



Application for HBG Home Builders Insurance Guarantee

Please complete this application form in block letters and return to Léger by fax or email.
 Email: dmuller@leger.co.za Fax: 086 6279991

1. APPLICANT DETAILS

Business name	<i>(e.g. ABC (Pty) Ltd)</i>		
Trading as name (if applicable)			
Authorised person(s) name:	<i>(Full names please)</i>		
ID number:			
Cell phone number:			
Office number:			
Fax number:			
Email address:			
Business designation:	<i>(Director/member/owner)</i>		
Physical address (Registered, where applicable)			
Authorised person physical address	<i>(Legal notification)</i>		
Postal address			
CIPRO registration number			
NHBRC registration number			
VAT registration number			
Nature of business			
Date established			
Auditors name & contact number			

2. DETAILS OF GUARANTEE REQUIRED

Guarantee type (please tick):			
	Late enrolment guarantee	Yes	No
	Sectional title enrolment fee (80%) guarantee	Yes	No
Guarantee value – Rand			
Guarantee starting date			
Guarantee period			

3. PROPERTY DETAILS

Stand	
Unit No. (Clusters only)	
Township name	
Province	
Estimated start date	
Estimated completion date	
Estimated occupation date	

Building details (Tick)

No. of storeys:	Single	Double	Triple	More than 3
Building type:	Detached	Semi-detached	Terraced	Apartments

4. TRADE CREDITORS DETAILS

Please provide details of your three largest trade creditors or other trade references

<i>Name of Reference</i>	<i>Branch</i>	<i>Tel. No.</i>	<i>Trading since</i>	<i>Average account/month</i>

5. SHAREHOLDERS/MEMBERS/PARTNERS DETAILS

<i>Full names</i>	<i>ID Number</i>	<i>Physical address (Legal notifications)</i>	<i>% Shareholding</i>

Have any of the above key personnel been a director/shareholder of a company which was liquidated or compromised with a creditor? <i>(Please tick)</i>	Yes	No
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If yes, please provide details:

6. LEGAL ACTION

Please note details of any legal action, summons, judgments, liquidation/sequestration orders or offer of compromise against the company, its holdings, subsidiaries or associated companies.

7. DECLARATION

I hereby declare the details and information furnished in this application, to the best of my knowledge, fairly represent the true state and affairs of the company/business and I authorize the insurer or its duly authorized representative to verify any aspect of this application and the credit record of the applicant. This includes, but is not limited to: credit checks with credit checking of references and validating information supplied as part of the application. I have not concealed any material fact relevant to this application and this questionnaire will form the basis upon which the guarantee may be issued.

In terms of the National Credit Act (NCA) I hereby give my consent to the insurer or its duly authorized representative to conduct a credit check. I note that my/our credit data could impact on the risk rating and ultimately affect the premium.

(Being duly authorized to sign this document)

Signature	
Name	
Date	
Designation	

CHECKLIST OF INFORMATION REQUIRED WITH THE APPLICATION FORM

No	Document	Tick
1	HBG Insurance Application Form	
2	Copy of the official NHBRC notification requesting guarantee	
3	Copy of the Compulsory Engineer's Report required by NHBRC	
4	ID's of Applicant(s) / Directors / Members / Trustees	
5	Proof of addresses of all Applicant(s) / Directors / Members / Trustees (Utility Bills not older than 3 months)	
6	Registration Certificate of Company (CM1) / Closed Corporation (CK1) Trusts (Letters of Authority)	
7	Register of Directors (CoR39 or CM29) / or Members (CK2)	
8	Copy of most recent audited financials and management accounts (Only in cases of applying for sectional title enrolment fees 80% g/tees)	

FURTHER LEGAL DOCUMENTS AFTER APPROVAL (TO BE PREPARED)

No	Document	Tick
1	Indemnity	
2	Resolution (in case of Company / CC / Trust)	
3	Sureties by Directors / Members / Trustees	