

Completing and Signing the FAIS Documents

To conclude the finance application with VAPs loaded the following process is to be followed for FAIS compliance.

1

Depending on the product/contract selected, **certain checklists or questionnaires will be required by the system**. As with the policy documentation FAIS also **requires certain fields to be completed before** the document is signed. **See example of the Wizard document on the next page.**

The **FAIS Wizard document** can be **saved or signed** at this stage by selecting preferences at the **bottom right corner** of the document (see next page).



2

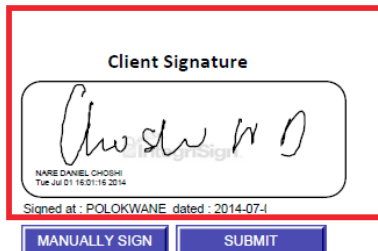
After the **wizard has been completed** the relevant document (Record of Advice) will be presented for signing:

I declare that I do not suffer from any pre-existing medical condition that would result in the repudiation of any claim I may make against the accepted policy

ALL DECLARATIONS MADE IN RESPECT OF MY STATE OF HEALTH ARE TRUE AND CORRECT. I UNDERSTAND THAT NON-DISCLOSURE OF ANY EXISTING MEDICAL CONDITIONS MAY RESULT IN THE LOSS OF MY BENEFITS

I have received a copy of this record of advice.

Name & Surname: NARE DANIEL CHOSHI



Example of the Wizard document on Page 2...

Agreement Signed At

This agreement was signed at:

Signio Fais Wizard

	RISK TO YOU, THE CUSTOMER	NOTES ON DISCUSSION WITH CUSTOMER	CLIENT FEEDBACK	PRODUCT OFFERED
CREDIT LIFE	THIS POLICY COVERS YOU IN THE EVENT THAT YOU ARE UNABLE TO MEET YOUR VEHICLE FINANCE OBLIGATIONS DUE TO UNFORESEEN MISFORTUNES SUCH AS DEATH, PERMANENT DISABILITY, TEMPORARY DISABILITY, RETRENCHMENT OR SPECIFIED DREADED DISEASES. DETAILS OF THE COVER YOU WILL RECEIVE WILL BE FOUND IN YOUR CREDIT LIFE SCHEDULE, SUBJECT TO THE POLICY TERMS AND CONDITIONS			<input type="checkbox"/> PRODUCT OFFERED
CREDIT SHORTFALL	THIS POLICY EXTENDS THE COVER UNDER A COMPREHENSIVE INSURANCE POLICY, AND ASSISTS IN THE EVENT OF THE UNINTENTIONAL VIOLATION OF CONDITIONS UNDER THE COMPREHENSIVE INSURANCE POLICY, THE SHORTFALL BETWEEN THE SETTLEMENT FIGURE OF YOUR FINANCE AGREEMENT AND THE AMOUNT PAID BY THE COMPREHENSIVE INSURER. AN ADDITIONAL DEPOSIT COVER RE-ASSURES A DEPOSIT FOR THE FINANCING OF A REPLACEMENT VEHICLE IN THE EVENT OF A TOTAL LOSS. DETAILS OF THE COVER YOU WILL RECEIVE WILL BE FOUND IN YOUR CREDIT SHORTFALL SCHEDULE, SUBJECT TO THE POLICY TERMS AND CONDITIONS			<input type="checkbox"/> PRODUCT OFFERED
MAINTENANCE / SERVICE PLAN	THIS POLICY COVERS YOU IN THE EVENT OF NOT HAVING FUNDS AVAILABLE FOR REPAIRS IN THE EVENT OF MECHANICAL FAILURE.			<input type="checkbox"/> PRODUCT OFFERED
WARRANTY	THE POLICY COVERS YOU IN THE EVENT OF AN UNFORESEEN BREAKDOWN OF THE MECHANICAL COMPONENTS OF THE VEHICLE. THE BENEFITS ARE DETERMINED AND LIMITED BY THE MILEAGE AND AGE OF THE VEHICLE. DETAILS OF THE COVER YOU WILL RECEIVE WILL BE FOUND IN YOUR WARRANTY SCHEDULE, SUBJECT TO THE POLICY TERMS AND CONDITIONS			<input type="checkbox"/> PRODUCT OFFERED
INFLATION PROTECTION POLICY	THE POLICY COVERS YOU IF THERE IS A SHORTFALL BETWEEN THE COST OF REPAIR AND THE UNDERLYING WARRANTY BENEFIT			<input type="checkbox"/> PRODUCT OFFERED
BODYLINE MAINTENANCE	THIS POLICY COVERS YOUR ASSET AGAINST MINOR CHIPS AND OR DENTS AND OR SCRATCHES CAUSED BY DAY TO DAY MOTORING			<input type="checkbox"/> PRODUCT OFFERED
PAINT & GLASS PROTECTION	THIS CATEGORY HAS VARIOUS PRODUCTS AVAILABLE THAT CAN BE BENEFICIAL TO YOU AS CUSTOMER			<input type="checkbox"/> PRODUCT OFFERED
ROADCOVER PROTECTION	ROADCOVER EXISTS TO PROVIDE YOU WITH A SEAMLESS CLAIMING PROCESS SHOULD YOU FIND YOURSELF IN A POSITION WHEREBY YOU NEED TO CLAIM FROM THE RAF			<input type="checkbox"/> PRODUCT OFFERED
TYRE AND RIM WARRANTY	THE POLICY COVERS YOUR TYRES AND RIMS AGAINST ACCIDENTAL DAMAGE			<input type="checkbox"/> PRODUCT OFFERED
VEHICLE TRACKER	A TRACKING UNIT CAN BE FITTED TO YOUR VEHICLE. VARIOUS OPTIONS ARE AVAILABLE			<input type="checkbox"/> PRODUCT OFFERED
COMP INSURANCE	THE POLICY COVERS YOUR ASSET AGAINST THEFT, HIJACKING AND THE COST OF ACCIDENT REPAIRS. IT IS A CONDITION OF YOUR FINANCE AGREEMENT THAT THE ASSET MUST BE COMPREHENSIVELY INSURED AT ALL TIMES. DETAILS OF THE COVER YOU WILL RECEIVE WILL BE FOUND IN YOUR COMPREHENSIVE INSURANCE SCHEDULE, SUBJECT TO THE POLICY TERMS AND CONDITIONS			<input type="checkbox"/> PRODUCT OFFERED INSURER / BROKER NAME: <input type="text"/>
OTHER				<input type="checkbox"/> PRODUCT OFFERED PRODUCT NAME: <input type="text"/>

The client's knowledge regarding the financial products prior and post discussions:

Prior None Fair Good

Post None Fair Good

The client's objectives:

You would like to use the vehicle as a family vehicle

Vehicle will be used as the primary form of transport

Family members will use the vehicle

Vehicle will be used primarily by other members of your family

Vehicle will not be used by any other family member

The vehicle will not be used as the family or primary vehicle

The vehicle is a "toy" and is a secondary vehicle

The vehicle must be kept in the family if anything untoward happened to you

Instalment must be paid in the event of your retrenchment or unemployment

You wish to pay over as long a period as possible

You intend to pay off the loan in as short a period as possible

You would like to obtain credit with a balloon payment at the end

You intend to pay a large deposit

You would like to take credit with a nil or very low deposit

You intend to keep the vehicle for years years

You intend to travel approximately kilometers per year

You would like to keep the vehicle in showroom condition

You do not mind the vehicle getting minor scratches and dents over time as it is expected

You would not like to face unexpected high costs in the event of accident or repair

If you ever need help, contact us...