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CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC

SHEET REFERENCE NUMBER

REGISTRAR FINAL PRINT	OF LONG-TERM INSURANCE REFERENCE NUMBER OUT DATE		No number available 2008/07/16 09:42
48	Statement G15.2 CROSS BORDER OPERATIONS SADC SUBSI of ABC Limited as at the end of the financial period 31/01/20	경영을 이 눈물을 걸었는	
	on on an off-shore subsidiary company of the registered South African insurer conducting in	surance business in one or mo	pre
1.	Does the insurer have a subsidiary company in another SADC jurisdiction that conducts insurance	business?	
2.	State the total number of SADC subsidiaries		
3.	State whether the subsidiary(ies) is/are subject to regulatory supervision		
4.	Name of the subsidiary company:		
5.	Host jurisdiction where in operation:		
6.	Date when subsidiary was established/acquired:		
7.	Name of the applicable regulatory body in host jurisdiction:		,
8.	Address of subsidiary in host jurisdiction:		
	Description	R'000	7
9.	Total assets in respect of the branch Total liabilities in respect of the branch Total gross premium income in respect of the branch Total net premium income in respect of the branch Regulatory capital adequacy requirement (as per home jurisdiction) in respect of the branch Regulatory capital adequacy requirement (as per home jurisdiction) in respect of the branch		
10.	Broadly describe the branch's internal controls, including comprehensive and regular reporting between of the insurer's assessment of the overall effectiveness of these control systems.	veen the branch and its head off	ice and indicate the
11.	Describe the Board of the insurer's assessment of the overall financial position of the subsidiary.		
			3

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SHEET REFERENCE NUMBER

REGISTRAI FINAL PRIN	R OF LONG-TERM INSURANCE REFERENCE NUMBER ITOUT DATE	G15.2-99 No number availa
en e	Statement G15.2 CROSS BORDER OPERATIONS SADC SI of 'ABC' Limited, as at the end of the financial period 31/	
12.	Has the subsidiary been subject to regulatory inspection or investigation and if, please furnish) full details.
13.	State the scope of the activities of the subsidiary and its role within the insurance group.	
14.	Indicate whether the host jurisdiction requires that the subsidiary be subject to external audit an audit firm which is different to the audit firm of the insurer and, whether the audit work is suf	nd, where it is, whether the audit is undertaken by ficiently thorough.
	CHAIR	DIRECTOR
	PUBLIC OFFICER	DATE

AUDITORS (initial)

Page 94 of 107 1 T2008 - Published version CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC SHEET REFERENCE NUMBER REGISTRAR OF LONG-TERM INSURANCE REFERENCE NUMBER No number evailable FINAL PRINTOUT DATE 2008/07/16 09:42 Statement G15.3 CROSS BORDER OPERATIONS - SADC OTHER OPERATIONS of ABC Limited as at the end of the financial period 31/01/2008 Cross Border Operations other than branch business or business conducted in a subsidiary that is operated in the SADC region Has the insurer provided cross border insurance services to persons other than a SADC branch office or SADC subsidiary in one or more SADC jurusdictions? (if yes, please provide full detail in 2 below) Name of the SAD Ccountry Total assets in respectof the Total gross premium income Total net premium income of Total liabities in respect of business written of the business written the business written where person(s) is/are the business written R'000 R'000 R'000 R'000 located Has the business referred to in 2 above been placed directly with the insurer or was it sourced through independent intermediaries or through the insurer's own marketing force? (please give full details) Has the insurer provided cross border insurance services other than those provided through a branch office or subsidiary to insurers (i.e. inwards reinsurance business) in another SADC country? (if yes, please provide full detail in 5 below) Total assets in respectof the business written Total gross premium income Total net premium income of the business written the business written Name of the SAD Ccountry Total liabities in respect of where person(s) is/are the business written R'000 located R'000 R'000 R'000 6. Has the business referred to in 5 above been placed directly with the insurer or was it sourced through independent intermediaries or through the insurer's own marketing force? (please give full details)

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SHEET REFERENCE NUMBER
REGISTRAR OF LONG-TERM INSURANCE REFERENCE NUMBER

