



### **Bryte Insurance Company Limited**

A Fairfax Company

Registration number: 1965/006764/06 VAT number: 4530103581

Authorised Financial Services Provider No. 17703

15 Marshall Street, Ferreirasdorp, Johannesburg, 2001 PO Box 61489, Marshalltown 2107

Please complete this form in BLOCK CAPITALS and send it to your broker or to Bryte Insurance Company Limited.

## **Art Risk Cover**

# **Proposal Form**

1. Details of broker					
Name of broker					
Contact person					
Telephone number					
Broker's code					
2. Details of proposer					
Name of proposer					
Physical address of the premises					
		Postal code			
Postal address					
		Postal code			
Owner's ID number					
Telephone number (work)	Telephone number (cel	)			
Fax number	Email Address				
Company registration number	Website Address				
VAT number					
3. Period of insurance					
(Both days at 0:01am Local Standar	d Time at the principal address)				
4. Please provide full business	s description				
5. Broking commentary/back	ground				
6. Please provide full descript	ion of all subject-matter to be insured				

7. Inventory				
Expected annual turnover				
Last physical inventory was taken (dd/mm/yy)				
Inventory total value				
Is the inventory maintained on a computer system?		Yes No		
Do you maintain a copy of the inventory off the premises?	Do you maintain a copy of the inventory off the premises?			
Percentage of inventory				
a) Owned	%			
b) Consigned	%			
Total	100%			
Please attach copy of consignment agreement				
Estimated inventory holdings				
Paintings	%			
Prints	%			
Photographs	%			
Drawings	%			
Sculptures	%			
Rare books/manuscripts	%			
Other	%			
Total	100%			
Average total value of stock				
a) Your own property based on selling price				
b) Property of others based on consignment value				
8. Shipments				
Estimated annual values shipped				
a) Local				
b) Worldwide				
Method of transport				
Fine Art carriers	%			
Express carriers	%			
Mail	%			
Own vehicle	%			
Maximum amount shipped in any one shipment				
Fine Art carriers				
Express carriers				
Mail				
Own vehicle				
9. Art fairs				
Which Art Fairs do you attend?				
10. Locations				
Please list all locations where property is or will be located and values at each: (Please fill out a location supplement for each additional location where your inventor	orv is regularly held)			
Name	. 3 , ,			
Address				
Type of occupants of building				
Year built				
Number of floors				
Construction: fire resistive/masonry/frame/other				
Which floor do you occupy?				
Total values at this location				
Are any objects stored in the basement?	ı	☐ Yes ☐ No		
(Details if so)				
,				

Hours of business				
Days				
Hours				
11. Fire prevention and security				
Do you have a central station heat or smoke detection system?	Yes	No		
(Details if so)				
Number of portable fire extinguishers				
Are premises fitted with fire sprinklers?	Yes	No		
Do you have a central station burglar alarm?				
(Details if so)	Yes	No		
(Details ii so)				
Name of a satural station in males a surround				
Name of central station burglar company				
Are there deadbolt locks on all exterior doors?	Yes	No		
Are small objects displayed in locked showcases?	Yes	No		
Do you have a buzzer controlled entry/exit system?	☐ Yes ☐	No		
(Details if so)				
12. Amount of insurance required				
At premises				
In transit				
At art fairs and exhibitions				
Deductible requested				
13. Insurance				
Has applicant sustained any losses during the last five years?	☐ Yes ☐	No		
(Details if so)				
Has any insurance ever been cancelled?	Yes	No		
(Details if so)				
(2000.000)				
Do you currently have insurance?	Yes	No		
If yes		-		
Current carrier				
Renewal date				
How long have you been with the carrier?				
14. General comments				

### **Protection of personal information**

We at Bryte, respect your constitutional right to privacy. We are committed to and bound by the terms and provisions of the Protection of Personal Information Act 4 of 2013 ("POPI") regarding the acquisition, usage, retention, transmission and deletion of your personal information. We will check and validate the information you provide through legal means. We have high level security measures in place to protect your personal information.

Your personal information herein collected is for the primary purpose of providing you with insurance cover and for all other activities and processes incidental to and relevant to this purpose. Your information shall be kept confidential, however, we shall disclose it to certain third parties as required and other insurers for the specific purpose of insurance and to reduce and prevent any form of fraudulent activity. Sharing of information includes, but is not limited to, information sharing as arranged via the South African Insurance Association.

You hereby give consent and fully understand the reason for Bryte to process, use, share and retain your personal information for its designated purpose and you confirm the accuracy of the information.

You may request Bryte to amend, update, change or correct your personal information processed by us by sending a request to your broker or your nearest Bryte offices.

A full version of the Consent to process Personal Information is available on this link

(http://brytesa.com/insurance-partnerships/forms/personal-information/) for download

Should you decide to cancel this insurance contract you further consent to Bryte retaining the information in line with the legally permitted retention period, for statistical and reporting purposes only.

Should you decide not to accept the proposal, the information collected, will be de-identified and only used for statistical and research purposes.

#### **Declaration**

I/we, the proposer(s), have read the proposal form and I/we declare that the answers which have been provided are true and correct. I/we agree that this proposal form shall be the basis of the insurance contract. I/we declare that all material information relevant to a proper assessment of the risk under the insurance contract has been provided and I/we accept that the insurer may void the insurance contract in consequence of any material misrepresentation and/or non-disclosure.

Signature(s) of proposer(s)	Date