

Policyholder Application no: 000001

Broker Name:

Broker FSP No:



PET HEALTH INSURANCE

POLICYHOLDER DETAILS

YOUR DETAILS

Title: Dr/Mr/Mrs/Miss/Other. _____

Physical Address: _____

First Name: _____

Last Name: _____

_____ Postal Code: _____

ID No:

Postal Address: _____

Phone number: _____

Email Address: _____

_____ Postal Code: _____

THE POLICIES ISSUED AND THE PREMIUMS PAYABLE

The premiums for the following policies will be debited to your account

| Policy Number | Pet's Name | Date of Inception | Premium Payable |
|--|------------|-------------------|-----------------|
| 1 | | | R |
| 2 | | | R |
| 3 | | | R |
| * If there are more than 3 pets, please list any other policies on a separate sheet. | | | R |
| TOTAL | | | R |

R 2.00 will be donated to an animal welfare organisation when we collect your premium

AUTHORITY TO DEBIT ACCOUNT

Account Holder _____

Bank Name: _____

Account Number

Branch Code

Account Type **cheque/savings**

Debit Day

I request and authorise P.UMA (Pty) Ltd to draw against the above mentioned account, the amount necessary for payment of the monthly premium, as and when, required. This amount will debit every month until this arrangement is cancelled in writing by either party. I accept that, if the debit date falls on a weekend, I will be debited on the subsequent working day. If no debit date is selected P.UMA reserves the right to select the last working day of each month

Signature

Date

Brought to you by  on behalf of



Insurer: Renasa Insurance Company Ltd – Reg. No. 1998/000916/06– VAT No. 4290173253 – FSP No. 15494
Underwriting Manager: Pet Underwriting Managing Agency – Reg. No. 2011/107009107 – VAT No. 4280260425 - FSP No. 9844



DISCLOSURE DOCUMENT

(This is your statutory notice- Please read carefully)

KNOW YOUR RIGHTS

DO NOT BE PRESSURED INTO BUYING THIS POLICY You are entitled to cancel your contract within 14 days after inception should the product not meet your requirements. Thereafter you have the right to cancel this policy by giving 30 days notice.

Do not sign any blank or partially completed application forms and please keep notes of anything said to you regarding your insurance

You are entitled to a copy of all documentation relating to this insurance FREE of charge.

You must be informed in writing if any changes are made to this contract and your policy cannot be cancelled unless a written confirmation is sent to you.

You have the right to know all fees and premiums applicable to this insurance contract.

All premiums are collected by debit order to your account, please make sure that you are being debited correctly.

If a claim is rejected, you must be given the reasons in writing.

Please make sure that all the information you supply has been recorded correctly. Any misrepresentation or incorrect information can prejudice you in the event of a claim.

DETAILS OF THE UNDERWRITING MANAGER



| | |
|---------------------------------------|--|
| Company | Pet Underwriting Managing Agency (Pty) Ltd. |
| Postal Address | PO Box 3047, Cape Town, 8000 |
| Physical Address | 14 Parry Road Claremont Cape Town 8000 |
| Contact details | Phone – 021 403 9177 Fax – 086 691 4723 Email – info@p-uma.co.za |
| Registration No. | 2011/107009/07 |
| VAT Number | 4280260425 |
| Authorised Financial Service Provider | Operating as a juristic representative of F.S.P (Warehouse CC. Reg. No 2004/023852/07 License Number 9844 |
| Compliance Officer | Pretium Services. PO Box 9655, Devon Valley Tel – 011 678 2533 Fax – 011 678 7731 |

Earnings: P.UMA earns a fee of 10% of premium and a profit share is in place. Both are paid by the insurer. Please note that P.UMA earns more than 30% of its income via Renasa Insurance Company Ltd

DETAILS OF THE INSURER



| | |
|---------------------------------------|--|
| Company | Renasa Insurance Company Ltd |
| Postal Address | P.O. Box 412072, Craighall, Johannesburg, 2024 |
| Contact details | Phone: 011 380 3080 Fax : 011 380 3088 Email – danies@RENASA.co.za |
| Registration No. | 1998/000916/06 |
| VAT Number | 4290173253 |
| Authorised Financial Service Provider | FSP No. 15494 |

The above parties are all fully licensed to practice short term Insurance in regards of personal and commercial Lines. P.UMA are Renasa Insurance Company Limited's underwriting manager for pet insurance and have a written mandate to conduct business.

There is no direct financial interest between the companies.

P.UMA carry Professional Indemnity Insurance as well as Fidelity Guarantee cover. A financial guarantee is not required.

If any of the parties act unprofessionally please report to their respective Compliance Officer.

Please make sure that all the information you supply has been recorded correctly. Any misrepresentation or incorrect info can prejudice you in the event of a claim.

Should you have a complaint about your Insurance and the Insurer/Broker and Underwriting manager are unable to satisfy your enquiry, you may approach the following parties.

| Ombudsman Detail FAIS Ombud | Short-Term Insurance | Fraudline |
|---|--|---|
| P.O. Box 74571 Lynwood ridge 0040 Tel: (012) 470 9080 Fax: (012) 348 3447 | P.O. Box 32334 Braamfontein 2017 Tel: (011) 726 8900 Fax: (011) 726 5501 | Should you suspect any fraudulent activity involving your insurance, please contact Fraudline on 0860 002526. |
| Responsible for Compliance matters | Responsible for Insurance matters | ANY Fraudulent activity |