

ACCEPTANCE OF QUOTATION

DECLARATION

I/We hereby declare that the particulars and declarations in this quotation are correct and complete and include all information known to me/us and which concern the risk to be insured, and that this and any other written declaration made by or on behalf of me/us for the sake of the requested insurance will be the foundation of, and will be incorporated in the agreement between me/us and Santam Limited and that it will be binding. I/We hereby further declare that only those policy sections included in the quotation was required and will apply.

Signed at \_\_\_\_\_ on \_\_\_\_ / \_\_\_\_ / \_\_\_\_ by \_\_\_\_\_  
[Applicant]

METHOD OF PAYMENT

☐ Cash annually or ☐ Monthly per debit order against account being ☐ a cheque account  
☐ a transmission account

DEBIT ORDER DETAIL AND AUTHORISATION

Bank name/address : \_\_\_\_\_

Institution code : \_\_\_\_\_ Branch code : \_\_\_\_\_  
[Bank/branch identification number]

Account number : \_\_\_\_\_  
[Client identification number]

Account holder : \_\_\_\_\_  
[Name of account with institution]

D/O frequency : ☐ Monthly ☐ Annual

Monthly debit order collection date :

On, or last working day <u>before</u> *	29th	<input type="checkbox"/>	30th	<input type="checkbox"/>	31st	<input type="checkbox"/>	1st	<input type="checkbox"/>
On, or first working day <u>after</u>	25th	<input type="checkbox"/>	26th	<input type="checkbox"/>	27th	<input type="checkbox"/>	28th	<input type="checkbox"/>
Two working days <u>after</u>	15th	<input type="checkbox"/>						

\* Please note that for this option, collection will take place on the last working day before this date in the event of this date falling on a weekend or public holiday

I authorise Santam Limited (SANTAM) to deduct the amount of the premium for this policy from my account at the above-mentioned institution in any way that Santam and the institution have agreed upon. I also authorise Santam to pay any amounts which may accrue to me, to the credit of my account with the above-mentioned institution. All such withdrawals from my bank account by Santam shall be treated as though they had been signed by me personally.

\_\_\_\_\_  
Signature of account holder