

PLEASE NOTE THAT ALL QUESTIONS ON THIS FORM MUST BE COMPLETED IN FULL

PLOT/SMALLHOLDING/FARM EVALUATION FORM

BROKER NAME : _____

INSURED'S NAME : _____

OCCUPATION : _____

RISK ADDRESS : _____

POSTAL CODE : _____

INCEPTION DATE : _____

CURRENT INSURER : _____

POLICY NUMBER : _____

SUM INSURED – CONTENTS : R _____

BUILDINGS : R _____

1. Is the property situated on a plot, farm or smallholding? _____

2. Please state size is the smallholding/plot/farm?

3. Is the smallholding/plot/farm cultivated? YES / NO

If yes, please provide full details _____

4. Is there a plantation/forest/dry grass/other agricultural fields within 500m from the main dwelling? YES / NO

If yes, please provide full details _____

5. Are there any commercial activities on the premises? (tuckshop, spazas etc) YES / NO

If yes, please provide full details _____

6. Main dwelling construction:

Walls : brick/concrete/wood/asbestos/fibre glass/zink other: _____

Roof : thatch/zink/asbestos/wood/fibre glass/tiles other: _____

PLEASE NOTE THAT SEPARATE THATCH QUESTIONNAIRE TO BE COMPLETED IF ROOF IS THATCH

Other buildings not attached to the main dwelling (outbuildings, second dwelling, lapa's, barns, wendy houses etc):

Walls : brick/concrete/wood/asbestos/fibre glass/zink other : _____

Roof : thatch/zink/asbestos/wood/fibre glass/tiles other: _____

PLEASE NOTE THAT SEPARATE THATCH QUESTIONNAIRE TO BE COMPLETED IF ROOF IS THATCH

7. In whose name is the building registered? _____

8. Which financial institution holds the bond? _____

9. Describe the existing security measures at the dwelling:

a) Burglar proofing on all opening windows? YES / NO

If no, please provide details _____

b) Security gates in front of all opening doors leading to the outside? YES / NO

If no, please provide details _____

c) 24 hour radio alarm linked to a reaction unit (SAIDSA APPROVED) YES / NO

If yes to radio linked alarm, please state distance to armed reaction company _____ km

d) Is there an electric fence surrounding the property? YES / NO

e) Watch dogs? YES / NO

f) Is there someone home during the day? YES / NO

If yes, whom? _____

10. Is the property enclosed? If yes, please provide a full description:

11. When was the building built? _____ In what condition are the buildings? _____

12. How many families live on the premises? _____

If more than 1 family, please provide full details of other families relationship to insured: _____

13. Are there any buildings are under construction on the smallholding/plot/farm? YES / NO

14. Is there a supply of feed or hay stored on the smallholding/plot/farm? YES / NO

If yes, how much and how far from the buildings? _____

15. What is the distance between the dwelling and the nearest:

Neighbours _____

Police station _____

Business Centre _____

Fire Brigade _____

16. Where is the vehicle/s parked overnight?

Vehicle Make & Model

Placed Parked

a) _____

b) _____

c) _____

d) _____

17. Who is the registered owner of the vehicle/s?

Vehicle make & model

Place Parked

a) _____

b) _____

c) _____

d) _____

18. Please provide a full claims history of all losses over the past three years:

Type of loss

Date/Year of loss

Total claims amount

19. Has any insurer ever cancelled, declined to accept, refused to renew or imposed any special conditions on any policy held by you, any member of your family normally residing with you or any person nominated to drive your vehicle/s? YES / NO

If yes, please provide full details: _____

Applicants signature

Date

Brokers signature

Date