



Success Brokers PTY(LTD)

An Authorised Financial Services Provider No:13966

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TO WHOM IT MAY CONCERN

LETTER OF AUTHORISATION

I/we (and any person representing me)

_____ hereby authorise Success Brokers (Pty) Ltd / Success Employee Benefits (Pty) Ltd / Success Khumo Insurance Brokers (Pty) Ltd that;

- consent to such information being given to any other insurance company and/or reinsurance company or its agent should there be a legitimate business reason for doing so; and
- accept that this information may be checked against other legal sources or databases.
- consent to my policy, claims or credit information being verified or shared with third parties in the ordinary course of business;
- accept that it is in the public interest for insurers to share insurance information (including credit information);
- accept that any information provided to the insurer may be stored in a shared database;

It is necessary for insurance companies to share information in order to underwrite policies fairly.

This will concern the following policies:

POLICY NUMBER/S	TYPE OF POLICY	INSURANCE COMPANY	RENEWAL DATE

Please furnish them with all copies of policies and claims history or any other information as may be requested by them.

Yours faithfully,

Name (PRINT)

ID Number

Signature

Success Consultant



Success Brokers (Pty) Ltd. Reg No. 1973/015690/07
Henley House, Greenacres Office Park, Cnr Victory & Rustenburg Roads, Victory Park
Tel: 011 449 4444 • Fax: 011 449 4300 • P.O.Box 781 Pinetown 2123
Email: success@successbrokers.co.za • www.successbrokers.co.za
Directors: P.G.C Geffroy • S. Geffroy • I. Perovic

