

**FAIS PRODUCT REPLACEMENT RECORD - COMMERCIAL (Comprehensive)**

(Requirements i.e. S. 8 (1) (d) of the FAIS

General Code of Conduct)

|  |  |  |
| --- | --- | --- |
| **Reason for change** | **Premium** |  |
| **Cover** |  |
| **Service** |  |
| **Renewal** |  |

Business Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE ATTACHED SUPPORTING DOCUMENTS:**

|  |  |  |
| --- | --- | --- |
| **Disclosure (s) requires** | **Existing Product** | **Replacement Product (New)** |
| Policy Number |  |  |
| Company name |  |  |
| Products type |  |  |
| Premium |  |  |
| Fees and Charges |  |  |
| Commissions |  |  |
| Brokerage fees |  |  |
| Special terms and conditions |  |  |
| Exclusion of liability |  |  |
| Penalties |  |  |
| Restrictions or circumstances in which benefits will not be provided |  |  |
| Cover start date |  |  |
| Date of cancellation of existing insurance |  |  |

\* If not sufficient space-please add separate paper.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | **Existing Product** | **Replacement Product (New)** | | **% Change** |
| **Fire** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess |  |  | |  |
| **Buildings combined** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess |  |  | |  |
| **Office Contents** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess |  |  | |  |
| **Business Interruption** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Excess |  |  | |  |
| **Accounts Received** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess |  |  | |  |
| **Theft** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess |  |  | |  |
| **Money** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess |  |  | |  |
| **Glass** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess |  |  | |  |
| **Fidelity Guarantee** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess |  |  | |  |
| **Goods In Transit** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess |  |  | |  |
| **Business All Risk** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess |  |  | |  |
| **Accidental damage** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess on first payment |  |  | |  |
| **Public Liability** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess |  |  | |  |
| **Employee Liability** | | | | |
| * Coverage |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess |  |  | |  |
| **State benefits** | | | | |
| * Coverage |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess |  |  | |  |
| **Personal Accident** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess |  |  | |  |
| **Motor** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess |  |  | |  |
| * IVP – Excess Waiver & Car Hire |  |  | |  |
| **External Risk on Motor** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary excess |  |  | |  |
| **Internal Risk on Motor** | | | | |
| * Coverage |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary Excess |  |  | |  |
| **Home owners** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary Excess |  |  | |  |
| **Flawless machinery Existing Product Replacement Product (New)** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary Excess |  |  | |  |
| **Electronic equipment** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary Excess |  |  | |  |
| **Breakdown & Loss of Profit as a result of Breakdown** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary Excess |  |  | |  |
| **Household** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary Excess |  |  | |  |
| **Reduction of inventory** | | | | |
| * Cover |  |  | |  |
| * Premium |  |  | |  |
| * Standard / Voluntary Excess |  |  | |  |
| **Purpose of replacement / addition Notes** | | |  | |

**Client:**

**I declare that I fully consent to** -

1. The difference between conditions and benefits of my existing financial product (s) and the recommended new financial product (s);

2. That I have received and compared the quotation (s) with my previous policy schedule (s);

3. The consequences of replacing my existing financial product (s) with the new financial product (s);

4. That, where the intermediary is not accredited to advise me in respect of the financial product I have chosen to terminate / or vary in order to purchase the new financial product, I have been advised that there may be unintended and have been informed to seek advice from an intermediary accredited to provide advice on the existing financial product.

**NAME SIGNATURE DATE**

Financial Advisor: I declare that this FAIS Replacement Disclosure Record (together with the advice record), is a complete and accurate record of the disclosures made to the client.

**NAME SIGNATURE DATE**