Account type</b>	<b>Branch code</b>
<b>Account holder</b>	<b>Account no.</b>

Should any of the following apply to you, please attach the following documents to your application form.

<b>Registered company</b>	Copy of company registration form/ certificate to commence business	Yes	No
<b>Partnership</b>	Letter from auditor	Yes	No
<b>Close corporation</b>	Copy of CK1 & CK2 (2A) if applicable	Yes	No
<b>Sole proprietary</b>		Yes	No
<b>Certificate of change of name if applicable</b>		Yes	No
<b>VAT registered</b>	Certified copy of VAT registration form	Yes	No
<b>FSP licence</b>	Copy of FSP licence & annexure: Conditions and restrictions (Annexure consists of 2 pages)	Yes	No
<b>Do you have procedures in place to comply with FICA if applicable</b>		Yes	No
<b>Letter of good standing from SARS</b>		Yes	No
<b>Copy of PI insurance policy/certificate of insurance</b>		Yes	No
<b>Proof of banking details</b>		Yes	No
<b>Copy of signed contract/broker agreement</b>		Yes	No
<b>Proof of IGF</b>		Yes	No

### Who should receive what

Category	Full name	Email
<b>Commission statements</b>		
<b>Non payment reports</b>		
<b>General</b>		
<b>Policy cancellations</b>		
<b>Policy activations</b>		
<b>Renewals</b>		
<b>Claims</b>		

Are you a member of the following voluntary organisations?

<b>FIA</b>		
<b>IISA</b>		
<b>IIG or IING</b>		

## The fine print

Please read through the terms and conditions below before signing this application.  
By signing this application, I agree to all the terms and conditions as stated in the legal agreement.  
I warrant that all of the information contained in this application document is true and correct.

I understand that the insurer may approve or reject this application at its sole discretion. If this application is successful, the insurer's standard agreement relating to business of this nature ('the agreement') will govern the relationship between the parties. I agree that any other terms and conditions on which the applicant may wish to rely are excluded.

I warrant that I am duly authorised to sign this application of behalf of the applicant.

Signature \_\_\_\_\_ For and on behalf of \_\_\_\_\_

Full name \_\_\_\_\_ Designation \_\_\_\_\_

Date \_\_\_\_\_

## For our use only

To make an informed decision on this application, I, the undersigned hereby warrant that the application has been properly assessed and that all necessary checks to verify the legal and FSP status of the applicant have been performed properly.

Signature \_\_\_\_\_ Approved 

Yes	No
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Print name \_\_\_\_\_ Comments \_\_\_\_\_

Date \_\_\_\_\_

Designation \_\_\_\_\_ Broker code \_\_\_\_\_