G15.3-99-A

그는 그 사람이 생생하는 사람들이 다음	CROSS BORDER OPE	Statement G15,3 RATIONS - SADC OTHER	MOCDATIONS	
		of ABC Limited		
	as at the end o	f the financial period 31/	01/2008	กลาย (1851) เมื่อสาขาบบริษัทสาขาสเทาได้
Has your company placed reins		-		2000 2000 June 1000 June 1
(if yes, please provide full detail	il in 8 below)	surer in another SADC countr	у	
Name of the SAD Country		Type of Reinsurance	T	T De:
where insurer(s) is/are	Name of the insurer/reinsurer	(Proportional or Non-	Premium Amount Ceded	Reinsurer's exposi amount
located	madicinicinadici	Proportional)	R'000	R'000
	·			
Has your company provided out	sourcing services to an insu	rer in another SADC country	7	
(if yes, please provide full detail	in 10 below)		•	
Name of the SADC country whe	ere insurer(s) is/are located	Give a descripti	on of the outsourcing service	s being provided
				•••••
	ř			
Has your company made use of	Outsoursing soniisse			
Has your company made use of n another SADC country?		ed by an insurer, a person or	any other entity located	
Has your company made use of n another SADC country? (If yes, please provide full detail i		ed by an insurer, a person or	any other entity located	
(if yes, please provide full detail i	in 12 below)			
TO WHO BREEF OF LOCK COUNTRY?	in 12 below) ere insurer(s), person or			at has been acquired
(if yes, please provide full detail i	in 12 below) ere insurer(s), person or		any other entity located f the outsourcing services tha	at has been acquired
(if yes, please provide full detail i	in 12 below) ere insurer(s), person or			it has been acquired
(if yes, please provide full detail i	in 12 below) ere insurer(s), person or			it has been acquired
(if yes, please provide full detail i	in 12 below) ere insurer(s), person or			it has been acquired
(if yes, please provide full detail i	in 12 below) ere insurer(s), person or			it has been acquired
Name of the SADC country when tity is/are to	in 12 below) ere insurer(s), person or ocated	Give a description of	f the outsourcing services tha	it has been acquired
Name of the SADC country when tity is/are kentity i	in 12 below) ere insurer(s), person or ocated ocated ore of the shares or any other person or entity least	Give a description of	f the outsourcing services tha	it has been acquired
if yes, please provide full detail in Name of the SADC country when tity is/are to	in 12 below) ere insurer(s), person or ocated ocated ore of the shares or any other person or entity least	Give a description of	f the outsourcing services tha	it has been acquired
Name of the SADC country when tity is/are known is sometimes or not 25% or may our company, is owned by a fat fayes, please provide full detail in the source of the sourc	in 12 below) ere insurer(s), person or ocated cocated cocated core of the shares or any other or or of the shares or any other or entity located in 14 below)	Give a description of description of the descriptio	f the outsourcing services that	it has been acquired
Name of the SADC country when tity is/are kentity i	in 12 below) ere insurer(s), person or ocated cocated cocated core of the shares or any other or or of the shares or any other or entity located in 14 below)	Give a description of a description of the descript	the outsourcing services that the outsourcing services that it is serviced the outsourcing services that it is serviced to the outsourcing service services that it is service	Name of SADC count
Name of the SADC country when the same of the sadd of	in 12 below) ere insurer(s), person or ocated ocated ore of the shares or any othoreign person or entity located in 14 below) ng 25% or more of the	Give a description of description of the descriptio	the outsourcing services that the outsourcing services that it is serviced the outsourcing services that it is serviced to the outsourcing service services that it is service	Name of SADC count
Name of the SADC country when the same of the sadd of	in 12 below) ere insurer(s), person or ocated ocated ore of the shares or any othoreign person or entity located in 14 below) ng 25% or more of the	Give a description of a description of the descript	the outsourcing services that the outsourcing services that it is serviced the outsourcing services that it is serviced to the outsourcing service services that it is service	Name of SADC count
Name of the SADC country when the same of the sadd of	in 12 below) ere insurer(s), person or ocated ocated ore of the shares or any othoreign person or entity located in 14 below) ng 25% or more of the	Give a description of a description of the descript	the outsourcing services that the outsourcing services that it is serviced the outsourcing services that it is serviced to the outsourcing service services that it is service	Name of SADC count where the person or enti
Name of the SADC country when the same of the sadd of	in 12 below) ere insurer(s), person or ocated ocated ore of the shares or any othoreign person or entity located in 14 below) ng 25% or more of the	Give a description of a description of the descript	the outsourcing services that the outsourcing services that it is serviced the outsourcing services that it is serviced to the outsourcing service services that it is service	Name of SADC count
Name of the SADC country when the same of the sadd of	in 12 below) ere insurer(s), person or ocated ocated ore of the shares or any othoreign person or entity located in 14 below) ng 25% or more of the	Give a description of a description of the descript	the outsourcing services that the outsourcing services that it is serviced the outsourcing services that it is serviced to the outsourcing service services that it is service	Name of SADC count
Name of the SADC country when the same of the sadd of	in 12 below) ere insurer(s), person or ocated ocated ore of the shares or any othoreign person or entity located in 14 below) ng 25% or more of the	Give a description of a description of the descript	the outsourcing services that the outsourcing services that it is serviced the outsourcing services that it is serviced to the outsourcing service services that it is service	Name of SADC count

