



MARINE INSURANCE QUESTIONNAIRE

Kindly complete the form hereunder fully, identifying your specific Risk Profile and needs/requirements and we will revert with a no-obligation marine insurance quotation. Please return completed Questionnaire to:

JLT MARINE (PTY) LTD - Risk Profiling Centre

Phone (031)584 2600, Email: Zama_Mhlongo@JLTgroup.com / Nikki_Calverley@JLTgroup.com / marinequotesjlt@JLTGROUP.COM

1 Name Of Freight Operator SIYANQOBA WORLDWIDE EXPRESS (PTY) LTD

Contact Name at Freight Operator _____

Phone Number _____

Fax Number _____

E- Mail _____

2 Name of Insured _____

Full Company Name _____

Contact Name at Insured _____

Phone Number _____

Fax Number _____

E-Mail _____

Vat Number _____

Postal Address _____

General Description of Business _____

Specify the following as applicable

New Client or	<input type="checkbox"/>
Existing Insured Client or	<input type="checkbox"/>
Existing Un-Insured Client	<input type="checkbox"/>
Once off shipment	<input type="checkbox"/>

3 Commodities

List all types of cargo that you intend shipping at the current point in time

Please state if Cargo is New or 2nd Hand

New: Second - Hand:

4 Packaging

Detail the packaging per commodity e.g.palletise, shrink-wrapped, drummed cargo, cartons, crates

5 Main Modes of Transport

E.g. All modes usually have a road leg however we require the main leg of the shipment split into the following percentages - an estimate is acceptable

Seafreight	_____
Airfreight	_____
Road	_____ %
Rail	_____ %
Other (Please detail)	_____ %

6 Packing

Please specify how goods are shipped and the respective percentage

FCL	_____ %
LCL	_____ %
Groupage	_____ %
Breakbulk	_____ %
Other (Please detail)	_____ %
	_____ %

7 Duration of Cover/Incoterms - Imports

Which are the main Incoterms used on your imports / exports

(e.g. EXW / FCA / FOB / CFR / CIF)

Are any imported shipments delivered direct to customers premises

Yes: _____ No:

7 Cont...Duration of Cover/Incoterms - Exports

Which are the main Incoterms used on your imports / exports

(e.g. CIF / CIP / DDU etc)

Are any exported shipments delivered direct to any 3rd party premises, other than the buyers'

Yes: No:

8 List all Potential Trading Countries

Export - From RSA to which countries

Imports - From which countries to RSA

NB - Continents are adequate except for Africa or UN

Sanction Countries where specific countries must be listed

9 Basis of Valuation (BOV)

How to determine the insured value

e.g. Imports - Maximum of Delivered cost plus 20%

Exports - Maximum of CIF + 20%

10 Maximum Value Per Shipment / Insured value of "once off" shipment

i.e. What is the maximum value of your cargo on any one vessel, aircraft, vehicle or rail wagon at any one point in time (This should be based on the BOV in 9 above)

11 Estimated Insured Value for next 12 months

Estimation only for underwriting purposes

Note that the BOV mentioned in 9 above should be considered when calculating your insured value for the next 12 months

Imports:

Exports:

Other:

12 Is Deliberate Storage required

Will you ever have cargo that is stored not in the ordinary course of transit for in excess of 60 days?

If Yes, please provide the the details in the space provided

Yes: No:

Storage location address:

It is an approved storage location?

What Fire Protection Measures are in place:

What Security measures are in place:

Maximum duration of goods in storage:

Maximum value of goods in storage:

13 Nature and Value of Claims or Loss History for the past three (3) years, per year

All losses should be disclosed even if you have only recently amended your terms of sale / purchase and previously did not have an insurable interest and hence suffered no claims / losses previously

14 Value of shipments for past three (3) years

Please indicate the actual insured values of shipments per year, for the last 3 years for underwriting purposes

15 Additional Information

Disclose information which will assist in assessing your risk or would be deemed a material fact by insurers

e.g. security procedures, product sensitivity, risk mitigation procedures you have put in place etc.

Completed By:

Date:

Designation:

Signature:

Do you currently have insurance cover in place for such that is being applied for? If so, do you agree to provide a copy of your current policy noting all terms and conditions so that we can provide you with a comparison of our offering as compared to your existing cover/s, so that you can make an informed decision? Please return this fully completed questionnaire to JLT Marine (Pty) Ltd per the details noted on the top of Page 1.

PLEASE NOTE THAT NON-DISCLOSURE OF MATERIAL FACTS MAY LEAD TO THE PROVISION OF AN INACCURATE/INADEQAUTE QUOTATION REALTIVE TO YOUR NEEDS / REPUDIATION OF A CLAIM AND/OR CANCELLATION OF COVER WITH RETROSPECTIVE EFFECT.

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