

Reg. No. 2002/004034/07 Web site: <u>www.santova.com</u> insurance@santova.com FSP License No: 6018 Email:

## LETTER OF INVESTIGATION

- 1. I/We the undersigned hereby appoint Santova Financial Services (Pty) Ltd to investigate my/our short term insurance(s) as specified below.
- Please treat this signed investigation letter as a mandate from myself/us to allow Santova Financial Services (Pty) Ltd 2. complete disclosure of all the information requested below and to obtain any further information necessary in order to investigate our / my portfolio and report on their findings.
  - a. Copy of the most recent policy schedule.
  - b. Full details relating to the current excess structures.

  - c. Confirmation of rates and premiums.d. Confirmed claims experience for the past three years.
  - e. Details of any special endorsements or policy warranties that have been applied to the policies.

Insurer	Policy Number

Sign	ed at		 _ this	d	lay of	_ 20	
Full	Name		 				
For o	or on behalf of		 				
	Authorised Sigr	atory		C	Company Stamp		