15. Does your company directly or indirectly own more than 25% of the shares or any other interest in a foreign insurer located in another SADC country? (if yes, please provide full detail in 16 below)

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SHEET REFERENCE NUMBER
REGISTRAR OF LONG-TERM INSURANCE REFERENCE NUMBER FINAL PRINTOUT DATE Statement G15.3

Name of person o	r entity holdi	ng 25% or more of the	Name the person or entity	holding 25% or more of the	Name of SADC cou
Name		%	Name	%	where the person or e
1 Postor II and deliberation of the special party and the second					
					1
s your company part if yes, please provide	o to a joint ve	enture with an insurer loca 18 below)	ated in another SADC country?		
is your company party (if yes, please provide	r to a joint ve a full detail in	enture with an insurer loca 18 below)	ated in another SADC country?)	
s your company party if yes, please provide	y to a joint ve e full detail in	enture with an insurer loca 18 below)	ated in another SADC country?)	
s your company party (if yes, please provide	r to a joint ve	enture with an insurer loca 18 below) CHAIR		DIRECTOR	

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SHEET REFERENCE NUMBER
REGISTRAR OF LONG-TERM INSURANCE REFERENCE NUMBER

G15.4-99-A No number available

INAL PRI	TOUT DATE		2008/07/16 09
	Statement G15,4 CROSS BORDER OPERATIONS - NON-SADC of ABC Limited as at the end of the financial period 31/01/		
nforma	tion on off-shore branch business conducted by the registered insurer within one or more jur		
hat do	not form part of the SADC region	isdictions	
1.	Does the insurer have an off-shore branch in a country that does not form part		
	of the SADC region?	<u> </u>	
2.	State the total number of branches	F	
3.		L	
3,	State whether the branch(es) is/are subject to regulatory supervision		
4.	Name of branch:		
5.	Host jurisdiction where in operation:		· · · · · · · · · · · · · · · · · · ·
_	·		
6.	Date when branch was established:		
7.	Name of the applicable regulatory body in host jurisdiction:		
8.	Address of branch in host jurisdiction:		
	D.,		
9.	Description Total assets in respect of the branch	R'000	
	Total liabilities in respect of the branch		
	Total gross premium income in respect of the branch Total net premium income in respect of the branch		
	Regulatory capital adequacy requirement (as per home jurisdiction) in respect of the branch		
	Regulatory capital adequacy requirement (as per host jurisdiction) in respect of the branch		
10.			
10.	Broadly describe the branch's internal controls, including comprehensive and regular reporting bet and indicate the Board of the insurer's assessment of the overall effectiveness of these control sys	ween the branch and its head office	
	and the second of the second o	dent.	
11.	Describe the Board of the insurer's assessment of the overall financial position of the branch.		
			ĺ

