

## CONFIDENTIAL FINANCIAL QUESTIONNAIRE

### Sharjah Islamic Bank – Group Credit Takaful Plan

#### **1 Life Insured's Details (all applicants)**

Full name of life to be insured

Surname

Given names

Date of birth

 /  / 

#### **2 Application details (all applicants)**

How much insurance is currently in-force on your life, please include any other simultaneous applications separately (the last row)?

	Life	Disability
Business life insurance (Buy and Sell)		
Business life insurance (Key person)		
Business life insurance (Contingent liability)		
Business life insurance (Estate Duty)		
Personal life insurance		
Group insurance		
Other simultaneous applications		

#### **3 Income Details (Employees only)**

Name of company

Nature of the company's business

Position held

Please give details of the life to be insured's personal earnings (as assessed for income tax) for the last 3 years.

Description	Year Ended .....	Year Ended .....
Wages and salary received		
Allowances paid (car, travel, etc.)		
Bonus received		
Commission received		
Company pension contribution paid (if not included in wages and salaries)		
Other (Please specify)		
<b>TOTAL</b>		



#### 4 Income Details (individuals with an ownership interest)

Please give details of the life to be insured's personal earnings (as assessed for income tax) for the last 3 years. Next, go directly to question 5 and complete details on your investment income.

Description	Year Ended .....	Year Ended .....
Share of net profits (please specify entity)		
Entity 1:		
Entity 2:		
Entity 3:		
Salary/wage received		
Director's fee received (if not included above)		
Company pension fund contribution		
Allowances paid (car, travel, etc.)		
Other income from companies		
1		
2		
3		
<b>TOTAL</b>		

Nature of business:	
Entity 1:	
Entity 2:	
Entity 3:	

#### 5 Investment Income Details (all applicants)

Please give details of all of the life insured's investment income (excluding pension contributions) for the last 3 years.

Description	Year Ended .....	Year Ended .....
Dividends from shares		
Interest		
Net Real Estate rental Income		
Other: .....		
<b>TOTAL</b>		



## 6 Estate Duty insurance

Please provide the following details regarding your assets and liabilities. Please include value of any shares in private or public companies, but exclude assets held in a trust.

Assets		Liabilities	
Description	Value	Description (please specify)	Value
Personal Residence & Furniture			
Car(s)			
Personal – collectables, etc.			
Investment Property (please specify)			
1			
2			
3			
Pension value			
Business(es) value			
Insurance policies			
Investments – Shares, etc.			
Other Assets (please specify)		Other Liabilities (please specify)	
1		1	
2		2	
3		3	
<b>TOTAL</b>		<b>TOTAL</b>	

Please attach a clear calculation showing the Rand amount of estate duty that will be payable.

## 7 Key person insurance

Please provide a motivation explaining why this applicant is a Key Person, which should include the likely financial impact on the business in the event of death or disability.

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How long has the applicant been in his/her current position?

Please show some key indicators for this business over the last 3 financial years:

Year	Turnover	Net profit before tax



**8 Insurance cover to provide security for a loan**

Amount of loan	
Term of loan (years)	
Reason for loan	
Is anyone else in the company standing surety for the loan?	Yes / No
If yes, for what % of the loan is the applicant responsible ?	
State conditions of repayment	

A copy of the loan agreement or a letter from the financial institution granting the loan stating that the loan is being granted **MUST** be attached.

**9 Buy and Sell cover**

	Entity 1	Entity 2	Entity 3
Name of entity			
Nature of business			
Type of entity (CC, PTY, Trust, etc)			
Applicants % ownership of each entity			
Valuation of entity			
Valuation performed by			
Valuation method			

**8 Bankruptcy Details**

Have you or any company with which you have been associated been made bankrupt?

Yes       No

If yes, provide full details:

Date	
Date of rehabilitation	
Other details	



### Declaration

I, the Life to be Insured, agree and declare that this financial questionnaire, including any attached or referenced documents, are true in all respects and will form the basis for the proposed contract of insurance. Any non-disclosure or incorrect information will invalidate the contract.

Signature of Life to be Insured

Date

Signature of Policy Owner(s)

Date