

FIDELITY INSURANCE QUESTIONNAIRE

POLICY NUMBER:

NAME OF INSURED: INSETA

POSTAL ADDRESS: P.O BOX 32035, BRAAMFONTEIN

POSTAL CODE: 2017

DESCRIPTION OF BUSINESS SKILLS DEVELOPMENT IN THE INSURANCE SECTO

Please answer the following questions (If insufficient space is available for any information required, please provide it on a separate sheet of paper):

1. State the total sum insured required for all employees: R 2 500 000

2. State the total number of employees: EIGHTY (80)

3. Have you ever suffered a loss as a result of fraud or dishonesty? Y N

If YES, please provide details N/A

4. Are employees, who receive cash and cheques in the course of their duties, required to bank daily? N/A Y N

If NO, please give details of the procedures followed N/A - EMPLOYEES DO NOT RECEIVE CASH AND CHEQUES EXCEPT FOR PETTY CASH

5. Are receipts written for all cash received? N/A Y N

If NO, please give details of the procedures followed N/A - PETTY CASH IS RECORDED AT THE TIME OF ISSUE TO AN EMPLOYEE

6. Do your employees deposit cash collected into auto-teller machines (ATMs) located on your premises? N/A Y N

If YES, what controls are in place to confirm that the money has been deposited? N/A

7. Are cheques received recorded by someone other than the person responsible for banking? N/A Y N

If NO, please give details of the procedures followed N/A - EMPLOYEES DO NOT RECEIVE CHEQUES

8. Is cash in hand and petty cash checked independently of employees responsible for the cash, on at least a monthly basis? Y N

If NO, please give details of the procedures followed N/A

9. Are employees who handle cash or cheques unable to interfere with the dispatch of statements of account? N/A Y N



If NO, please give details of the procedures followed

N/A

10. Do all cheques drawn for more than R 10,000 require two signatories? Y N

11. Are requisition forms for machine produced or computer printed cheques authorised by at least two persons? Y N
N/A - INSETA DOES NOT USE COMPUTER GENERATED CHEQUES

12. Are blank cheques kept under lock and key, with keys accessible only to one authorised person? Y N
If the answer to 10, 11 or 12 above is NO, please give details of the procedures followed N/A

13. Are bank statements, receipts, counterfoils and other supporting documents checked at least monthly against the cash book entries independently of the employees making cash book entries or paying into the bank? Y N
If NO, please give details of the procedures followed N/A

14. Is a physical check of stock carried out independently of employees responsible at least quarterly? Y N
If NO, please give details of the procedures followed

15. Are different employees, acting independently, responsible for the ordering of goods, the recording of receipts of such and authorising of payment of them? Y N
If NO, please give details of the procedures followed N/A

16. Is a service call made to your customers to verify delivery of the goods? Y N

17. Do your external auditors make at least one full audit per annum? Y N

a. If NO, how often is an audit done? N/A

b. What is the name of your auditors? AUDITOR-GENERAL SOUTH AFRICA

c. Is your annual external audit report free from comment on flaws in your system or suggestions to improve your systems? Y N

If NO, please indicate their comments and steps taken to improve the position N/A

18. Do you have an internal audit team? Y N
If YES, please complete the following:

a. Whom do they report to? AUDIT COMMITTEE

b. How frequently are all areas of the company audited? AT LEAST ANNUALLY

19. Do you use any form of Fund Transfer? Y N
If YES, please provide details PAYMENTS TO SUPPLIERS AND TRANSFERS BETWEEN BANK AND INVESTMENT ACCOUNTS

20. Are any of your accounting, salary or stock control functions computerized?

Y N

If YES:

a. Are security checks built into your computer operations?

Y N

b. Do your internal auditors supervise computer security?

Y N

c. Do your external auditors examine your computer security?

Y N

21. Do you require cover for

a. Claims preparation costs in excess of the sum automatically provided by the policy?

Y N

If "YES", please state sum insured required

R

b. Computer loss extension? If "YES", please complete separate questionnaire

Y N

c. Costs of recovery?

Y N

If "YES", please state sum insured required

R

d. Automatic reinstatement (limited to double the sum insured)?

Y N

e. Superseded cover where you previously held a Fidelity policy (maximum 24 months)?

Y N

f. Retroactive cover where no previous policy was in force (maximum 12 months)?

Y N

g. Losses discovered more than 24 months after being committed, but not more than 36 months thereafter?

Y N

DECLARATION

I/We declare that to the best of my/our knowledge and belief, the honesty and conduct of the employees have always been satisfactory, the system of check and supervision and the requirements of the Company as indicated on this form or in any negotiations concerning this insurance will be carried out and that this proposal together with any supplementary declaration or statement shall form the basis of the contract between me/us and Santam Limited.

Date:

*Signature:

Full Names and Surname of signatory:

Designation of signatory:

Note: *This form should not be signed by a person to be guaranteed other than a senior executive official of a Limited Company, Corporation or Society authorised to sign on its behalf.

