

# SAXUM

## INSURANCE

Company Registration No. 2004/011845/06  
VAT No. 4310217338

*Transfer of moneys including collateral, premium incorrectly deposited or refunds of premium*

					<i>official use only (tick)</i>
Date					
Company Name					
Guarantee Number					
Money/Collateral was deposited into	saXum Premium Account	*Own Account	Investec Collateral Account	*Other	
*Please specify details					
Transfer details	From Account ( <i>Your collateral account details</i> )	To Account ( <i>this account must be in the same name as the Facility</i> )**			
Bank					
Bank Code					
Type of Account					
Account Number					
<i>**Required: a copy of a cancelled cheque or a statement verifying the <u>To Account</u> holders details</i>					
Signature					
Authorised by					
Capacity					
<b><i>Please note: We require all outstanding premiums (including extensions) and fees to be settled in full before any collateral is released</i></b>					
<b>Official Use Only</b>					
Official Check List	1. Original guarantee returned? If not, state cancellation method in comments				
	2. Confirmation that all outstanding fees paid, e.g. securities, Attorneys, Couriers?				
	3. Enough collateral available for outstanding guarantees?				
	4. Proof of settlement for outstanding accounts and extensions?				
	5. Copy of Investec statement?				
	6. Proof that this is the Client's account?				
Refund Amount					
Comments					
Signature					
Authorised by					
Capacity	saXum Manager/Underwriter		saXum Director		
Date					