

GUARANTEE FACILITY APPLICATION

A. COMPANY/BUSINESS DETAILS

Registered name _____

Registration number _____ VAT number _____

Postal address _____ Code _____

Physical address _____ Code _____

Telephone number _____ Email address _____

Nature of business _____

Date commenced _____

B. BROKER

Company name _____ Contact person _____

Telephone number _____ Email address _____

Postal address _____ Code _____

Physical address _____ Code _____

VAT number _____ FSP number _____

C. SHAREHOLDERS/MEMBERS/PARTNERS/SOLE TRADER

Full names	% Shares	Identity Number/ Company Reg. Number	Married ANC/COP
_____	_____%	_____	_____
_____	_____%	_____	_____
_____	_____%	_____	_____
_____	_____%	_____	_____
_____	_____%	_____	_____

D. SUBSIDIARY/ASSOCIATED/AFFILIATED COMPANIES

Company Name	Registration number	% Shares	Nature of business	Guarantees required
_____	_____	_____%	_____	_____
_____	_____	_____%	_____	_____
_____	_____	_____%	_____	_____
_____	_____	_____%	_____	_____
_____	_____	_____%	_____	_____

E. BANKING DETAILS

Bankers	_____	Branch	_____
Account number	_____	Period with bank	_____
Cash balance	_____	Overdraft facility	_____
Overdraft used	_____	How secured	_____
Bank bond facility	_____	How secured	_____
Bonds outstanding	_____	Other bankers	_____

F. PERSONNEL

Total permanent employees _____ as at _____

Key Personnel

Name	Position	Period with company
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have any of the key personnel been a director/shareholder of a company which was liquidated or compromised with credits

Please note details of any legal action, summons, judgments, liquidation/sequestration orders or offer of compromise against any shareholder or director of the company, or against the company, its holdings, subsidiaries or associated companies.

G. GUARANTEE HISTORY

Which company issued your guarantees previously _____

Have any guarantees issued on your behalf ever been called up Yes ☐ No ☐

If Yes, supply details _____

Have you applied to anyone else for this guarantee facility Yes ☐ No ☐

If Yes, with whom _____

Have any applications ever been turned down Yes ☐ No ☐

If Yes, by whom and _____

why _____

Please select the type of guarantee required:

Construction Guarantee	☐ (Specific type, i.e. Performance retention, etc.)
Fuel Guarantee	☐ (Specific type, i.e. Retail or commercial)
SARS/Customs Guarantees	☐ (Specific type, i.e. Bonded warehouse, deferment, etc.)
NHBRC Guarantees	☐
Education Guarantees	☐
Mining Rehabilitation	☐
Guarantees	☐
Other	☐ (Specify)

H. EXISTING GUARANTEES

Name of Bank/Insurance Company	Facility	Guarantees outstanding	Rate charged
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

How secured _____

Contracts in progress (If applicable)					
Employer	Contract value	Location	Type of Works/ Contract Description	Percentage completion	Completion date
_____	R _____	_____	_____	_____	_____
_____	R _____	_____	_____	_____	_____
_____	R _____	_____	_____	_____	_____

Please attach list of guarantees presently operative.

Security/Collateral Offered		
1. Personal Sureties - Shareholders	Yes ☐	No ☐
2. Personal Sureties - Directors	Yes ☐	No ☐
3. Cession of loan accounts	Yes ☐	No ☐
4. Cession of book debt	Yes ☐	No ☐
5. Cession or pledge of cash/fixed deposit/bank guarantee	Yes ☐	No ☐
6. Cession of Life policies	Yes ☐	No ☐
7. Covering bonds over fixed property(ies)	Yes ☐	No ☐

I. NEW REQUIREMENTS

Required facility R _____

To replace existing facility Yes ☐ No ☐ Addition to existing facility Yes ☐ No ☐

J. DECLARATION

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

K. PRIVACY

In order to provide you with insurance, we have to process your personal information. We will share your personal information with other insurers, industry bodies, credit agencies and service providers. This includes information about your insurance, claims and premium payments. We do this to provide insurance services, prevent fraud, assess claims and conduct surveys. We will treat your personal information with caution and have put reasonable security measures in place to protect it. By signing this application for insurance, you agree to the processing and sharing of your personal information.

