

## RENEWAL CERTIFICATE

### This is to Certify

That in accordance with the authorisation granted to the Binder Holder by Lombard Insurance Company Limited (hereinafter called Insurer).

**The said Insurer is hereby bound,** to insure during the period specified in the Schedule herein upon the terms and conditions of the original Certificate (specified in the said Schedule) and any endorsement thereon and of any Renewal Certificates (including this Renewal Certificate) attaching thereto and any endorsements on such Renewal Certificates.

This Renewal Certificate forms part of the said original Certificate, to which it should be permanently attached.

**Certificate No:** PA1706194  
**Renewal No:** 1  
**Insured:** Endurance Ride Association of South Africa (VAT No: 4190264186)  
**Insured Address:** Postnet Suite 241, Private Bag X01, Brandhoff, 9301  
**Insurance Broker:** Newsure Brokers cc (VAT No: 4460258744)  
**Premium:** R14,822.18 + R2,223.33 VAT = R17,045.51  
**Period of Insurance:** From 26 June 2019 to 25 June 2020  
Both days inclusive plus any subsequent period for which the Insurers agree to accept a renewal premium and subsequently endorsed hereon.

Signed at Randburg on this 16th Day of May 2019



Praesidio Risk Managers (Pty) Limited  
Signed for and on and behalf of the Insurer

### ALL OTHER TERMS AND CONDITIONS REMAIN UNALTERED

The Insured is requested to read this Renewal Certificate and if it is incorrect, return it immediately for alteration.

In the event of a claim under this Certificate, please notify the Binder Holder who is acting as the agent of Insurer.

**In terms of a ruling issued by SARS, this document together with proof of payment of premium constitutes an alternative tax invoice, debit note or credit note as contemplated in sections 20(7) and 21(5) of the VAT Act respectively.**

### Several Liability Notice (LSW1001)

The subscribing Insurers' obligations under contracts of insurance to which they subscribe are several and not joint and are limited solely to the extent of their individual Subscriptions. The subscribing Insurers are not responsible for the subscription of any co-subscribing Insurers who for any reason does not satisfy all or part of its obligations.

# SCHEDULE

<b>Certificate Number:</b>	PA1706194
<b>Insured:</b>	Endurance Ride Association of South Africa (VAT No. 4190264186)
<b>Business Description:</b>	for Endurance Riding Purpose and SANESA School Endurance
<b>Broker:</b>	Newsure Brokers cc (VAT No: 4460258744)
<b>Period of Insurance:</b>	From 26 June 2019 to 25 June 2020 Both days inclusive plus any subsequent period for which the Insurers agree to accept a premium and subsequently endorsed hereon
<b>Renewal Date:</b>	26 June 2020
<b>Territorial Limits:</b>	Worldwide
<b>Basis of Cover:</b>	Cover is restricted to apply only whilst the insured persons are attending, competing in or officiating at any events held under the auspices of Endurance Riding Association of South Africa (ERASA) including whilst commuting from place of residence and place of event in a direct and timeous manner
<b>Conditions:</b>	As per the terms and conditions of the attached PRMGPA2 Policy Wording
<b>Maximum Limits of Liability:</b>	Any One Life Limit: R95,000 Any One Accident Limit: R5,000,000
<b>Insured Persons:</b>	Category 1: 1780 x Fully paid up Members 18 years and older including 300 Day Riders (Refer Memorandum 1) Category 2: 450 x Fully paid up Members younger than 18 years of age including 100 Day Riders (Refer Memorandum 1) Category 3: 25 x Marshalls

## Compensation Payable:

Category 1	
1. Death	R75,000
2. Permanent Total Disability	R75,000
3. Permanent Disability	Such % of R75,000 as specified under the Table of Compensation
4. Temporary Total Disability	Not Insured
5. Temporary Partial Disability	Not Insured
6. Medical Expenses	Up to R20,000 per Insured Person. Excess: R500, each and every claim
7. Critical Illness	Not Insured
* Political Evacuation	Not Insured
* MSO Access	Included - Emergency Telephone Number +27 11 259 5462

Category 2	
1. Death	R12,500
2. Permanent Total Disability	R12,500
3. Permanent Disability	Such % of R12,500 as specified under the Table of Compensation
4. Temporary Total Disability	Not Insured
5. Temporary Partial Disability	Not Insured
6. Medical Expenses	Up to R20,000 per Insured Person. Excess: R500, each and every claim
7. Critical Illness	Not Insured
* Political Evacuation	Not Insured
* MSO Access	Included - Emergency Telephone Number +27 11 259 5462

# SCHEDULE

Category 3	
1. Death	R20,000
2. Permanent Total Disability	R20,000
3. Permanent Disability	Such % of R20,000 as specified under the Table of Compensation
4. Temporary Total Disability	Not Insured
5. Temporary Partial Disability	Not Insured
6. Medical Expenses	Up to R20,000 per Insured Person. Excess: R500, each and every claim
7. Critical Illness	Not Insured
* Political Evacuation	Not Insured
* MSO Access	Included - Emergency Telephone Number +27 11 259 5462

