



New National Esteem



POLICY DETAILS			
BROKER:	(4498) Hlanganani Insurance Brok	BRANCH:	FSP SOLUTIONS
POLICY NUMBER:	6378016	DATE:	22/04/2008
PRODUCT:	Motor comprehensive	AGENT CODE:	4498
CLIENT:	Mr T TestSurname	POLICY STATUS:	Active
VERSION START DATE:	31/10/2007	CURRENT POLICY VERSION:	1
INITIAL INCEPTION DATE:	31/10/2007		

INTERMEDIARY DETAILS			
INTERMEDIARY NAME:	(4498) Hlanganani Insurance Brok	CODE:	4498
TEL:	012 6631883	FAX:	N/A
E-MAIL ADDRESS:	amukelanin@yahoo.com		
PHYSICAL ADDRESS:	302 Victor Park Oval Gardens Centurion Protoria 0157	POSTAL ADDRESS:	302 Victor Park Oval Gardens CENTURION Protoria 0157

PERSONAL DETAILS			
PHYSICAL ADDRESS:	Test Line 1 CENTURION VerwoerdPark 0157	POSTAL ADDRESS:	Test Line 1 CENTURION VerwoerdPark 0157
BANK:	FIRST NATIONAL BANK	HOME TELEPHONE:	011 2065055
ACCOUNT NUMBER:	00000000001	WORK TELEPHONE:	011 2065056
BRANCH CODE:	250856	CELL PHONE:	011 2065057
ACCOUNT TYPE:	Cheque	FAX NUMBER:	011 2065058
ACCOUNT HOLDER:	Test Acc Holder	E-MAIL ADDRESS:	test@test.co.za

MOTOR VEHICLE DETAILS

RISK ADDRESS:	Test Line 1 CENTURION VerwoerdPark 0157	MAKE & MODEL:	KIA PICANTO 1.1 LX A/C
		REGISTRATION:	TEST01GP
		TRACKING:	Bandit Intertrac
		GEARLOCK:	Accord ACC 100
		IMMOBILISER:	Autowatch 329 Ti

Your risk address is the place where you keep the items that we are insuring. Please note that your risk address is used by us to calculate your premium as well as to decide whether we are going to accept the policy. We also decide on the terms and conditions of your Policy of Insurance, based on your risk address. WE WILL NOT CONTINUE TO INSURE YOU IF YOU FAIL TO INFORM US WHEN YOUR ADDRESS HAS CHANGED.

YEAR:	2006	TYPE OF COVER:	Comprehensive
MOST REGULAR DRIVER:	Mr T TestSurname	MOST REGULAR DRIVER ID:	8302185153089

The term "most regular driver" refers to the person who drives the vehicle more often and more frequently than anybody else. If the most regular driver details above are incorrect, we may elect to reject your claim. We may also reject your claim if the above details have changed and you have not informed us of the change. We use the most regular driver details to calculate the monthly premium, as well as to determine the Terms and Conditions of the Policy of Insurance, as well as determining the initial and/or continual acceptance of the risk.

RADIO MAKE:	N/A	RADIO VALUE:	
USE:	Strictly Private	NO CLAIM BONUS:	None

You have elected the above category of use of the vehicle. If you have elected PRIVATE USE, we will only cover you when the vehicle is used for social, pleasure and domestic purposes as well as journeys between your risk address and your permanent place of work. With private use we will not cover you when the vehicle is used for business use. If you have elected BUSINESS USE, we will cover you for private use as stipulated above as well as servicing, erecting, selling, delivery, maintenance work, visiting clients or work purposes. Please also note that if you have elected BUSINESS USE, nobody else than the regular driver and his/her spouse may use the vehicle for business purposes.

To qualify for a No Claim Bonus, the regular driver must have had uninterrupted, comprehensive vehicle insurance. You must be able to provide documentary proof of your previous insurance and claims history, if requested at claims stage.

FINANCIAL CO:	N/A	FINANCE BRANCH:	N/A
FINANCE ACC NO:	N/A		
AD COVER:	No	SUM INSURED:	Retail Value
DEPOSIT COVER:	No	TRACK.SUBSCR AFTER DISCOUNT:	R 0.00
		PREMIUM:	R 524.85

NON-STANDARD ACCESSORIES

TYPE:	Car Radio	AMOUNT:	R 2,000.00
DESCRIPTION:	TEST Radio		

MOTOR VEHICLE ENDORSEMENT

This endorsement forms part of your New National Esteem Policy Wording and replaces the first paragraph under the heading The Insured Vehicle, on page 15 of the Policy Wording, in its entirety:

