

MOTOR B DECLARATION

TAX INVOICE

THIS NOTICE BECOMES A TAX INVOICE WHEN THE
TOTAL AMOUNT REQUESTED HAS BEEN PAID

ENDORSEMENT GE
NUMBER

ATTACHING AND
FORMING PART OF
SASRIA MOTOR POLICY NO.

In the name of _____

It is hereby declared and agreed that the insured having declared the number/total values of vehicles

as at _____ year _____ the premium is adjusted as follows:

CATEGORY	DESCRIPTION	NUMBER OF VEHICLES	PREMIUM	TOTAL PREMIUM
1.	Cars & Motorcycles		R	R
CATEGORY	DESCRIPTION	TOTAL VALUE ALL VEHICLES	RATE	TOTAL PREMIUM
A1	Agricultural vehicles	R		R
2.	Light Commercial Vehicle – GVM less than 3500kg	R		R
3.	Minibus (16 passengers including the driver) Midibus (16-36 passengers Including the driver)	R		R
4.	Car/Vehicle Ferrying Companies and/or Auto Carrying Companies and Motor Traders	R		R
5.	Buses	R		R
6.	Mobile Plants	R		R
7.	BRT	R		R
8.	HCV category	R		
	Net Additional/Refund Premium		Annual Premium = R _____ Less Premium Paid = R _____ x 50% = R _____	

For: Non-mandated Intermediary/UMA _____

Signed this _____ day of _____ Year _____

Sasria SOC Limited

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