



UNDERWRITING MANAGERS

Tel: 0861-00-0090  
E-mail: [info@keu.co.za](mailto:info@keu.co.za)

## ANNUAL EVENTS LIABILITY PROPOSAL

<b>FULL LEGAL NAME OF THE INSURED</b> (No private individuals, unless Sole Proprietor) This entity must be South African		Mining Qualifications Authority	
<b>REGISTERED PHYSICAL ADDRESS</b>		07 Anerley Road, Parktown, Johannesburg	
<b>VAT NUMBER</b>		N/A	
<b>COMPANY REGISTRATION NUMBER OR NPO NUMBER</b>		SETA 16	
<b>WEBSITE ADDRESS</b>	www.mqa.org.za		
<b>DETAILED BUSINESS DESCRIPTION</b>	Administration of skills development programmes in the Mining and minerals sector.		
<b>HOW MANY YEARS HAS THE APPLICANT BEEN OPERATING</b>	23 Years		
<b>PERIOD OF INSURANCE:</b>	<b>From</b>	01 June 2022	<b>To</b> 31 March 2027
<b>ESTIMATED ANNUAL TURNOVER</b>	R 1 335 743 000	<b>PREVIOUS YEAR TURNOVER</b>	R 947 718 000.00
<b>ANTICIPATED TURNOVER PER EVENT</b>	R 0,00	<b>ANTICIPATED NUMBER OF EVENTS</b>	17
<b>ARE ANY EVENTS HOSTED OUTSIDE THE BORDERS OF SOUTH AFRICA? IF YES PLEASE PROVIDE DETAILS</b>	YES		
	<input checked="" type="checkbox"/> NO		
<b>DOES THE INSURED EMPLOY ANY ARTIST FOR ANY OF THE EVENTS? IF YES PLEASE PROVIDE DETAILS</b>	YES	On some events, artists are used to Facilitate programmes and to provide entertainment. (This is applicable to a Maximum of 5 events Per annum based on historical practice)	
	<input checked="" type="checkbox"/> NO		
<b>HAS ANY INSURER EVER CANCELLED AN INSURANCE POLICY AND IF YES PROVIDE REASONS?</b>	YES		
	<input checked="" type="checkbox"/> NO		
<b>IS YOUR COMPANY A MEMBER OF ANY ASSOCIATION? IF YES PLEASE PROVIDE DETAILS</b>	YES		
	<input checked="" type="checkbox"/> NO		
<b>HAS THE COMPANY TRADED UNDER ANY OTHER NAME DURING THE PAST THREE YEARS? IF YES PLEASE PROVIDE DETAILS</b>	YES		
	<input checked="" type="checkbox"/> NO		
<b>HAS THE INSURED EVER BEEN REFUSED INSURANCE COVER? IF YES PLEASE PROVIDE DETAILS?</b>	YES		
	<input checked="" type="checkbox"/> NO		



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DOES THE INSURED USE SUB-CONTRACTORS FOR ANY TEMPORARY CONSTRUCTION SUCH AS STAGES, LIGHTS AND THE LIKE?	YES ✓	NO
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### PLEASE PROVIDE LIST OF SUB-CONTRACTORS MOST OFTEN USED

NAME LEGAL ENTITY:	ACTIVITY USED FOR:
Suppliers are rotationally selected from the CSD system.	Erection of Tents, Supplying sound systems,
	Supplying required furniture and equipment and e.t.c

### ALL CLAIMS OR INCIDENTS THAT MIGHT HAVE GIVEN RISE TO A CLAIM IN THE PAST FIVE YEARS

YEAR	INCIDENCE	AMOUNT CLAIMED / SETTLED

WHO ARE BUILDING THE STAGES?	Rotationally selected suppliers from CSD
DOES THE ABOVE COMPANY HAVE LIABILITY INSURANCE?	Yes - (evidence required before the contract is awarded)
WHO SETS UP THE MARQUEES?	Rotationally selected suppliers from CSD
DOES THE ABOVE COMPANY HAVE LIABILITY INSURANCE?	Yes - (evidence required before the contract is awarded)
WHO (PERSON) IN THE COMPANY IS RESPONSIBLE FOR JOC APPROVAL AND GENERAL LEGISLATION?	Information required before the contract is awarded

### CATEGORIES OF EVENTS HOSTED THROUGH THE YEAR

MUSIC CONCERTS	Average number of events per annum	CORPORATE CONFERENCES	Average number of events per annum	LIFESTYLE FOOD FESTIVALS	Average number of events per annum
			6		
EXHIBITIONS	Average number of events per annum	SPORTING EVENTS	Average number of events per annum	PERSONAL EVENTS IE. WEDDINGS, BIRTHDAY PARTY	Average number of events per annum

OTHER PLEASE ADVISE:	Stakeholder engagements: X11 Average per annum
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### LIMITS REQUIRED: (ALL LIMITS ARE PROVIDED IN THE AGGREGATE)

GENERAL LIMIT IN THE AGGREGATE	R 2 500 000,00
LIMIT FOR ANY ONE OCCURRENCE (IF DIFFERENT TO AGGREGATE LIMIT)	R
EMPLOYERS LIABILITY (noted as cast and crew, but does not include sub-contractors)	R 2 500 000,00
FOOD AND DRINK	R
SPREAD OF FIRE	R 2 500 000,00
DAMAGES TO VENUE- OPTIONAL <i>(The venue should have their own Property Policy)</i>	R
EXHIBITORS <i>(Please provide a list of exhibitors)</i>	R
PARTICIPANTS WHILST PARTICIPATING <i>(This only applies to sporting events)</i>	R
TEMPORARY CONSTRUCTION <i>(This is in respect of the liability only, not own damage)</i>	R
SPREAD OF FIRE	R 2 500 000,00
SUB-CONTRACTORS <i>(Must be specifically included, They should have their own insurance. Please provide a list of the Sub-Contractors and business description at event)</i>	R

### EXAMPLES OF EVENTS HOSTED BY THE INSURED DURING THE NEXT 12 MONTHS

NAME OF EVENT	DATE OF EVENT	LOCATION	NO. OF ATTENDEES	DESCRIPTION OF EVENT	INDOORS/ OUTDOORS
Stakeholder engagements forum	Various	Various	+150	Conference	Indoors/Online
Conferences	Various	Various	+150	Conference	Indoors/Online



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### DECLARATION

Signing this application does not bind the applicant or the company to complete insurance, but it is agreed that the information contained herein shall be the basis of the contract should a policy be issued. If any of the above questions have been answered fraudulently, or in such a way to conceal or misrepresent material fact or circumstances concerning, this insurance or the subject thereof the entire policy shall be void.

I/we have read the above and agree that to the best of my / our knowledge and belief same fully represents the true statements of facts.

<b>INSURED</b>	Mining Qualifications Authority
<b>DATE</b>	1 April 2022
<b>SIGNATURE</b>	
<b>NAME OF BROKING COMPANY</b>	
<b>FSP NUMBER</b>	
<b>NAME AND SURNAME OF INDIVIDUAL BROKER THAT ASSISTED INSURED WITH COMPLETION:</b>	
<b>CONTACT DETAILS</b>	