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SHEET REF	FERENCE NUMBER	CONFIDENTIAL STATEMENT NOT AVAILABLE TO PUBLIC G15.4-99-A
REGISTRAF	R OF LONG-TERM INSURANCE REFERENCE NUMBER ITOUT DATE	No number available
FINAL PRIN	CROSS BORDER	Statement G15.4 OPERATIONS - NON-SADC BRANCH of ABC Limited - of the financial period 31/01/2008
12.	Has the branch been subject to regulatory inspection/investiga	tion and if, please furnish full details.
		74.
13.	State the scope of the activities of the branch and its role within	n the insurance group.
14.	Indicate whether the host jurisdiction requires that the branch b different to the audit firm of the insurer undertakes the audit and	ne subject to external audit. Please be specific whether or not an audit firm that is d also provide the name of that audit firm.
	CHAIR	DIRECTOR
	PUBLIC OFFICER	DATE
	AUDITORS (initial)	

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SHEET REFERENCE NUMBER
REGISTRAR OF LONG-TERM INSURANCE REFERENCE NUMBER
FINAL PRINTOUT DATE

G15.5-99-A No number available 2008/07/16 09:42

	Statement G15.5 CROSS BORDER OPERATIONS - NON-SADC SUBSISDIARY of 'ABC', Limited as at the end of the financial period 31/01/2008					
Information of	ation on an off-shore subsidiary company of the insurer conducting insurance business in o the SADC region	ne or more jurisdictions that do	not form			
1.	Does the insurer have a subsidiary company in a country other than in SADC jurisdiction that conducts insurance business?					
2.	State the total number of NON - SADC subsidiaries					
3.	State whether the subsidiary(ies) is/are subject to regulatory supervision					
4.	Name of the subsidiary company:					
5.	Host jurisdiction where in operation:					
6.	Date when subsidiary was established/acquired:					
7.	Name of the applicable regulatory body in host jurisdiction:					
8.	Address of subsidiary in host jurisdiction:					
	Description	R'000				
9.	Total assets in respect of the subsidiary's business Total liabilities in respect of the subsidiary's business Total gross premium income of the subsidiary Total net premium income of the subsidiary Regulatory capital adequacy requirement as per home jurisdiction Regulatory capital adequacy requirement as per nost jurisdiction					
10.	Broadly describe the subsidiary's internal controls, including comprehensive and regular reporting and indicate the Board of the insurer's assessment of the overall effectiveness of these control systems.	g between the subsidiary and hold stems.	ling company			
11.	Describe the Board of the insurer's assessment of the overall financial position of the subsidiary.					

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	TOUT DATE	No number available 2008/07/16 09:4
·	Statement G15.5 CROSS BORDER OPERATIONS - NON-SADC SUBSISDIARY of ABC Limited as at the end of the financial period 31/01/2008	
12.	Has the subsidiary been subject to regulatory inspection / investigation and if, please furnish full details.	
13.	State the scope of the activities of the subsidiary and its role within the insurance group.	
14.	Indicate whether the host jurisdiction requires that the subsidiary be subject to external audit and, where it is, whether the audit is undertaken by an audit firm which is different to the audit firm of the insurer and, whether the audit work is sufficiently thorough.	
	CHAID	
	CHAIR DIRECTOR	
	PUBLIC DATE OFFICER	

AUDITORS (initial)

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REGISTRAR OF LONG-TERM INSURANCE REFERENCE NUMBER FINAL PRINTOUT DATE

