

Insured By: Guardrisk Insurance Company Limited | Reg 1992/001639/06 | FSP 75 Address – 102 Rivonia Rd, Sandton | Postal-PO Box 783542, Sandton 2146 | Tel- 0860 002 500



Administered by: Smartsure Twenty20 (Pty) Ltd Reg 2014/074456/07 | FSP45422

Address – 212 Bram Fischer Drive, Kensington B, Randburg | Postal - PO Box 321 Cramerview 2060 | Tel - 011 840-6000

CLIENT DETAILS						
Surname:					First Name:	
Title:	Mr	Mrs	Miss	Ms	Other (specify)	
ID Number:						
Marital Status:	Single	Mar	ried	Divorced	Widowed	
Residential Address:						Code:
Cell Number:					Work Number	
Email Address:						
·					·	

Client's outdoor interests:

SUBMITTED BY (BROKERAGE)				
Brokerage/broker:				
Broker contact number	Email:	Email:		
VEHICLE PARTICULARS				
	Vehicle 1	Vehicle 2	Vehicle 3	
Туре				

	Vehicle 1	Vehicle 2	Vehicle 3
Туре			
Vehicle Make			
Model			
Year of manufacture			
Engine cc			
Colour			
Current Retail Value	R	R	R
Total value accessories	R	R	R
Total value vehicle incl. accessories	R	R	R
VEHICLE SECURITY			
Factory fitted immobilizer	YN	Y N	Y N
Tracking Device	YN	YN	Y N
Make / Model			
VEHICLE USE			
Private only			
Private and Business Use			
Private and Professional Use			





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DETAILS OF REGULAR DRIVER			
Name			
Occupation			
Date of Birth:	(DD/MM/YYYY)	(DD/MM/YYYY)	(DD/MM/YYYY)
Claim Free Group?			
OFF-ROAD DRIVER OR ADVANCED DRIVER COUR	RSES		
Course 1			
Year Completed			
Course 2			
Year Completed			

The intention of this form is for True-Grit to provide you with a premium indication only, based on the information which	ch
you have supplied herein. These terms may change based on further particulars provided in the Policy Application forn	n
after acceptance of the quotation and other requirements in terms of Optional Extensions required and as more specif	fically
detailed in the proposal form.	_

Signature	Date	(DD/MM/YYYY)