Signature	Name	Designation	Date
(being duly authorised to sign this document)			

Checklist of additional documents to accompany this application for a guarantee

REQUIREMENTS PER GUARANTEE TYPE	RECEIVED	
Construction Guarantees:		
Completed facility application form	Yes ☐	No ☐
Completed guarantee specific application form	Yes ☐	No ☐
Last 2 years audited financial statements	Yes ☐	No ☐
Latest management accounts (not older than 2 months)	Yes ☐	No ☐
Latest debtors & creditors ageing	Yes ☐	No ☐
Letter of award for the project for which the guarantee is required		
(remove if fuel guarantee required)	Yes ☐	No ☐
Fuel Guarantees:		
Completed facility application form	Yes ☐	No ☐
Completed guarantee specific application form	Yes ☐	No ☐
Last 2 years audited financial statements	Yes ☐	No ☐
Latest management accounts (not older than 2 months)	Yes ☐	No ☐
Latest debtors & creditors ageing	Yes ☐	No ☐
Copy of your last 3 months trading statement with the relevant major	Yes ☐	No ☐
Copy of the relevant licence	Yes ☐	No ☐
SARS/Custom Guarantees:		
Completed facility application form	Yes ☐	No ☐
Completed guarantee specific application form	Yes ☐	No ☐
Last 2 years audited financial statements	Yes ☐	No ☐
Latest management accounts (not older than 2 months)	Yes ☐	No ☐
Latest debtors & creditors ageing	Yes ☐	No ☐
Formal Guarantees Request (SARS)	Yes ☐	No ☐

NHBRC Guarantees:

Completed facility application form	Yes ☐	No ☐
Completed guarantee specific application form	Yes ☐	No ☐
Last 2 years audited financial statements (if applicable)	Yes ☐	No ☐
Engineers/competent persons report	Yes ☐	No ☐
Occupation certificate (if applicable)	Yes ☐	No ☐
Letter from the NHBRC requesting the guarantee	Yes ☐	No ☐
Risk assessment	Yes ☐	No ☐
Proof of address for the company (not older than 3 months)	Yes ☐	No ☐
ID copies of all members	Yes ☐	No ☐
Proof of address for the member (not older than 3 months)	Yes ☐	No ☐

Education Guarantees:

Completed facility application form	Yes ☐	No ☐
Completed guarantee specific application form	Yes ☐	No ☐
Last 2 years audited financial statements (if applicable)	Yes ☐	No ☐
A cashflow forecast for 12 months	Yes ☐	No ☐
Last 3 months bank statements	Yes ☐	No ☐
Estimated revenue to be received in advance for the next 12 months	Yes ☐	No ☐
Campus and course information (campus location, name of course, number of students enrolled for the course, course duration)	Yes ☐	No ☐
Letter from the DOE requesting the guarantee	Yes ☐	No ☐

Mining Guarantees:

Completed facility application form	Yes ☐	No ☐
Completed guarantee specific application form	Yes ☐	No ☐
Last 2 years audited financial statements (if applicable)	Yes ☐	No ☐
A cashflow forecast for 12 months	Yes ☐	No ☐
Details of off-take agreements	Yes ☐	No ☐
Full EMP report	Yes ☐	No ☐
Confirmation of current rehabilitation obligation (confirmed by the competent persons report)	Yes ☐	No ☐
Letter from the DMR requesting the guarantee	Yes ☐	No ☐
Feasibility study (if applicable)	Yes ☐	No ☐

Additional documents may be requested upon review and assessment of the above information. Should the quotation be accepted, The Hollard Insurance Company Limited will instruct attorneys to draft the relevant security documents. The attorneys will provide a list of the applicable FICA documents.