FIDCURE
FIDELITY GUARANTEE
An Addsure product

Camargue
Specialised Liability Management

BODY CORPORATE FIDELITY GUARANTEE - FIDCURE PROPOSAL FORM

*Mark **relevant** YES/NO box with a tick*

Name of Body Corporate:			Date Established:		
Body Corporate Physical Address:			Body Corporate Postal Address:		
Managing Agent:			PIMA/Fidelity Policy Num:		
Current Bank Balance:			***ITALICISED SECTION TO BE COMPLETED BY AUDITORS***		
Current value of Investments:			***Have any recommendations been made by the Auditors?***	***YES***	***NO***
Annual Levy Income:			***Is Body Corporate Solvent?***	***YES***	***NO***
How many Trustees:			***Is the Body Corporate Liquid?***	***YES***	***NO***
Any present or past claims / incidents regarding Fidelity?	YES	NO	Are Trustees, after enquiry, aware of any Fidelity claims/incidents?	YES	NO
Have you had Fidelity Insurance previously?	YES	NO	If YES, please expand		
Is Internet banking utilised?	YES	NO	Are monies: in a trust account A or own bank account B	A	B
If YES please advise which controls are in place:					

Tick relevant indemnity required:	1,000,000 ☐	2,000,000 ☐	2,500,000 ☐	3,000,000 ☐	4,000,000 ☐	5,000,000 ☐

DECLARATION:

We declare that the statements and particulars in this Proposal Form are true to the best of our knowledge and belief and that we have not misstated, suppressed or omitted any material facts.

We agree that this Proposal Form together with any other information supplied by us shall form the basis of any contract of Insurance effected thereon and shall be incorporated therein.

We undertake to inform Insurers of any material alteration of these facts whether occurring before or after completion of the contract of Insurance.

Signing this Proposal Form does not bind the Proposer to complete this Insurance nor does it bind the Insurer to complete the insurance transaction.

We acknowledge that if this proposal is accepted, the contract of insurance will be subject to the terms and conditions as set out in the policy wording as issued or as otherwise specifically varied in writing by Camargue Underwriting Managers (Pty) Ltd.

DATED THIS _____ DAY OF _____ 20_____

FOR AND ON BEHALF OF: _____

SIGNED BY: _____ _____

Chairman of Board of Trustees Auditors