



LOMBARD

Trade Credit

Lombard Insurance Company Limited is a registered Financial Services Provider.

SECTIONS TO BE COMPLETED

In order for us to provide the best possible quote to suit the needs of your organisation, we ask you complete the necessary sections and sign the declaration form.

DOMESTIC POLICY

Section A

Section B

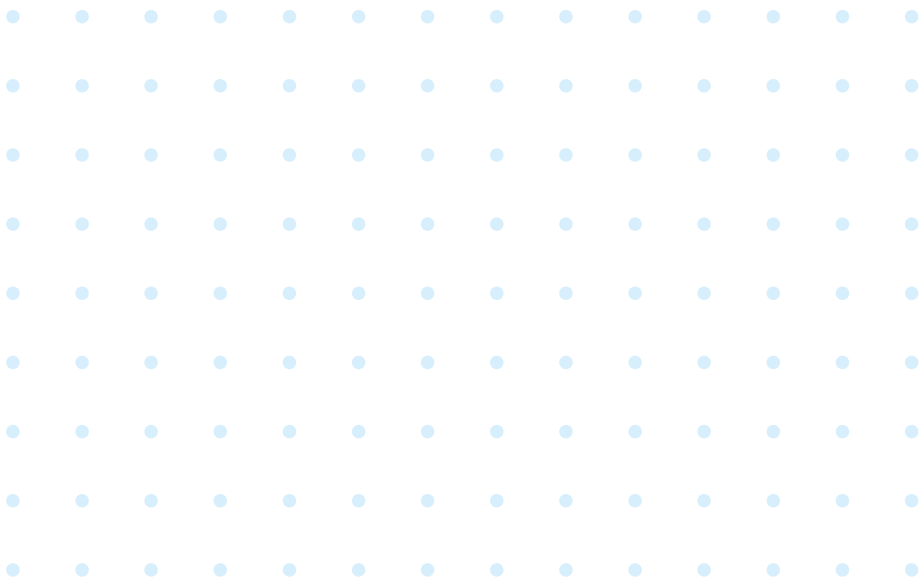
EXPORT POLICY

Section A

Section C

BROKER NOMINATIONS

NAME AND ADDRESS OF BROKER:



SECTION A

INFORMATION ON THE APPLICANT

Registered name

Trading name

Registration no.

Physical address

Postal code

Postal address

Postal code

Telephone no.

Fax no.

Contact name

Position

E-mail

Date established

Bank, branch and account number

Directors; partners; members; sole proprietor

Additional companies to be added as a Co-Insured

1:

Registration no.

2:

Registration no.

3:

Registration no.

YOUR BUSINESS ACTIVITY

Description of goods/services supplied to be insured

Main business activity

Are you a:

Manufacturer

Wholesaler

Retailer

Distributor

Other (please specify)

VAT no.

Are you currently credit insured? Yes

No

If yes, with which insurer?

SECTION B

TURNOVER ANALYSIS (DOMESTIC SALES ONLY)

Financial year ending		Turnover	Number of buyers	Normal terms
Month	Year			
	20			
	20			
	20			
Year to date				

ANTICIPATED TOTAL TURNOVER FOR NEXT 12 MONTHS

Financial year ending	Projected total turnover	Provision for bad debt

Turnover to subsidiary or associate companies	%
Turnover to government bodies	%
Cash turnover	%

Maximum balances outstanding

Outstanding balance	Number of buyers
0 – R50 000	
R50 001 – R100 000	
R100 001 – R500 000	
R500 001 – R1 000 000	
R1 000 001 – R2 000 000	
R2 000 001 – above	

PAST BAD DEBT EXPERIENCE

Financial year	Number of bad debts	Total value of bad debt	Largest bad debt	Name of company
20				
20				
20				
Year to date				

SECTION B (cont.)

DOMESTIC CREDIT CONTROL PROCEDURES

Who is responsible for the credit control function?

Position

Is there a written credit policy and procedure in place?

Yes No

On what basis is a credit limit and payment terms established?

At a level of:

(a) Audited/management accounts

Yes No

R

(b) Bureau reports

Yes No

R

Which bureau?

(c) Bank reports

Yes No

R

(d) Report of visit to buyer's premises

Yes No

R

(e) Other (Please specify)

Yes No

R

How often is the information updated?

How often and when are credit limits reviewed?