**Memorandum 1**

It is hereby noted and agreed that the Insured Persons participates in SANESA Endurance Riding and Endurance Riding

**Memorandum 2**

It is further noted and agreed that if Riders exceeds the numbers stated on the Policy we will charge the same fee for any Additional Riders on Declaration

# PREMIUM COMPUTATION

**Insured:** Endurance Ride Association of South Africa (VAT Number: 4190264186)  
**Certificate Number:** PA1706194  
**Period of Insurance:** From 26 June 2019 to 25 June 2020  
Both days inclusive plus any subsequent period for which the Insurer agree to accept a premium and subsequently endorsed hereon

## Annual Premium

Insured Persons	Number of Insured Persons	Premium per Capita	Premium (VAT Inclusive)
Category 1	1780	R7.60	R13,528.00
Category 2	450	R3.65	R1,642.51
Category 3	25	R75.00	R1,875.00
<b>Total Premium:</b>			<b>R17,045.51</b>

	Gross Payable	Commission 20%	Net Due to Praesidio
<b>Total Payable</b>	R17,045.51	R3,409.10	R13,636.41

# ENDORSEMENTS

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<b>NO</b>	<b><u>DESCRIPTION</u></b>	<b><u>EFFECTIVE DATE</u></b>
*	Policy Inception	26 June 2018
1	Renewal	26 June 2019



**STATUTORY NOTICE TO SHORT-TERM INSURANCE POLICYHOLDERS**  
**IMPORTANT – PLEASE READ CAREFULLY – DISCLOSURE AND OTHER LEGAL REQUIREMENTS**

(This notice does not form part of the Insurance Contract or any other document)  
As a short-term policyholder, or prospective policyholder, you have the right to the following information:

**1. ABOUT THE INTERMEDIARY (INSURANCE BROKER)**

Company Name: Newsure Brokers cc  
Physical Address: 10 Saoc Street Middelburg 1055  
Postal Address: P O Box 1733 Middelburg 1050  
Telephone Number: 0132828311

Authorised Financial Services Provider Licence Number: 43086

Commission paid by the Insurer to the Intermediary is reflected in the Premium Breakdown, and does not exceed the maximum percentage prescribed by law.

**2. ABOUT THE BINDER HOLDER / UNDERWRITING MANAGER**

Company Name: Praesidio Risk Managers (Pty) Limited  
Physical Address: 6th Floor Surrey Place, 291 Surrey Ave, Randburg, 2194  
Postal Address: P O Box 545, Cramerview, 2060  
Telephone Number: 011 716 7801  
Website: [www.praesidio.co.za](http://www.praesidio.co.za)

Authorised Financial Services Provider Licence Number: 14174

- Praesidio Risk Managers receives a fee for performing binder functions in terms of binder agreements, and a profit share in the underwriting and financial profitability over time.
- Praesidio Risk Managers has over the past 12 months received more than 30% of their total remuneration from Lombard Insurance Company Limited and Lloyd's.
- Praesidio Risk Managers does not hold any interest or direct share in any Insurer or Product Provider.
- Praesidio Risk Managers holds Professional Indemnity Insurance.
- Praesidio Risk Managers has a Complaints Resolution Policy. If You require more information in this regard, please contact Our offices.
- Praesidio Risk Managers has a Conflict of Interest Management Policy and related gift register. If You require more information, please contact Our offices.
- Praesidio Risk Managers is in possession of the required written mandates to act on the Insurer's behalf.

Compliance Officer: Moonstone Compliance (Pty) Limited  
Email: Natassja Jooste - [njooste@moonstonecompliance.co.za](mailto:njooste@moonstonecompliance.co.za)  
Physical Address: Valerida Centre, Dirkie Uys Street, 1<sup>st</sup> Floor, Stellenbosch, 7600  
Postal Address: P O Box 12 662, Die Boord, Stellenbosch, 7613  
Telephone Number: 021 883 8000  
Website: [www.moonstoneinfo.com](http://www.moonstoneinfo.com)

Type of policy involved: Personal Accident Insurance

**3. ABOUT THE INSURER**

Company Name: Lombard Insurance Company Limited  
Physical Address: Ground Floor Building C, Sunnyside Office Park, 2 Carse O'Gowrie Rd, Parktown, 2121  
Postal Address: P O Box 1411, Killarney, 2193  
Telephone Number: 0861 551 0600  
Complaints: [complaints@lombardins.com](mailto:complaints@lombardins.com)  
Compliance: [compliance@lombardins.com](mailto:compliance@lombardins.com)

