

ANNEXURE 7

P.O. BOX 7380
JOHANNESBURG
2000

TAX INVOICE
(VAT Reg. 4140119340)

This Coupon becomes a Tax Invoice on
payment in full, of the premium reflected

COUPON (CONTRACT WORKS)

	NUMBER	YEAR
COUPON POLICY NO.	CW	/

Replacing Coupon Policy No (where applicable).....

Sasria 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:

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.....

COUPON POLICY NO.	CW	/
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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)

Premiums

- Item 1: (Provisional only) R
- Item 2: R
- TOTAL R

The premiums are inclusive of VAT

Signed on behalf of **Sasria Limited**

Countersigned at

On the day ofYear

.....
Director

.....
For: Sasria Agent

Important Note:

- 1) All claim notifications reports or any other communication whatsoever in connection with this Coupon Policy shall be made to the Sasria Agent.
- 2) Top five (per sum insured) risk addresses must be listed above.