If the insured vehicle has been stolen or hijacked, or if the vehicle is deemed by us to be uneconomical to be repaired, we will replace the vehicle, or at our option we will pay you the sum insured as stated in the schedule or the reasonable Retail Value whichever is the lesser. "Retail Value" is deemed to be the Retail Price as evidenced by the production and contents of the publications "Auto Dealers Guide" or "Commercial Vehicle Guide" duly adjusted for condition. These Publications are commonly referred to as "The Mead & McGrouther Booklets"

MOTOR VEHICLE EXCESSES

1. Basic Vehicle Excess	R2350.00, OR 2.25% of the value of the vehicle, whichever is the greater
2. Windscreen	R 490.00 OR 20% of the value of the windscreen, whichever is the greater

ADDITIONAL MOTOR VEHICLE EXCESSES

1. Where the vehicle is stolen and not recovered before settlement of the claim, or recovered and written off:	5% of the value of the vehicle or a minimum of R1400.00 and a maximum of R 3000.00
2. Outside South African Borders	R 5750.00
3. If the Most Regular driver and under 25	R 1450.00
4. If not the Most Regular Driver and under 25	R 2850.00
5. If not the Most Regular driver and over 25	R 1850.00
6. Learners License and accompanied by a driver with valid driver's license	R 1450.00
7. License less than 2 years	R 1450.00
8. If the vehicle is involved in an accident:	R 1850.00
a) Within the first 90 days of inception of the policy	R 1850.00
b) Within the first 6 months of inception of the policy	R 1550.00
c) During the 2nd half of the first year since inception of policy	R 1250.00
d) 2nd claim within the first year since inception of policy	R 1250.00

HOUSEHOLDERS DETAILS

RISK ADDRESS:	Test Line 1 VerwoerdPark CENTURION 0157		
---------------	--	--	--

Your risk address is the place where you keep the items that we are insuring. Please note that your risk address is used by us to calculate your premium as well as to decide whether we are going to accept the policy. We also decide on the terms and conditions of your Policy of Insurance, based on your risk address. WE WILL NOT CONTINUE TO INSURE YOU IF YOU FAIL TO INFORM US WHEN YOUR ADDRESS HAS CHANGED. ALSO NOTE: Items stolen from your garage or outbuildings will only be covered where we can see the damage caused by the break in.

TYPE OF DWELLING:	House (Main Residence)	AREA TYPE:	1. Residential Suburb
TYPE OF COVER:	Comprehensive	ALARM:	Saidsa Approved Alarm
ROOF CONSTRUCTION:	Standard Tile	SABS LIGHT COND:	N/A
OCC. DURING DAY:	No	RET/SEC. VILLAGE:	No
BURGLAR BARS:	Yes	EXT. SECURITY GATES:	Yes
ADD. LOCKING MECH.:		ELECTRIC FENCING:	Yes
OUTSIDE BUILDINGS:	No	OUTBUILDING CONSTR:	N/A
OUT. ROOF CONSTR:	N/A	OUT SABS LIGHT COND:	N/A
NO CLAIM BONUS:	None	PERIMETER WALL:	Brick Wall more than 180cm
SUM INSURED:	R 250,000.00	PREMIUM:	R 372.92

HOUSEHOLDERS EXCESSES

1. R 350.00 for each and every claim excluding theft and burglary
2. R 1750.00 for theft and burglary
3. Damage to intercom system only

R 550.00

Policy Summary	
EMERGENCY ASSISTANCE :	INCLUDED
SASRIA:	INCLUDED
ADMIN FEE:	R 38.05
TOTAL MONTHLY PREMIUM, INCLUDING VAT:	R 742.47
COMMISSION PAYABLE TO BROKER	
ADMIN FEE:	R 13.68
COMMISSION:	R 66.62

IMPORTANT NOTE
Emergency Roadside Assistance: Telephone Number : 0860 773 773
Emergency Household Assistance: Telephone Number : 0860 773 773.

INFORMATION SHARING
I (the client) declare that ...
- I acknowledge that the sharing of insurance information for underwriting and claims purposes (including credit information) between insurers is in the public interest as it enables insurers to underwrite policies and assess risks fairly and to reduce the incidence of fraudulent claims with a view to limiting premiums.
- On my own behalf and on behalf of any person I represent herein, I hereby waive my right to privacy with regard to underwriting or claims information (including credit information) that I provide or that is provided by another person on my behalf in respect of any insurance policy or claim made or lodged by me.
- I acknowledge that the insurance information provided by me may be stored in the shared database and used as set out above as well as for any decision pertaining to the continuance of my policy or the meeting of any claim I may submit.
- I consent to such information being disclosed to any other insurance company or its agent.
- I acknowledge that the information may be verified against legally recognised sources or databases.