Authorised Financial Services Provider Licence Number: 1596

Lombard is a member of the South African Insurance Association (SAIA) and subscribes to the SAIA Code of Conduct. If You have a complaint which could not have been resolved directly with Lombard relating to the manner in which we conduct Our business, You can submit a complaint with SAIA on [info@saia.co.za](mailto:info@saia.co.za)

**4. ABOUT THE ASSISTANCE COMPANY**

Company Name: Medical Services Organisation (MSO)  
Physical Address: Healthcare Park, Woodlands Drive, Woodmead, Sandton, South Africa  
Telephone Number: +27 11 259 5462  
Email: [praesidio@mso.co.za](mailto:praesidio@mso.co.za)

**5. PREMIUM AND YOUR MONETARY OBLIGATIONS**

The amount of premium due is contained on the Policy Schedule. In all instances premium must be paid to Your Intermediary before cover is effected.

Extent of premium obligations You assume as the Insured: You agree to pay the premium. Details of the amount of premium due and premium due date are contained in the Policy Schedule.

**6. COOLING OFF PERIOD**

If the cover does not meet the policyholder's requirements, the policyholder may cancel this policy within 15 days of the first premium due date shown on the schedule or within 15 days of receiving the policy and schedule, whichever is the later. We will give the policyholder a full refund of any premiums paid as long as no claim has been made in that period. We will provide this refund within 30 days from the date we receive notice of cancellation from the policyholder.

**7. WAIVER OF RIGHTS**

No insurance party involved may request or induce You in any manner, to waive any right or benefit conferred on You by or in terms of any financial services provided and any such waiver is null and void.

**8. OTHER IMPORTANT INFORMATION**

- Your Policy Wording and Schedule must be read as one document. If You need advice on any aspect of Your policy, first amounts payable (excesses) or the claims procedures as well as Your responsibility to pay the premium, please contact Praesidio Risk Managers or Your insurance advisor.
- You will be informed of any material changes to the information contained regarding Your Intermediary, the Underwriting Manager and the Insurer.
- The Underwriting Manager and Your Intermediary must give reasons for repudiating Your claim.
- You are entitled to a copy of the policy free of charge.

**9. WARNING**

- Do not sign any blank or partially completed application form. Complete all forms in ink.
- Keep all documents handed to You and make a note as to what is said to You.
- Do not be pressurised to buy the product.
- Incorrect or non-disclosure by You of relevant facts may influence the Insurer on any claims arising from Your contract of insurance.

**10. PARTICULARS OF THE OMBUDSMAN FOR SHORT TERM INSURANCE (OSTI)**

Postal Address: PO Box 32334, Braamfontein, 2017  
Telephone Number: 011 726 8900  
Facsimile Number: 011 726 5501  
E-mail: [info@osti.co.za](mailto:info@osti.co.za)

The Ombudsman is available to advise You in the event of claims problems which are not satisfactorily resolved by the Intermediary, Underwriting Manager and the Insurer.

11. **PARTICULARS OF THE OMBUD FOR FINANCIAL SERVICES PROVIDERS.**

Postal Address: PO Box 74571, Lynnwood Ridge, 0040.  
Telephone Number: 012 470 9080  
Facsimile Number: 012 348 2447  
Email: [info@faisombud.co.za](mailto:info@faisombud.co.za)  
Web: [www.faisombud.co.za](http://www.faisombud.co.za)

As Underwriting Manager of this policy, Praesidio Risk Managers is dedicated to comply with the FAIS Act and its sub-ordinate legislation. If You feel that You would like to complain, please do so in writing to the compliance officer mentioned above. We will provide You with a detailed complaints resolution procedure. If however You feel that Your complaint has not been dealt with sufficiently within Our complaints resolution procedure, You have the right to contact the Ombud for Financial Services Providers above.

12. **HOW TO INSTITUTE A CLAIM**

You must give notice to Praesidio Risk Managers (Pty) Ltd in writing as soon as practical of any occurrence which may give rise to a claim under this Insurance. You will be emailed a claim form, which you will be required to complete and return along with any information and proof in support of the claim as specified on the claim form. Failure to return the completed claim form to us within 180 days from the date of incident will invalidate the claim. You may become responsible for a first amount payable in respect of such claim.

13. **COMPLAINTS PROCEDURES**

If You have experienced any service issues, a complaint can be made to the Praesidio Risk Managers Operations Manager on telephone number 011 716 7808 or e-mail [info@praesidio.co.za](mailto:info@praesidio.co.za). All complaints must be submitted in writing. We will communicate with the complainant and/or their authorised representative on the complaint and resolution thereof. If you are not satisfied with the outcome of the complaint resolution, you have a right to lodge a complaint with the Ombudsman for Short Term Insurance for matters in respect of claims, or if you have a complaint in respect of advice given or services rendered by the Financial Services Provider, you can lodge a complaint with the Ombudsman for Financial Services Providers. These Complaints Procedures do not affect any right of legal action that You may have against Us.