(Please specify)

What are your normal payment terms?

Please state maximum extended terms

Are there any special terms granted that differ from your standard terms?

Yes No

(Please give details)

Are credit limits recorded on your system?

Yes No

Do you sell from consignment stock

Yes No

(If yes, please provide details)

Do you hold reservation of title?

Yes No

When are invoices raised?

When are statements posted?

At what point do you consider a payment overdue?

If a customer is overdue, when would you normally:

Stop all further supplies _____ days past due date.

Take recovery/collection _____ days past due date.

Take legal action _____ days past due date.

SECTION C - EXPORT (cont.)

MAXIMUM BALANCE OF EXPORT ACCOUNTS RECEIVABLE IN YOUR BOOKS

Outstanding balance	Number of buyers
R500 – R250 000	
R250 001 – R500 000	
R500 001 – R1 000 000	
R1 000 001 – R2 000 000	
R2 000 001 – R5 000 000	
over R5 000 000	

EXPORT CREDIT MANAGEMENT

1. Do you have a separate export department?

2. Who is responsible for handling your export debtors?

3. How long has your company been involved in the export market?

4. How do you obtain international clients?

5. What credit precautions do you take before supplying these customers?

6. How are credit limits reviewed?

7. Are there agents involved in SA or abroad?

8. Do you visit export clients. If so how often?

9. Do you use an export credit bureau?

10. Which bureau?

SECTION C - EXPORT (cont.)

PRINCIPLE EXPORT CUSTOMERS

	Registered name	Address	Tel. no.	E-mail	Credit limit required	Trading experience with this debtor	
						Years known	Payment experience
(1)							
(2)							
(3)							
(4)							
(5)							

DECLARATION

Please read this before signing below

We declare that the statements made in this form are to the best of our knowledge true and this form does not withhold any material facts. We understand that non-disclosure or misrepresentation of a material fact will entitle underwriters to avoid this insurance.

(A material fact is one likely to influence acceptance or assessment of this proposal by underwriters. If you are in any doubt as to whether a fact is material or not you must disclose it in the space below).

We understand that the signing of this proposal does not bind the Applicant to complete the insurance but agree that, should a contract of insurance be concluded, this proposal and the statements made therein shall form the basis of the contract.

We hereby consent to Lombard processing our personal information, including name, registration number, contact information (e-mail address, physical address, and telephone number), financial information and information of our debtors, (“**Personal Information**”) for the purpose of processing (both by computer and manually) our application for insurance cover, issuing us with a policy of insurance, issuing of credit limits in respect of insured debtors and generally providing us with services under the policy of insurance (“Purpose”). All Personal Information will be processed in accordance with South African data protection legislation, in particular the Protection of Personal Information Act 4 of 2013.

We undertake to obtain consent from our debtors to transfer their personal information, including their names, registration numbers, contact information (e-mail addresses, physical addresses, and telephone numbers) and financial information for the Purpose.

Signature

Date

Name of Authorised Signatory

Title of Authorised Signatory

PLEASE ATTACH THE FOLLOWING

- Copy of latest aged analysis (preferably in Excel format)
- A cancelled letterhead
- Your company's financial statements

Lombard Ethics Hotline to report any form of unethical practice, including sexual harassment, racial discrimination and whistleblowing on suspicious transactions, in an anonymous and secure manner. Contact details as follow:

Postal Address KPMG Hotpost PO Box 14671 Sinoville Pretoria 0129

Telephone no. 0800 864 727 toll-free

Fax no. 0800 200 796

E-mail fraud@kpmg.co.za

Disclosures by Trade Credit Division - a division of Lombard Insurance Company Ltd

We are a licensed Financial Services Provider in terms of the Financial Advisory and Intermediary Services (FAIS) Act and are required to make the following disclosures in terms of that Act, which also governs aspects of the way we do business. One of the aspects is that you are able to make informed decisions. There are also responsibilities to you, our client. This document deals with both aspects.

