

RETAIL FUEL APPLICATION FORM

To: The Management – Guarantees Division
Guardrisk Insurance Company Limited

Kindly issue on the Applicant's sole risk and responsibility a Guarantee/Bond in the foregoing terms, which I/We hereby confirm. Kindly note that all personal information disclosed herein is considered as your personal information. Such information is required solely for the purpose of policy administration and will not be disclosed to any unrelated third party at any time and will be kept confidential and secure. I authorise Guardrisk to collect, process and store my personal information for the purpose of policy administering.

I authorise Guardrisk to conduct credit checks on the Applicant and/or Contractor with one or more registered credit bureaus, as required. I consent that;

- (i) the Applicant's and/or Contractor's payment behavior be monitored by researching its record at one or more credit bureaus,
- (ii) new information and data may be obtained from credit bureaus on the Applicant and/or Contractor,
- (iii) the existence of the Applicant's and/or Contractor's account may be recorded with any registered credit bureaus.

** All fields to be completed*

A. DOCUMENTATION REQUIRED

For Assessment:	Submitted:
Latest Financials and Management Accounts	
Latest 3 Months Bank Statements	
Proof of Overdraft Facility	
Personal Balance Sheet of Members/Directors	
Business Plan and Funding Structure of New Retailer	

FICA Documents	Submitted:
Members/Directors ID and Proof of Residence	
Spouses ID if married COP/ANC with Accrual	
Close Corporation:	Submitted:
Company Registration Documents	
Private Company	Submitted:
CM29 Certificate and Share Certificate	

Underwriters may require additional information to above, as required

B. APPLICANT DETAILS

Name of Dealer:		Site Trading Name:	
Registration Number:		VAT Number:	
Physical Address of Site:			
			Code:
Postal Address:			
			Code:
Site Contact Details:			
Tel:	Mobile:	Email:	

Members/Directors/Shareholders Trustees/Partners (Full Names)	Married	
	ANC	COP

C. DETAILS OF GUARANTEE REQUIRED:

Name of Fuel Company/Supplier:	
Value of Guarantee Required: R	Effective Date:
Do you have a lease with the Fuel Company of Supplier?:	
Period of Lease:	
Commencement Date of Lease:	

D. TRADING INFORMATION

Name of Landlord:	Tel:
How long have you been the retailer onsite:	
Do you currently have any debt outstanding with the Fuel Company/Supplier:	
Value of Debtors Book per Month:	Average litre-age sales per month:
Is the shop a Franchised shop?:	Is your fast food a Franchised outlet?:
Does the business have a loan?:	If yes, what is the value of the loan?:
Value of overdraft facility:	

E. NEW RETAILER DETAILS

Please supply the following if you are a new Retailer:

Purchase Price of business:	Purchase Price of opening Stock:
Startup cost (excluding stock):	Own contributions into business: R

F. CONSENT CLAUSE

- I/We hereby declare that all particulars and answers in this application and supporting documents are true and complete in every respect, and that no material fact has been suppressed or withheld.
- I/We declare that the details and information furnished in this application, to the best of my knowledge fairly represent and true state of the Applicant, Principal/Contractor and the details of the guarantee/bond required.
- I/We have not concealed any material facts relevant to this application and I/we verify any verification of any aspect of this application.
- I/We further declare that if such statements and particulars are in the writing of any person other than myself/ourselves, such person shall be deemed to have been my Agent for the purpose of this application, and I/we agree that this declaration and the details given shall be the basis of the contract between me/us and the Company.
- I/We further agree to accept a guarantee/bond subject to the conditions prescribed by Guardrisk Insurance Company Limited and to pay the applicable premium in full there under.
- I/We understand that the responsibility rests with me/us to obtain and return this guarantee after its expiry and/or cancellation and that I/we are liable for the additional premium as may be determined by Guardrisk Insurance Company Limited from time to time until the return of the original guarantee has been secured.
- I/We declare that the signatory/ies that has/have executed this guarantee/bond application form is/are duly authorised to do so.

Signed at on this day of 20

For and on behalf of the Applicant:

Signature:	Signature:
Full name & surname:	Full name & surname:
Designation:	Designation: