

**CONTRACT
WORKS COUPON**

(CONTRACT WORKS)		
COUPON	NUMBER	YEAR
CW		

Replacing Coupon Policy No (where applicable) _____

Agent: _____

Underlying Policy Number: _____

Broker: _____

The Insured

Name: _____

(and/or others provided for in the Agents Insurer's Policy)

Company Registration Number: _____

Holding Company Name: _____

Insured VAT Reg No: _____

Legal Address

Street name and number: _____

Risk City: _____

Postal Code: _____

Risk Address 1:

Street name and number: _____

Risk City: _____

Postal Code: _____

Risk Address 2:

Street name and number: _____

Risk City: _____

Postal Code: _____

Risk Address 3:

Street name and number: _____

Risk City: _____

Postal Code: _____

Risk Address 4:

Street name and number: _____

Risk City: _____

Postal Code: _____

Risk Address 5:

Street name and number: _____

Risk City: _____

Postal Code: _____

Sasria SOC Limited

Tel: +27 11 214 0800 | 086 172 7742 ● Fax: +27 11 447 8630 | 086 172 7329

36 Fricker Road, Illovo, 2196 ● P.O. Box 653367, Benmore, 2010 ● Email: contactus@sasria.co.za ● Website: www.sasria.co.za

● Sasria SOC Ltd: Reg. No. 1979/000287/06 ● FSP License No.: 39117



Period of Insurance

From _____ to 24h00 on _____

And any subsequent period required to complete the Insured Contract.

Item 1: Contract Works and Materials Sum Insured R _____
(Subject to escalation as provided for in the Nominated Insurers Policy)

Item 2: Construction Plant Sum Insured R _____
(Subject to the Limit of Indemnity stated in this Coupon Policy)

Item 3: Mobile Plant Sum Insured R _____
(Subject to the Limit of Indemnity stated in this Coupon Policy)

Premiums

Item 1: (Provisional only) R _____

Item 2: R _____

Item 3: R _____

TOTAL R _____

The premiums are inclusive of VAT at a standard rate

Signed on behalf of **Sasria SOC Limited**

Countersigned at _____

On the _____ day of _____ Year _____

Executive Manager

For: Agent/UMA

Important Note:

- 1) All claim notifications reports or any other communication whatsoever in connection with this Coupon Policy shall be made to the Agent/UMA.
- 2) Top five (per sum insured) risk addresses must be listed above.
- 3) In terms of a ruling by SARS, this document together with proof of payment of premium constitutes an alternative to a tax invoice, debit note or credit note as contemplated in section 20(7) and 21(5) of the VAT Act respectively.
- 4) In order to be eligible for a VAT input deduction, the insured must be in possession of this policy document together with proof of payment of the premium (e.g. bank statement).
- 5) By signing this document, each party hereto consents to the lawful processing of all personal information disclosed or shared herein or pursuant hereto, and further declares that all necessary consents required by privacy and personal information laws ("Privacy Laws"), including the Protection of Personal Information Act No 4 of 2013, have been obtained in accordance with such laws. Each party shall process all such personal information only in accordance with Privacy Laws and hereby indemnifies the other(s) against any loss, damages or claim that arises as a result of its breach of Privacy Laws.