Your monthly premium is based on the information reflected on your schedule. The acceptance and continual acceptance of the risk is also based on the information reflected on the schedule. Please ensure that all the information is correct as any misrepresentation on your behalf could result in non-payment of claims:

Where are you presently insured ? :	Regent
How many vehicle claims has the Most Regular Driver had in the past 3 years ?:	0
Nature of claims/losses:	
Amount of claims/losses:	0
Insurer names :	Regent
Previous insurer Policy Number:	0000000001
Date driver's license issued:	N/A
Has your license ever been endorsed ? :	No
Has any insurer ever cancelled your or any member of your households insurance, applied special terms or refused a quotation?:	N/A
Will a person with an endorsed license or who has been refused insurance ever drive the vehicle ? :	No
Are you suffering from any mental or physical disability?:	N/A
Do you accept the terms and conditions of this policy ? :	Yes

Endorsements:

We confirm that theft or hijack cover will only commence once an approved inspection station has inspected the vehicle.

Your monthly premium is payable in advance.

If any premium payment is not collected by the due date you will enjoy no cover in the month for which the premium was not received.

This schedule of insurance, together with your policy wording, forms the basis of the contract between yourself and New National Assurance Company Limited. Please familiarise yourself with the contents.

FSP SOLUTIONS DISCLOSURE

In terms of the Financial Advisory and Intermediary Services Act (FAIS) (ACT NO 37 OF 2002) the following information must be disclosed to clients and potential clients:

Full Name: FSP Solutions (Pty) Ltd, FSP No 7889
Physical address: Porta Nova Building, Gazelle Close,
Corporate Park South, Midrand.
Postal Address: P O Box 50030, Randjiesfontein, 1683
Telephone: 011 — 206 5000
Fax: 011 — 206 5005
e-mail: info@fspolutions.com

Our call centre agents represent FSP Solutions in providing advice and/or intermediary services on the following business lines:

- * Short term Insurance (personal lines & commercial)
- * Funeral Policies (Long-term insurance category A)

FSP Solutions have been operating since 2003.

As representatives of FSP Solutions all our call centre agents are fit and proper and have been accredited to provide advice and/or intermediary services on the following product providers' products:

* Rentmeester * AIG * Regent * New National
* Unity * Santam * Hollard * Auto & General

FSP Solutions does not own more than 10 % of issued shares directly or indirectly of any life insurer or product provider.

FSP Solutions is not an associated company of any life insurer or product provider.

FSP Solutions have not earned more than 30 % of total commission from any one product provider.

FSP Solutions earn income from fees that the product provider pays for the products being administered for their clients.

FSP Solutions has Professional Indemnity Insurance cover of R5 Million and Fidelity Insurance Cover of R1 Million.

Moonstone Compliance (Pty) Ltd is the businesses compliance officer and is represented by Andrie Steyn. Moonstone Compliance can be contacted at:

Physical Address: Valerida Centre, 1st Floor, Piet Retief Street, Stellenbosch,
Phone Number: 7600
Fax Number: (021) 883 8000
E-Mail Address: (021) 883 8005
asteyn@moonstonecompliance.co.za
www.moonstonecompliance.co.za

We are committed to comply with FAIS since the purpose of the Act is to protect you, our client. In that regard we have a complaints resolution system which you can obtain by requesting it by e-mail or fax. You can also visit us at our office and obtain a copy if you so wish. If you have any queries or concerns, please don't hesitate to contact us by fax or e-mail. If you do not receive acceptable assistance, you can direct your complaint to the Ombud for FAIS at the following contact details:

Ombudsman: Mr Charles Pillay
PO Box 74571, Lynnwood Ridge, 0040
Tel No: 0860 324 766

STATUTORY NOTICE TO SHORT-TERM INSURANCE POLICYHOLDERS
IMPORTANT- 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:

