



A D V I C E
matters

Broker Appointment

I / We hereby appoint Advice Matters as my / our servicing broker with regards to all my / our insurance requirements.

This authorisation is to supercede any previous broker appointments.

Kindly make available full copies of policies, premium details and claims experience that is required and ensure that all notices and documentation are henceforth sent direct to brian@advicematters.co.za or megan@advicematters.co.za

NAME OF CLIENT / COMPANY: _____

POLICY NUMBERS: _____

PHYSICAL ADDRESS:

_____ **CODE:** _____

POSTAL ADDRESS:

_____ **CODE:** _____

TELEPHONE AND CELLPHONENUMBER: _____

E-MAIL ADDRESS: _____

IDENTITY NUMBER: _____

SIGNATURE: _____

DATE: _____

CK 1997/043558/23 | Member: BM.Anderson • ML.Anderson | License No. 14060

147 Roberts Road, Pietermaritzburg, 3201 • PO Box 13478, Cascades, 3202
Tel 033 342 0330 • Cell 083 271 9300 Brian • Cell 083 637 9254 Megan
Email brian@advicematters.co.za • Email megan@advicematters.co.za • Website www.advicematters.co.za

