

GUARANTEE FACILITY APPLICATION

A. COMPANY/BUSINESS DETAILS

Registered name _____

Registration number _____ VAT number _____

Postal address _____ Code _____

Physical address _____ Code _____

Contact numbers Tel _____ Fax _____

Email address _____

Nature of business _____

Date commenced _____

B. BROKER

Registered name _____

Postal address _____ Code _____

Physical address _____ Code _____

Contact numbers Tel _____ Fax _____

Email address _____

Contact person(s) _____

C. SHAREHOLDERS/MEMBERS/PARTNERS/SOLE TRADER

Full names	% Shares	Identity number Company reg. number	Married ANC/COP
_____	_____%	_____	_____
_____	_____%	_____	_____
_____	_____%	_____	_____
_____	_____%	_____	_____
_____	_____%	_____	_____

D. SUBSIDIARY/ASSOCIATED/AFFILIATED COMPANIES

Name	Registration number	% Shares	Nature of business	Guarantees required
_____	_____	_____%	_____	_____
_____	_____	_____%	_____	_____
_____	_____	_____%	_____	_____
_____	_____	_____%	_____	_____

E. BANKING DETAILS

Bankers	_____	Branch	_____
Account number	_____	Period with bank	_____
Cash balance	_____	Overdraft facility	_____
Overdraft used	_____	How secured	_____
Bank bond facility	_____	How secured	_____
Bonds outstanding	_____	Other bankers	_____

F. PERSONNEL

Total permanent employees _____ as at _____

Key Personnel

Name	Position	Period with company
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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

Please note details of any legal action, summons, judgments, 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.

G. GUARANTEE HISTORY

Who issued your guarantees previously _____

Have any guarantees issued on your behalf ever been called up Yes No

If Yes, supply details _____

Have you applied to anyone else for this guarantee facility Yes No

If Yes, with whom _____

Have any applications ever been turned down Yes No

If Yes, by whom and why _____

Please attach list of guarantees presently operative.

H. EXISTING GUARANTEES

Name of Bank/Insurance Company	Facility	Guarantees outstanding	Rate charged
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
How secured _____			

I. NEW REQUIREMENTS

Required facility	R				
To replace existing facility	Yes	No	Addition to existing facility	Yes	No
_____	_____	_____	_____	_____	_____

Security/Collateral Offered

1. Personal Sureties – Shareholders	Yes	No
2. Personal Sureties – Directors	Yes	No
3. Cession of loan accounts	Yes	No
4. Cession of book debts	Yes	No
5. Cession or pledge of cash/fixed deposit/bank guarantee	Yes	No
6. Cession of life policies	Yes	No
7. Covering bonds over fixed property (ies)	Yes	No

J. ADDITIONAL INFORMATION

Have the concerned debtors been financed	Yes	No
If so, to what extent	_____	
Financed by	_____	
Are the debtors insured	Yes	No
If so, to what extent	_____	
Insured with	_____	

K. DECLARATION

I/We hereby declare that the details and information furnished in this application, to the best of my/our knowledge, fairly represent the true state of affairs of the company/business and I/we authorise the verification of any aspect of this application. I/We have not concealed any material fact relevant to this application and this questionnaire will form the basis upon which any bond or surety may be issued.

Hollard Insurance Company Limited reserves the right to obtain additional information through ITC/KreditInform and this would in some circumstances include key personnel.

SIGNATURE

DATE

NAME
(Duly authorised to sign this document)

DESIGNATION

Checklist of additional documents to accompany this application for a guarantee

REQUIREMENTS	RECEIVED	
Company profile including all recently completed contracts and their values	Yes	No
Personal statements of assets and liabilities of all members/partners/directors and trustees	Yes	No
Two years audited financial statements (compulsory requirement)	Yes	No
Copies of the company's most recent management accounts (i.e. from the date of last financial statements to the current date)	Yes	No
Tax Clearance Certificate including VAT number	Yes	No
Aged analysed debtors and creditors schedule	Yes	No
Company Formation Documentation:		
• Sole Proprietor: No documentation required	Yes	No
• JV/Partnership: Copy of the partnership agreement	Yes	No
• Close Corporation: Copy of Founding Statement (CK Documentation)	Yes	No
• Company: Certificate to commence business	Yes	No
Memorandum of Articles and Association	Yes	No
• Trust: Copy of Deed of Trust and Letter of Authority	Yes	No

Kindly note that the underwriters and attorneys reserve the right to request further information.