

RISK QUESTIONNAIRE

NAME & SURNAME: _____

POLICY NUMBER: _____

OCCUPATION DATE: _____

NEW RISK AND POSTAL ADDRESS: _____

GENERAL QUESTIONS WITH REGARD TO THE RISK ADDRESS

SECTION 1:

(If security complex, also please answer section 2)

Type of residence

House / Town House

Type of Construction

Roof: _____

Walls: _____

If a thatch roof, is it treated, and YES/NO

Is there a SABS approved lightning protector? YES/NO

1. Are there any parks or open fields in front, behind or next to the premises? YES/NO

If YES describe in full: _____

2. Are there any building activities in the area? YES/NO

If YES, describe where and distance from property.

3. Is the property in a well established area? YES/NO

4. Are all exterior doors, excluding sliding, pivot and "French" doors protected by security gates? YES/NO

If NOT, do you undertake to equip all such doors with the necessary security gates Before the cover commences on your risk address? YES/NO

5. Are there any pivot, sliding and or "French" doors at the premises? YES/NO

If YES: are these door/s protected by security gates? YES/NO

If NO, do you undertake to equip all such doors with the necessary security gates? YES/NO

6. Are there any glass right next to any exterior door/s? YES/NO

If YES: Are all panels protected by burglar bars or by the construction of the security gates? YES/NO

If NO: Do you undertake to equip all such windows with the necessary burglar bars before the cover starts of the new risk address? YES/NO

7. Are all opening windows protected by burglar bars? YES/NO
 IF NOT: Do you undertake to equip all such windows with the necessary burglar bars
 before the cover start of the new risk address? YES/NO

8. Are there any non-standard structures(not of brick, stone, concrete, asphalt) on the premises, including Wendy
 houses, Thatch roof Lapas,
 Any other outbuildings etc carports?
 Is so give Value : _____ YES/NO

SECURITY OF OUTBUILDINGS:

Are the doors covered by security gates? YES/NO
 Are the windows covered by burglar bars? YES/NO

ALARM SYSTEM AT THE INSURED PREMISES

1. Type of alarm system installed? _____
2. Is it tested? If YES by whom and how often? _____
3. Do you have a service contract on your alarm system? If Yes please state the name of the
 Company responsible? _____
4. Does the alarm system cover all doors given access to the house? YES/NO
 Does the alarm system cover all opening windows given access to the house? YES/NO
5. Is the alarm system linked to a reaction unit/control room? YES/NO
 If NO, who else, except yourself and members of your family, has been requested
 to respond to the alarm? _____
6. If alarm system linked, please state how eg. Telephonic, radio or electronic signal:

7. Do you activate the alarm when the house is unattended? YES/NO
8. Do you activate the alarm when you go to sleep? YES/NO
 If NOT: All exterior doors and windows that can open must be protected as describe in points
 1,2 and 4 above.

SECTION 2:

If it is a Security Complex the following is applicable:

Type of residence

House/Town House

Type of Construction

Standard / Thatch

If the roof is thatch:

Is it treated? YES/NO

Is there a SABS approved lightning protector? YES/NO

Is the complex walled in with electric fencing? YES/NO

Is the electric fence linked to an armed reaction unit? YES/NO

Is there access Control? YES/NO

Is there 24 Hour security guards? YES/NO

SECTION 3:

If the residence is on a plot or small holding

a. What is the size of the property? _____

b. Are there any low cost housing/squatter camp within 24km radius of the property? YES/NO

c. Is the fence electrified? YES/NO

d. Is there more than one dwelling on the property? YES/NO

e. How long have you occupied above-mentioned dwelling? _____

f. Is there an alarm installed at the above-mentioned dwelling? YES/NO

g. Is the alarm connected to a 24 hour response unit? YES/NO

h. Are there burglar bars in front of all exterior doors? YES/NO

i. Are there security gates at all exterior doors? YES/NO

j. Are any farming activities being practiced on property? YES/NO

I, _____ hereby declare that the above mentioned is true and verified

by me as policy owner on this day of _ _ / _ _ / _ _

Signed: _____

