

IMPORTANT NOTES

- i. Please fully complete inserting the required details in all the applicable blocks.
- ii. Only the authorised signatory of the Indemnifier/Facility Holder is required to apply for guarantees and to sign this form.
- iii. All new guarantees to be issued by Botswana Insurance Limited: Bonds & Guarantees for existing clients of Botswana Insurance Limited: Bonds Guarantees are to be strictly completed on this form.
- iv. As a minimum, the following supporting documentation are required to be attached with each application:
 - Completed guarantee application form
 - Guarantee wording
 - Employer's Letter of Award
 - A copy of the Resolution of the Board
- v. Underwriters may require further supporting documentation, as applicable. Such shall be communicated upon receipt of the

B. APPLICANT/FACILITY HOLDER

Applicant/ Facility Holder		Company Reg. #	
Contractor		Company Reg. #	
Contact Person		VAT No.	
e-mail		Tel/Mobile	

C. GUARANTEE ISSUER

Please select one (1) of the following:

BOTSWANA INSURANCE LTD		BANK		FRONTING INSURER	
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D. PARTICULARS OF CONTRACT

				Employer/Beneficiary	
Name of Employer					
Contact Person					
Registered Address					
Tel/Mobile					
e-mail					
				Employer's Representative/Principal Agent/Consultant	
Name of Firm					
Contact Person					
Tel/Mobile					
e-mail					
				Contract Details	
Contract #		Contract Location			
Contract Description					
Form of Contract / Contract Conditions					
Contract Value (incl VAT)					

Contract Management Type (please specify)	EPCM		EPC / Turnkey		Main Contract		Sub Contract		Other	
Contract Start Date					Contract Completion Date					
Maintenance Start Date					Maintenance End Date					
%age of work to be subcontracted					Type of work to be subcontracted					
Expected Gross Profit					Expected Net Profit					
E. GUARANTEE DETAILS										
Please select one (1) of the following:										
Performance Guarantee		Retention Guarantee		Advanced Payment Guarantee		Bid Guarantee				
Other (please specify)										
%age of Contract					Guarantee Value					
Guarantee Start Date					Guarantee End Date					
Guarantee Expiry Date					Guarantee Duration					
Would maintenance be covered under this guarantee?										
State the date that guarantee is required										
Special instructions										
F. DECLARATION										
<p>I/We declare that to the best of my/our knowledge and belief, the information provided in this application is true in every respect, and shall form the basis of the agreement between me/us and Botswana Insurance Limited, should Botswana Insurance Limited agree to provide me/us with a guarantee facility and/or a guarantee(s) and act as surety.</p> <p>I/We agree, in consideration of the fact that Botswana Insurance Limited has consented to act as surety, to pay the premium in respect of each guarantee that Botswana Insurance Limited may provide me/us with, at inception date of such guarantee. Should a guarantee, following the lapse of one year from the inception date, still be required by the employer (beneficiary).</p> <p>I/we furthermore agree to pay Botswana Insurance Limited all renewal premiums for the subsequent years at renewal date, until I/we can provide satisfactory proof to Botswana Insurance Limited that the guarantee is no longer required.</p> <p>I/We authorise and consent Botswana Insurance Limited to obtain and verify any additional information on any aspect of this application with third parties (including but not limited to obtaining credit bureau reports), and we confirm that we have not concealed any material facts relevant to this application.</p> <p>I/We furthermore agree to hold Botswana Insurance Limited fully indemnified against any and all loss, costs and expenses which may arise by reason of Botswana Insurance Limited having entered into the guarantee(s) on my/our behalf.</p> <p>I/We agree to reimburse Botswana Insurance Limited for any costs, including valuation costs incurred in regard to guarantees provided or to be provided or pay their attorneys as directed, for any cost, including valuation costs, incurred in drafting the securities required to establish the facility or to amend the facility.</p>										
Signature										
Date										
Full Name & Surname of Signatory										
Designation										