

# COMMERCIAL POLICY QUOTATION

Telephone: (011) 640-3188 Facsimile: (011) 640-6524  
Physical Address: 334 Louis Botha Avenue, Orange Grove, 2192  
Postal Address: P O Box 46293, Orange Grove, 2119



## SECTION ONE

Client Name : \_\_\_\_\_  
Business Name : \_\_\_\_\_  
Risk Address : \_\_\_\_\_  
Contact Details : \_\_\_\_\_  
Phone Number(s) : \_\_\_\_\_ Fax: \_\_\_\_\_  
Cellular Number : \_\_\_\_\_  
Inception Date : \_\_\_\_\_ Annual/Monthly \_\_\_\_\_  
Nature of Business : \_\_\_\_\_

## SECTION TWO

<b><u>SECTION</u></b>	<b><u>SUM INSURED</u></b>
1. <b>Fire</b>	
a) Stock	_____
b) Plant & Machinery	_____
c) Rental	_____
2. <b>Buildings combined</b>	_____
3. a) Office Contents	_____
b) Theft for 20% of contents	_____
4. <b>Business Interruption</b>	_____
5. <b>Accounts Receivable</b>	_____

**SUM INSURED**

- 6. **Theft (first loss)** \_\_\_\_\_
  - a) Malicious Damage following theft \_\_\_\_\_
- 7. **Money (during normal business hours)** \_\_\_\_\_
- 8. **Glass (average applies)** \_\_\_\_\_
- 9. **Fidelity** \_\_\_\_\_
- 10. **Goods in Transit**
  - a) Annual Carry \_\_\_\_\_
  - b) Carry per load \_\_\_\_\_
- 11. **Business All Risks** \_\_\_\_\_  
(Description as per attached list)
- 12. **Accidental Damage** \_\_\_\_\_
- 13. **Public Liability** \_\_\_\_\_
  - a) Product Liability      Yes / No \_\_\_\_\_
  - b) Work Away              Yes / No \_\_\_\_\_
- 14. **Employers Liability** \_\_\_\_\_
- 15. **Group Personal Accident / Stated Benefits** \_\_\_\_\_
- 16. **Computer / Electronic Equipment** \_\_\_\_\_  
(Description as per attached list)
- 17. **Motor**
  - a) Type\_\_\_\_\_ Year\_\_\_\_\_ Reg\_\_\_\_\_ NCB\_\_\_\_\_ G.Lock/Tracking\_\_\_\_\_
  - b) Type\_\_\_\_\_ Year\_\_\_\_\_ Reg\_\_\_\_\_ NCB\_\_\_\_\_ G.Lock/Tracking\_\_\_\_\_
  - c) Type\_\_\_\_\_ Year\_\_\_\_\_ Reg\_\_\_\_\_ NCB\_\_\_\_\_ G.Lock/Tracking\_\_\_\_\_
  - d) Type\_\_\_\_\_ Year\_\_\_\_\_ Reg\_\_\_\_\_ NCB\_\_\_\_\_ G.Lock/Tracking\_\_\_\_\_
  - e) Type\_\_\_\_\_ Year\_\_\_\_\_ Reg\_\_\_\_\_ NCB\_\_\_\_\_ G.Lock/Tracking\_\_\_\_\_
- 18. **SASRIA** (where applicable) \_\_\_\_\_