

## NOTICE

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This document is intended for companies requiring a bond facility.

The questionnaire should be completed and returned to us with the applicant's most recent audited financial statements and the latest management accounts. The documents submitted will be assessed in line with the particular requirements and an indication given to whether we are able to assist and on what basis.

To avoid delays you are requested to complete the forms in full and submit the required financial statements as soon as possible.

### Instructions:

1. Print all pages of this questionnaire.
2. Complete the questionnaire and fax it back to **Edge Risk Partners (Pty) Ltd.**
3. Remember to attach the most recent audited financial statements and the latest management accounts.
4. Include your debtor's age analysis.
5. Note whether your debtors are insured and with whom.

**COMPANY QUESTIONNAIRE FOR BONDS FACILITY**

**Section A: Company/Business Details**

Registered Name:	
Registration number:	
Postal Address:	
VAT number:	
Physical Address:	
Telephone number:	
Fax number:	
Email address:	
Website:	
Contact person:	
Cellular number:	
Date business commenced:	
Nature of business:	

**Section B: Required Underwriting Information Attached**

	Company and Group	Associated Companies	Affiliate Companies
Audited financial statements ( <i>not older than 8 months from year end</i> )			
Draft financial statements			
Management accounts			
Statements of assets and liabilities (shareholders/directors/members)			
Group operating structure/company profile			
Certificates of incorporation and principal identity documents			
Other documents			

**Section C: Shareholders/Members/Partners/Sole Trader**

Full names	ID number/Company registration number	% shares held	Married COP/ANC with/without accrual

**Section D: Subsidiary/Associated/Affiliated Companies**

Name	Registration number	% shares held	Nature of business	Bond required?

**Section E: Banking Details**

Bank:	Account number:
Branch:	Period with bank:
Cash balance:	Investments:
Overdraft facility:	Overdraft used:
How secured:	Bank guarantee facility:
Guarantees outstanding:	Other banks:

**Section F: Key Personnel**

Total number of employees \_\_\_\_\_ as at \_\_\_\_\_ (date)

Name	Position	Period with company

Have any key personnel been a director/shareholder of a company which was liquidated or compromised with creditors? If so, please provide details:

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**Section G: Bond History**

Who issued your bonds previously?	
Have any bonds issued on your behalf ever been called up? If so, provide details	
Have you applied to any other company for this bond or facility? If yes, to whom?	
Have any applications ever been turned down? If yes, by whom and why?	

**Section H: Existing Bonds**

Name of Bank/ Insurance company	Facility	Bond outstanding	Rate charged
How secured?			

Please attach a list of guarantees presently operative.

**Section I: New Requirements**

Required facility:	R	
To replace existing:	Yes	No
Addition to existing facility:	Yes	No
<b>Security/Collateral offered:</b>		
Personal sureties: shareholders	Yes	No
Personal sureties: directors	Yes	No
Cession of loan accounts	Yes	No
Cession of book debts	Yes	No
Cession or pledge of cash/fixed deposit	Yes	No
Cession of life policies	Yes	No
Covering bond over property/ies	Yes	No
<b>Additional information:</b>		
Has the applicant's debtors been financed?	Yes	No
If so, to what extent?	R	
Financed by		
Are the debtors insured?	Yes	No
If so, to what extent?	R	
Insured with		

**Section J: Legal Action**

Please disclose details of any legal action, summons, judgements, liquidation/sequestration orders or offers of compromise against any shareholder or director of the company, or against the company, its holdings, subsidiaries or associated companies

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**Section K: Financial Statements**

Auditor/Accounting officer:		
Contact person:		
Telephone numbers:		
Fax number:		
Email address:		
Cellphone number:		
May the underwriter contact your auditor/accounting officer to verify the financial statements supplied?	Yes	No



**Section L: Declaration**

I/We hereby declare that the details and information furnished in this application, to the best of my/our knowledge, fairly represent the trust 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 guarantee, surety or bond may be issued.

I/We hereby declare that we indemnify **Edge Risk Partners (Pty) Ltd** and the underwriter and hereby bind myself/ourselves as follows:

1. To reimburse the underwriter for all amounts which it is called upon to pay in respect of its bonds.
2. We nominate, constitute and appoint the underwriter irrevocably and in rem saum to be my/our lawful agent to obtain payment of and give valid receipts for any money due to me/us by way of retention or otherwise, whether such money became due before, at the time of on after my/our failure, default or breach of contract.
3. To reimburse the underwriter for any legal or other costs and charges which may reasonably be incurred by them in consequences of the foregoing clauses or resulting from this application.
4. To pay the underwriter such consideration as it may require in the form of premium for the guarantees hereby applied for and for any extension thereof beyond the completion date stated herein.
5. To reimburse the underwriter for any costs including valuation costs incurred in regard to guarantees provided or to be provided.
6. We hereby nominate **Edge Risk Partners (Pty) Ltd** to act on our behalf in connection with this application and/or facility resulting from it.

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Applicant's name

\_\_\_\_\_  
Applicant's designation

\_\_\_\_\_  
Authorised for and on behalf of

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_