FINANCIAL SERVICE PROVIDER'S INFORMATION

Business name	Lombard Insurance Company Limited
Physical address	Ground Floor, Building C, Sunnyside Office Park 2 Carse O' Gowrie Road, Parktown
Postal address	PO Box 2740 Parklands 2121
Website	www.lombardins.com
Trade name	Lombard Insurance
Registration no.	1990/001253/06
Financial services provider no.	1596
Compliance and complaints officer	Customer satisfaction and retention of your business is vital to us and has been one of the tenets of our ongoing success. Feedback on our service is always appreciated (both negative and positive) and we'd appreciate it if you would please refer initial problems (if any) to the representative handling your account or to their superior. If you cannot achieve satisfaction please don't hesitate to contact our compliance/complaints officer:
Compliance and Complaints	E-mail complaints@lombardins.com Telephone no. (011) 551-0600 Fax no. (011) 551-0603
Financial categories for which Lombard Insurance Company Limited is licensed to render financial services	1.2. A Short-Term Insurance : Personal Lines – Advice 1.2. B Short-Term Insurance : Personal Lines – Intermediary Services 1.6. A Short-Term Insurance : Commercial Lines – Advice 1.6. B Short-Term Insurance : Commercial Lines – Intermediary Services

Lombard Insurance Company Limited holds Professional Indemnity and Fidelity Insurance cover.

AUTHORISED INTERMEDIARY'S INFORMATION

We hereby appoint the following intermediary (broker) to act on our behalf.

Intermediary's Registered Name _____

Representative's First name _____

Representative's Surname _____

Telephone no. _____

Fax no. _____

E-mail address _____

FSP no. _____

The Ombudsman for short-term insurance is available to advise you in the event of claim problems which are not satisfactorily resolved by the insurance intermediary and/or the insurer, contact details follow:

Postal Address Box 32334 Braamfontein 2017

Telephone no. (011) 726 8900

Fax no. (011) 726 5501

E-mail info@osti.co.za

FAIS Ombudsman for problems in terms of the FAIS Act

Postal Address Box 74571 Lynwood Ridge Pretoria 0040

Telephone no. (012)470 9080

E-mail info@faisombud.co.za

PRODUCT SUPPLIER INFORMATION

Legal and contractual relationship **Lombard Insurance Company Limited** is an independent FSP, authorised to provide short term financial services, collect premium and undertake insurance related duties.

REMUNERATION AND COMMISSIONS RECEIVED

The Premium earned by us will be disclosed in the Policy Schedule. Any intermediary arranging a Policy on behalf of Lombard Insurance Company Limited may receive a commission.

FINANCIAL PRODUCT NAME AND CONDITIONS

The Policy Schedule and the Credit Insurance Policy Document contain details of the product name and all the terms and conditions relating thereto. If you have any queries relating to this product, please contact the Trade Credit Division on (011) 551 0600.

Take Note:

1. You are required to pay the premium on presentation of invoice, otherwise no Insurance Cover applies.
2. Incorrect or non-disclosure by you of relevant facts may result in action against the applicant/s. This duty to disclose remains your responsibility.
3. Do not sign any written or printed form or document unless all details required to be inserted thereon have already been inserted and you have read and understood the content thereof. Complete all forms in ink.
4. Keep all documents provided to you. We are required to supply you with a copy or written or printed record of the Policy Schedule and the Credit Insurance Policy Document at inception of the Policy.
5. Ensure that you receive written confirmation of important changes to the Insurance Cover and advice provided to you.
6. Don't be pressurised to buy any product.
7. You may require advice on products purchased by you or risks to which you are exposed. If you do not believe you have received adequate advice or are unsure of the advice you have received, please ask your representative or their superior, to explain in detail.

IMMATERIAL FINANCIAL INTEREST

It is generally accepted practice within our industry that "entertainment" and "gifts and incentives" are collectively referred to as an "immaterial financial interest" in terms of the FAIS Act-Conflict of Interest Regulations. These immaterial financial interests are often provided by the product provider to the financial services provider (broker) and vice versa and potentially from and to other financial service providers. The Rand value of such interest are limited, by legislation, per calendar year, to R1000, in respect of any one individual be they the provider of or beneficiary of such immaterial financial interest. Such limitations are dealt with and managed by our Conflict of Interest Management policy.

A detailed copy of our Conflict of Interest Management policy can be obtained from our offices upon written request to compliance@lombardins.com.



LOMBARD

WWW.LOMBARDINS.COM

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Reg No: 1990/001253/06 VAT Reg no: 4360121331, Lombard Insurance Company Limited is a licensed Insurer and Authorised Financial Services Provider: (FSP 1596)

ETHICS & FRAUD HOTLINE: 0800 864 727