

Marine Goods in Transit Questionnaire for Road Carriers/Hauliers

Insured's name or trading name:

Insured's ID number:

Insured's VAT number:

Company registration number:

Description of business:

Postal address:

Physical address:

Contact person(s):

Email address:

Telephone number: Cell number:

A. Cargo details

Description of goods to be carried:

New, used or other than new goods:

Maximum value of goods carried by any one conveyance:

Average value of goods carried by any one conveyance:

Estimated Annual Carry:

B. Goods vehicles used

Registration number	Make	Type e.g. Rigid or articulated etc.	Year model	Cargo capacity	Structurally fully enclosed or open/ tarpaulin covered/ canopy covered/ refrigerated or abnormal load or low bed trailer

Please attach a fleet list of vehicles should the above space not be sufficient.



Are registration numbers and company telephone numbers painted on vehicle cabs and on rear doors?

.....

Are immobilisers fitted? Yes No If yes, please give full details:

.....

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Are alarm systems fitted? Yes No If yes, please give full details:

.....

Are two-way radios fitted? Yes No

Do crews have cell phones? Yes No

Are an anti-jamming system installed? Yes No

Is a satellite tracking and recovery system in use? Yes No If so, please give details (for each vehicle if not common to all vehicles)

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Does the client subcontract? Yes No

If yes, please provide names of subcontractors:

.....

Please attach a fleet list of vehicles should the above space not be sufficient.

C. Haulage fee income

Please provide estimated annual haulage fees:

- 1. Estimated annual haulage fees income for the next 12 months R
- 2. Current year R
- 3. Haulage fee – own vehicles R
- 4. Income from sub-contractors R

D. Employee details

How many drivers are employed?

How many crew members are employed?

Are drivers outsourced? Yes No

What is the annual payroll of the drivers?

What is the annual payroll of the crews?

What pre-employment investigations are carried out for drivers, crews, dispatch clerks and all staff with access to orders and deliveries?



How many people are in the cab for each transit?

What training programmes exist for drivers?

How regularly are drivers sent on training programmes?

What is your company's practice regarding prevention of hijacking?

What other emergency procedures are in place and are they rehearsed at regular intervals?

Under what circumstances are the South African Police contacted prior to deliveries to establish safe conditions?

E. Geographical limits

In which countries does the client require insurance?

F. Claims experience

Please list details of all losses over the past five years, whether or not covered by Goods in Transit insurance arranged by you on behalf of owners of goods or by Road Carriers Legal Liability Insurance, and include full details of any hijackings.

Year	Paid	O/S (Outstanding)	Cause of claim

Please attach a copy of the client's standard trading conditions or a section in the contract of carriage which deals with insurance.

G. Name of current insurer

H. Material facts

Please state any facts that the insurer should be aware of:

Declaration

I hereby declare that, to the best of my knowledge and belief, the particulars and answers are **true and correct** and that I have not withheld any information that is likely to influence the decision of the Insurers in regard to this Proposal.

Applicant's signature:

Date:

Protection of Personal Information Act

We understand that the information provided in this application for insurance and all documentation provided with it may be deemed to be personal information in terms of the Protection of Personal Information Act 2013 (the POPI Act) and we will accordingly take all reasonable steps to ensure that your information is processed/used/ stored in accordance with the POPI Act and for the following purposes:

- To verify the information disclosed herein against any other source;
- To communicate with you directly should you request us to and in accordance with relevant regulatory requirements;
- To compile non-personal statistical information to assist in assessing similar risks;
- To assess the risk to be underwritten and, if a Policy of Insurance is issued pursuant to and based upon such information, to use the disclosed information at claims stage to assess any claims that may be made against any such Insurances;
- To transmit your personal information to any affiliate, subsidiary, service provider/consultant/advisor or re-insurer so that we can provide insurance services to you and to enable us to further our legitimate interests including statistical analysis, reinsurance and credit control;
- To combat insurance fraud and properly evaluate risks, we will store your personal information on a shared database created by the South African Insurance Association (SAIA) in order to verify it against available sources and databases on the system.

Personal information of minors

If any information provided herein relates to a Minor (i.e. a child under the age of 18) we require that a competent person (parent/legal guardian) provide consent to the processing of such information for the above purposes and for any purpose that is compatible therewith.

I, (full name of competent person), hereby provide my consent to the processing of any information provided herein relating..... (name of minor whose personal information is disclosed herein) for the purpose as disclosed above. I further understand that I have the right to withdraw this consent at any time but that this may mean that any insurance issued pursuant to this application may be terminated and/or that any claims issued against such insurance may not be able to be finalised.

Further disclosures

Please note that there may be instances where we will be required to transfer your personal information outside South African borders, generally for purposes of furthering the Insurer's legitimate interests regarding reinsurance or for the processing of any claim that arises outside South African borders. However, before transferring your personal information, we will ensure that the entity to whom the information is being transferred is subject to similar data protection conditions as those imposed by the POPI Act failing which we will advise you accordingly and request your consent to transfer information as required.

Note that the provision of the information required/requested herein is mandatory as it is necessary for us to accurately underwrite the insurances, which you are hereby applying for, and if any information is withheld or is misrepresented the Insurer may be entitled to void any insurances issued pursuant to this application.

Although any insurance issued pursuant to this application will be reviewed annually (where appropriate) it is your responsibility to ensure that the information provided to the Insurer remains accurate and up to date, we therefore encourage you to contact us at any time to advise us of changes to the information provided.

In addition, you may contact us at any time to exercise the following rights that you have in terms of the POPI Act (subject to any regulatory obligations placed on us/Santam Ltd):

- To request that we provide you with access to your personal information held/processed by us;
- To request that we erase or correct the your personal information that we hold (where appropriate/possible);

- To request that we transfer any personal information held by us to you or to any other person/system selected by you in a structured, commonly used and machine-readable format;
- To request that we restrict the processing of your personal information for reasons provided for in the POPI Act.

Should you wish to lodge a complaint regarding our compliance with the POPI Act or in respect of the processing of your personal information, please contact the Santam Client Care department (contact details below):

Email: complaints@santam.co.za

Telephone: 0860 102 725

Fax: (021) 915 7434

Alternately, you also have the right to approach the South African Information Regulator (contact details below) should the above process not adequately address your concerns.

Email: complaints.IR@justice.gov.za

Postal address: PO Box 31533, Braamfontein, Johannesburg, 2017

Physical address: JD House, 27 Stiemens Street, Braamfontein, Johannesburg, 2001

Debit order

The premium for this policy is an annual premium but may be paid by monthly debit order instalments through a bank or building society account. If you prefer to pay the premiums by monthly debit order instalments please give the following information:

Name of bank/building society:

Type of account:

Branch code (bank current accounts only):

Name of account holder:

Branch: Account number:

Signature of account holder:

The monthly instalments can be debited to the account on one of the following dates.

Please indicate your preference by ticking the appropriate box:

On or last working day before: 1st or 15th