



APPLICATION FORM

CHECKLIST: GUARANTEE APPLICATIONS FOR NEW CLIENTS

Introduction:

- The attached Proposal Form is intended for companies that wish to apply for a guarantee facility with SGI Guarantee Acceptances, a division of Constantia Insurance Company Ltd (SGIGA).
- Existing clients of SGIGA should use the 1 page application form.
- The completed Proposal Form and requested attachments will be assessed and an indication given of whether or not SGIGA is able to assist and on what basis.
- To avoid time delays you are requested to complete the proposal form in full and to submit ALL information and documents as soon as possible.

Additional Documents Required (Kindly tick off confirming that the document has been provided)

No.	Document	Tick
1	REX Guarantee Application Form completed in detail and signed by the client	
2	For Public and Private Companies, 3 Years' Audited Financial Statements (compulsory requirement) (copies can be provided)	
3	For a CC or Sole Proprietor, 3 Years' Financial Statements compiled by an Accountant external to the Company (compulsory requirement) (copies can be provided)	
4	For any type of Company, copies of the Company's most recent Management Accounts	
5	For a CC, or start up entity, a copy of the Personal Asset and Liability Statement of the Member(s)/Shareholder(s). If a Company or Trust, we require that entity's Financial Statements.	
6	An Organogram of the Company	
7	A Cash flow Forecast of the Company	
8	Copy of Lease Agreement	

ANNEXURES ATTACHED:

- (A) REX Guarantee Application Form

NOTE: This form consists of 6 pages in total

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Constantia Insurance Company Limited is an authorised Financial Services Provider FSP Licence No. 31111





REX GUARANTEE APPLICATION

(A) CLIENT INFORMATION	
Company Name	
Trading As Name (if Applicable)	
Contact Person/s	
CIPC Registration No	
VAT Registration No	
Nature of Business	
Auditors Name & Contact No	

(B) CONTACT INFORMATION	
Office Telephone No	
Office Telefax No	
Cell Phone No of Key Person	
Email Address of Key Person	
Office Physical Address	
Postal Address	

(C) BROKER INFORMATION	
Company Name	
Contact Person	
Email Address	
Telephone/Cell Phone No	
FSP No	

(D) LEGAL ACTION / ITC JUDGEMENTS

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



(E) GUARANTEE HISTORY

1. Who has issued Guarantees for you previously?

2. Has any Guarantee issued on your behalf ever been called up? (If yes, supply details)

3. Has any application ever been turned down? (If yes, by whom and why?)

4. Have you applied to anyone else for this guarantee or facility? (If yes, by whom and why?)

(F) DETAILS OF EXISTING GUARANTEE OR COLLATERAL WITH LANDLORD

Name of Insurance Company/Bank	
Facility	
Guarantees O/S	
How Secured?	
Rate Charged	

(If more than one has been issued, kindly attach a separate schedule indicating these)

(G) GUARANTEE FACILITY REQUIRED:

R

(H) SECURITY/COLLATERAL OFFERED

No.	SECURITY/COLLATERAL OFFERED	Offered Yes No	Comments
1	Personal sureties: Directors/Shareholders/Members/Owners		
2	Counter Indemnities from Shareholders/Associated Companies		
3.	Notarial Bond over plant/equipment		
4	Cession/Pledge of fixed deposit/cash		
5	Cession of Life Policies		
6.	Mortgage Bonds over fixed properties		
7	Pledge of Shares/Investment policies		
8	Do you wish to build up a collateral amount over 12 months (payments)		

Please attach sworn valuations for 3 and 6 above, if offered as collateral.

(I) TRADE CREDITOR DETAILS

Name of Reference	Branch	Tel. No.	Since	Average Account/Month

(J) LEASE/HIRE PURCHASE DETAILS

Financial Institution	Account Number	Total Outstanding	Monthly Instalment

(K) SHAREHOLDERS/MEMBERS/PARTNERS

(Note: if more than ten parties, please supply separate schedule)

Names	% Shares Held	ID Number	Married ANC/COP

Have any of the key personnel been a director/shareholder of a company which was liquidated or compromised with creditors?

Yes	No
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If Yes, please provide details: _____



(L) SUBSIDIARY/ASSOCIATE COMPANIES

(Note: please also submit Financial Statements for these companies)

Company Name	Registration Number	% Shares Held

(M) PERSONNEL – TOTAL NUMBER OF EMPLOYEES: _____ **AS AT** _____ **20** _____

Name	Position	Period Employed
Name	Position	Period Employed

(N) BANKING DETAILS

Name of Bank		Branch	
Telephone no.		Account No.	
Period with Bank		Current Balance	
Overdraft Facility		Utilised	
Security			
Other Credit Facility			



(O) DECLARATION

I hereby declare that the details and information furnished in this application, to the best of my knowledge, fairly represent the true state of affairs of the company/business and I authorise SGI Guarantee Acceptances, a Division of Constantia Insurance Company Limited (SGIGA) 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 any guarantee, surety or bond may be issued.

I/we hereby declare that if SGIGA agrees to issue guarantees on my/our behalf, I/we hereby bind myself/ourselves as follows:

- a) To reimburse SGIGA for all amounts which I/we are called upon to pay in respect of the guarantees.
- b) I/we nominate, constitute and appoint SGIGA irrevocably and in *rem suam* to be my/our lawful agent to obtain payment of and give valid receipts for any money due to me/us by way of retention or otherwise, whether such money became due before, at the time of or after my/our failure, default or breach of Contract.
- c) To reimburse SGIGA for any legal or other costs and charges which may reasonably be incurred by them in consequence of the foregoing clauses or resulting from this application.
- d) To pay to SGIGA such consideration as it may require in the form of premium for the guarantees hereby applied for and for any extension thereof beyond the completion date stated herein.
- e) To reimburse SGIGA for any costs including valuation costs incurred in regard to guarantees provided or to be provided.
- f) In terms of the new National Credit Act (NCA) I give my consent to SGIGA conducting a credit check. I note that my/our credit data will be part of the equation in assessing the guarantee application, which could impact on the risk rating and ultimately affect the premium.

Name	(Being duly authorised to sign this document)
Designation	
Signature	
Date	