

BUILDINGS AMENDMENT FORM

Insured _____		Policy number _____	
Address to remain the same	Yes	No	FOR OFFICE USE Supply all details pertaining to the new risk address
Risk address change			

Buildings:			
Sum Insured: R _____			
Are all opening windows protected by burglar bars	Yes	No	Check security requirements apply warranty Check security requirements apply warranty Alarm warranty
Are all outgoing doors protected by security gates	Yes	No	
Are the premises protected by a monitored alarm with armed reaction	Yes	No	
Are there open areas adjacent to property	Yes	No	
Are there building activities in the area	Yes	No	
Have you suffered losses in past two years	Yes	No	

If Yes, supply date of loss, type of incident and value of claim:

Date of Loss	Type of claim	Amount paid
1) _____	_____	R _____
2) _____	_____	R _____
3) _____	_____	R _____

Construction of walls	Standard	Yes	No	Refer to Hollard if non-standard	
	Non-standard	Yes	No		
Type of construction if non-standard _____					
Construction of roof	Standard	Yes	No	Refer to Hollard if non-standard	
	Non-standard	Yes	No		
Type of construction if non-standard _____					
Is there a thatched lapa on the premises		Yes	No	Rate accordingly if within 5m of the main building	
If Yes, how far is it situated from main building	_____				
Thatched roof (If Yes, thatch questionnaire to be completed)		Yes	No		
If Yes:					
• lightning detector		Yes	No		
• is the thatched roof treated (supply full details)		Yes	No		

Is the residence undergoing building alterations/are these planned within near future		Yes	No	Underwrite accordingly	

Are sliding doors fitted with additional locks	Yes	No	If No, burglar bars and security gate or alarm warranty	
Is the perimeter protected by electric fencing linked to an alarm	Yes	No		
Is the risk situated on a smallholding/plot or farm	Yes	No		Refer to Hollard
Is the risk situated within the 50-year flood-line close to rivers/streams	Yes	No		Storm and flood damage possibility
How many days in any one year will the residence be unoccupied	_____			Unoccupancy clause
How far is the residence situated from the closest fire services	_____			Fire prevention
Is the risk a holiday home	Yes	No		Burglar bar and security gate or alarm warranty. Storm/fire risk.

Delete Buildings	Effective date of deletion:
-------------------------	------------------------------------

- | | |
|----------|-------|
| 1) _____ | _____ |
| 2) _____ | _____ |
| 3) _____ | _____ |
| 4) _____ | _____ |
| 5) _____ | _____ |

CLIENT SIGNATURE:	Effective date of amendment:
_____	_____