

DISCLOSURE NOTICE TO SHORT-TERM INSURANCE POLICY HOLDERS
IMPORTANT - PLEASE READ CAREFULLY - DISCLOSURE AND OTHER LEGAL REQUIREMENTS

(This notice forms part of the Insurance Contract)

As a short-term insurance policyholder, or prospective policyholder, you have the right to the following information:
June 2024

1. About the intermediary (Insurance Broker)

- (a) Name: Centric Risk Management (Pty) Ltd FSP 54170
 (b) Physical Address: 291 Sprite Avenue, Menlyn Woods, Pretoria
 (c) Tel: (083) 274 6666
- Email: info@centricrm.com
 Website: www.centricrm.com
- (b) Legal status and any interest in the insurer
- We are a company registered in accordance with the Companies Act and licensed as Category I FSP and authorised to provide financial services in the form of advice and/or intermediary services in respect of financial products falling within the following license categories 1.2 (Short Term Personal Lines), 1.23 (Short Term Insurance Personal Lines A) 1.6 (Short Term Insurance Commercial Lines).
 - Company registration No. 2022/444348/07 Centric Risk Management (Pty) Ltd.
 - We have a contract with all insurers with whom we deal, to act as an insurance broker.
 - A list of product providers can be provided on request.
 - We do not hold more than 10% of the Insurer's shares. We receive more than 30% of our income from Holland.
- (c) Professional Indemnity Insurance
- We are in possession of PI insurance underwritten by Leppard & Associates (Pty) Ltd. Policy number 51026174.
- (d) In the event of a claim please note the following:
 The procedure to be followed in the event of a claim is detailed in your policy wording. In the event of a claim or possible claim you must notify your Insurer as soon as possible and in any event within 30 days.
 You need to supply the following:
- Details of other insurance covering the same event.
 - Written details of the circumstances surrounding the event - usually by way of claim form.
 - Information, proof, documents, communication, or details in connection with the claim.
- Do not make any admission or statement of liability or make any offer to pay a third party. Claims resulting from loss, theft or malicious damage must be reported to the police. You must notify Insurers immediately of any impending legal action. In the event of a claim, you may be responsible for an "excess" or "first amount payable" and you will find details of any such responsibility and the amount in your policy wording and corresponding schedule.
- (e) The rand amount of fees and commission payable to the intermediary is detailed on the premium page of the policy document.
- (f) Written mandate to act on behalf of insurer.
- This certifies that the insurer has granted a mandate to the intermediary to represent the insurer and to accept business and issue policies on behalf of the insurer. We are paid a consideration of a percentage of the premium which does not affect your premium.
- (g) We have appointed Moonstone Compliance (Pty) Ltd, as our external Compliance Officer.
- Postal address: P.O. Box 12662, Die Boord, Stellenbosch, 7613, Republic of South Africa
 - Tel: (021) 883 8000
 - Email: ghancke@moonstonecompliance.co.za
- (h) Complaints Resolution
- As a client, should you feel that your rights have been prejudiced, or you have been aggrieved in any way, you have the right to lodge a complaint. If you would like to lodge a formal complaint, please contact our Complaints Officer, Stanley Twiname (MD) on 083 274 6666 or email stan@centricrm.com and a copy of the complaint resolution procedure will be provided.
- (i) Waiver
- As a client, no product provider or FSP may request or induce you, in any manner whatsoever, to waive any right or benefit conferred on you, or in terms of any provision of the FAIS Act and Codes of Conduct.
- (j) Conflicts of Interest
- From time to time, we may receive some form of indirect consideration from product providers. A gift register is available for inspection upon request. We are in possession of a Conflict-of-Interest policy which may be inspected on request.
- See the quotation or annexure for information on product suppliers; name, physical and postal address, telephone number, name and contact details of their compliance department.
- (k) Obligations and Manner of payment of premium, due date of premiums and consequences of non-payment.
- The premium and fees payable by you are shown on the schedule of this policy.
 - For a monthly paid policy, the premiums are payable each month on the first day of the month for which payment is made.

Depending on the specific policy, if the premium is paid by debit order and is dishonoured by your bank:

- As a result of your instruction to the bank to stop payment of the debit order, the policy will lapse on the last day of the month for which premium was received; or
 - For any other reason, a debit for two months' premium will be submitted to the bank the following month. If this debit is returned unpaid, the policy will lapse on the last day of the month for which a premium was received.
- For an annually paid policy the premium is payable on or before the policy's inception or renewal date (15 days' grace will be allowed)
Failing which the policy will lapse on the day preceding the inception or renewal date.

2. Other matters of importance

- You must be informed of any material changes referred to in paragraph 1 and 2.
- If the information in paragraph 1 and 2 was given orally, it must be confirmed in writing within 30 days.
- 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
- 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.
- If premium is paid by debit order:
 - It may only be in favour of one person and may not be transferred without your approval: and
 - The insurer must inform you at least 31 days before the cancellation thereof, in writing, of its intention to cancel such debit order.
- The insurer and not the intermediary must give reasons for repudiating your claim.
- Your insurer may not cancel your insurance merely by informing your intermediary. There is an obligation to make sure notice has been sent to you.
- You are entitled to a copy of the policy free of charge.

3. Warning

Do not sign any blank or partially completed application form.

Complete all paper forms in ink.

Keep all documents handed to you.

Make note as to what is said to you.

Do not be pressurised to buy the product.

Incorrect or non-disclosure by you of relevant facts may influence an insurer on any claims arising from your contract of insurance.

4. Particulars of the National Financial Ombud Scheme (NFOSA)

Name:	The National Financial Ombud Scheme		
Physical Address:	<i>Johannesburg Office</i> - 110 Oxford Road, Houghton Estate, Johannesburg, 2198 <i>Cape Town Office</i> - Claremont Central Building, 6 th Floor, 6 Vineyard Road, Claremont, 7700		
Tel:	(0860) 800 900	Email:	info@nfosa.co.za
		Website:	www.nfosa.co.za

5. Particulars of the FAIS Ombudsman

Name:	The FAIS Ombudsman		
Physical Address:	125 Dallas Avenue, Menlyn Central, Waterkloof Glen, Pretoria, 0010		
Postal Address:	P.O. Box 41, Menlyn Park, 0063		
Tel:	(012) 762 5000 / (012) 470 9080	Email:	info@faisombud.co.za
Fax:	(012) 348 3447 / (012) 470 9097	Website:	www.faisombud.co.za

6. Particulars of the Registrar of Short-Term Insurance

Name:	Financial Sector Conduct Authority (FSCA)		
Postal Address:	P.O. Box 35655, Menlo Park, 0102		
Tel:	(012) 428 8000	Email:	info@fsca.co.za
Fax:	(012) 346 6941	Website:	www.fsca.co.za
Contact Centre:	(0800) 20 37 22		