STATUTORY NOTICE	INFORMATION
<p>1. About the intermediary (insurance broker)</p> <p>a) Name, physical address and postal address and telephone number.</p> <p>b) Legal status and any interest in the insurer.</p> <p>c) Whether or not in possession of professional indemnity insurance.</p> <p>d) Detail of how to institute a claim.</p> <p>e) Rand amount of fees and commission payable.</p> <p>f) Written mandate to act on behalf of insurer.</p>	<p>This information must be provided to you by your insurance advisor/broker. If your advisor does not provide this information when requested for, please contact us directly.</p>
<p>2. About the insurer</p> <p>a) Name, physical address and postal address and telephone number.</p> <p>b) Telephone number of compliance department of the insurer.</p> <p>c) Details of how to institute a claim and/or complaint.</p> <p>d) Type of policy involved.</p> <p>e) Extent of premium obligations you assume as policyholder.</p> <p>f) Manner of payment of premium, due date of premiums and consequences of non-payment.</p>	<p><u>Contact Details:</u></p> <p>New National Assurance Company Limited P O Box 1610 Durban 4000 Located at: 5th Floor Field House 25 Field Street, Durban Tel: (031) 306 1504 Fax: (031) 301 1166 E-mail: newnational@nnac.co.za</p>
<p>3. Other matters of importance</p> <p>a) You must be informed of any material changes to the information referred to in paragraph 1 and 2.</p> <p>b) If the information in paragraph 1 and 2 was given orally, it must be confirmed in writing within 30 days.</p> <p>c) If any complaint to the intermediary or insurer is not resolved to your satisfaction, you may submit the complaint to the Registrar of Short term Insurance.</p> <p>d) Polygraph or any lie detector test is not obligatory in the event of a claim and the failure thereof may not be the sole reason for repudiating a claim.</p> <p>e) If premium is paid by debit order:</p> <p>(i) it may only be in favour of one person and may not be transferred without your approval; and</p> <p>(ii) the insurer must inform you at least 30 days before the cancellation thereof, in writing, of its intention to cancel such debit order.</p> <p>f) The insurer and not the intermediary must give reasons for repudiating your claim.</p> <p>g) Your insurer may not cancel your insurance merely by informing your intermediary. There is an obligation to make sure the notice has been sent to you.</p> <p>h) You are entitled to a copy of the policy free of charge.</p>	<p><u>Our Compliance officer is:</u></p> <p>Mr. G.J. Pillay P O Box 1610 Durban 4000 Tel: (031) 306 1504 Fax: (031) 301 1166</p> <p>Should you have any complaints about the availability or adequacy of information required to be provided herein, please bring this to the attention of our compliance officer.</p>
<p>4. Warning</p> <p>Do not sign any blank or partially completed application form.</p> <p>Complete all forms in ink.</p> <p>Keep all documents handed to you.</p> <p>Make notes as to what is said to you.</p> <p>Don't be pressurised to buy the product.</p> <p>Incorrect or non-disclosure by you or relevant facts may influence an insurer on any claims arising from your contract of insurance.</p>	<p>Your policy document contains the name, class and type of policy as well as the details of procedures to follow in the event of a claim.</p> <p>Should anything not be clear, please contact your insurance advisor or nearest New National office for assistance.</p>
STATUTORY NOTICE	INFORMATION
<p>Particulars of Short-term Insurance Ombudsman who is available to advise you in the event of claim problems which are not satisfactorily resolved by the insurance intermediary and/or the insurer.</p>	<p>P O Box 30619 BRAAMFONTEIN 2017 Tel: (011) 627 8900 Fax: (011) 339 7065</p>

5. Particulars of Registrar of Short-term Insurance Financial Service Board.	P O Box 35655 MENLO PARK 0102 Tel: (012) 428 8000 Fax: (012) 347 0221
--	---

(You may be required to sign of copy of this document)

STATUTORY NOTICE	
Premiums and your monetary obligation	<p>Your premium will be collected via debit order and the onus will be on you to make sure that your monthly debit order is met by the financial institution. The premium that will be collected via debit order is due in advance on the first of every month.</p> <p>If your monthly premium is not received by us within 15 days of the due date, cover in terms of this Policy of Insurance will be interrupted for the period for which you did not pay your premium.</p> <p>If you have not paid your monthly premium for a particular month, and we have not received that premium within 15 days of the due date, your cover in terms of the Policy of Insurance will be interrupted. When the cover has been interrupted we have the right to debit your account to reinstate the cover. Cover will only be reinstated on condition that we receive the monthly premium to ensure the recommencement of cover, and in addition to this we will charge you a reinstatement administration fee that will also be collected by ourselves via debit order, failing which this policy will be cancelled with immediate effect.</p> <p>Please note that if the very first premium of this policy is not paid within 15 days of the due date, no cover will be extended in terms of this Policy of Insurance and the policy will be void from inception.</p> <p>Due date will be the first day of every calendar month.</p>
Claims	<p>In the case of any insured event resulting in you submitting a claim under this Policy, you must adhere to the following conditions:</p> <ol style="list-style-type: none"> a) Register the claim telephonically to E.C.A. (Electronic Claims Administration) on 011-2065590. b) Report the incident giving rise to a claim to a S.A.P.S. (South African Police Services) station within 24 hours and to E.C.A. within 30 days. c) Do not admit liability or negotiate with any person. d) Note down the names and addresses of any witnesses. e) If you receive a summons or notice of impending legal action, notify the insurer or E.C.A. immediately and forward any documentation to the insurer or E.C.A. f) Do not give any instruction for any repair unless it has been approved by E.C.A. or the insurer.
General	<p>The policy wording and schedule must be read as one document. If you need any advice on any aspect of your policy, first amount payable (excess), claims procedures or your responsibility to pay premiums, please contact your insurance advisor or FSP Solutions on 011-206 5000, or your controlling New National office.</p>