G15 6-99-A No number available 2008/07/16 09:42

atio	n on cross border operations other than	branch business or business of	conducted in a subsidiary in and	other country than a SADC cour	ntry	
Has the insurer provided cross border insurance services other than a non-SADC branch and non-SADC subsidiary to persons in another country than a SADC country? (if yes, please provide full detail in 2 below)						
	Name of the country where person(s) is/are located	Total liabities in respect of the business written R'000	Total assets in respect of the business written	Total gross premium income of the business written R'000	Total net premium income of the business written R'000	
11150	s the business referred to in 2 above been purer's own marketing force? pase give full details)	placed directly with the insurer or v	was it sourced through independe	nt intermediaries or through the	,	
Has	urer's own marketing force?	e services (other than those in no				
Has	sase give full details) sate insurer provided cross border insurance, inwards reinsurance business) in another of the country where insurer(s)	ce services (other than those in no country than a SADC country? Total liabities in respect of the		osidiary) to insurers Total gross premium income of the business	Total net premium income of the	
Has	sase give full details) s the insurer provided cross border insurance, inwards reinsurance business) in another cres, please provide full detail in 5 below) Name of the	ce services (other than those in no country than a SADC country? Total liabities in	n-SADC branch or non-SADC sut Total assets in respect	osidiary) to insurers		
Has	sase give full details) sate insurer provided cross border insurance, inwards reinsurance business) in another of the country where insurer(s)	ce services (other than those in no country than a SADC country? Total liabities in respect of the business written	n-SADC branch or non-SADC sub Total assets in respect of the business written	Total gross premium income of the business written	income of the business written	
Has	sase give full details) sate insurer provided cross border insurance, inwards reinsurance business) in another of the country where insurer(s)	ce services (other than those in no country than a SADC country? Total liabities in respect of the business written	n-SADC branch or non-SADC sub Total assets in respect of the business written	Total gross premium income of the business written	income of the business written	
Has	sase give full details) sate insurer provided cross border insurance, inwards reinsurance business) in another of the country where insurer(s)	ce services (other than those in no country than a SADC country? Total liabities in respect of the business written	n-SADC branch or non-SADC sub Total assets in respect of the business written	Total gross premium income of the business written	income of the business written	
Has	sase give full details) sate insurer provided cross border insurance, inwards reinsurance business) in another of the country where insurer(s)	ce services (other than those in no country than a SADC country? Total liabities in respect of the business written	n-SADC branch or non-SADC sub Total assets in respect of the business written	Total gross premium income of the business written	income of the business written	
Has	sase give full details) sate insurer provided cross border insurance, inwards reinsurance business) in another of the country where insurer(s)	ce services (other than those in no country than a SADC country? Total liabities in respect of the business written	n-SADC branch or non-SADC sub Total assets in respect of the business written	Total gross premium income of the business written	income of the business written	
Has (i.e. (if y	sase give full details) sate insurer provided cross border insurance, inwards reinsurance business) in another of the country where insurer(s)	ce services (other than those in no country than a SADC country? Total liabities in respect of the business written R'000	Total assets in respect of the business written	Total gross premium income of the business written R'000	income of the business written R'000	

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ET DEFEOR	ENCE NUMBER			CONFIDENTIAL STATEMEN	IT NOT AVAILABLE TO PUBL G15 6-8
	F LONG-TERM INSURANCE REFERENCE NUMBER				No number availa
L PRINTOL	JT DATE				2008/07/16 09
	CR	OSS BORDER OPERATION of A	ement G15.6 IS - NON-SADC OTHER OPE IBC Limited financial period 31/01/2008		A control of the cont
	s your company placed reinsurance busine yes, please provide full detail in 8 below)	ss with an insurer in another co	intry other than a SADC country?		
3.	Name of the country where insurer(s) is/are located	Name of the insurer/ reinsurer	Type of Reinsurance (Proportional or Non-Proportional)	Premium Amount Ceded R'000	Reinsurer's exposure amount R'000
	s your company provided outsourcing service /es, please provide full detail in 10 below)	s to an insurer in a country other	than a SADC country?		
0.	Name of the country insurer(s), person or entity i		G	ive a description of the outsour services being provided	cing
			 		
1. Has	s your company made use of outsourcing ser	sions annuided by an increase of		i	
cou	res, please provide full detail in 12 below)	vices provided by air misurer, a p	erson or any other entity located	in anomer	
2.	Name of the country insurer(s), person or entity i		G	ive a description of the outsour services being provided	cing
				· · · · · · · · · · · · · · · · · · ·	
L					
a fo	nfirm whether or not 25% or more of the shar streign person or entity located in another cour res, please provide full detail in 14 below)		ctly or indirectly in your company,	is owned by	, , , , , , , , , , , , , , , , , , , ,
ł	Name of person or entity holdir of the shares or any interest dire		of the shares or any in	ity holding 25% or more terest indire ctly in the urer	Name of country where the person entity is located
	Name	%	Name	%	
-		-			
					·
		1			

15. Does your company directly or indirectly own more than 25% of the shares or any other interest in a foreign insurer located in another country that is not a SADC country? (if yes, please provide full detail in 16 below)