

# Insurance Regulations 1998

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# Insurance Regulations 1998

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## TABLE OF AMENDMENTS

Insurance Regulations 1998 (LN 152 of 1998) commenced on 1 January 1999, as amended by:

<b>Amending Legislation</b>	<b>Date of Commencement</b>
Insurance (Amendment) Regulations 2002 (LN 108 of 2002)	31 December 2002

[The next page is 403,421]

**[INS 10,005] Short title and commencement**

1 These Regulations may be cited as the Insurance Regulations 1998 and shall come into force on the day appointed for the commencement of the Act.

**[INS 10,010] Fees**

2 (1) The fees set out in column 3 of Schedule 1 are payable in respect of the matters respectively set out in column 2.

(2) All prescribed fees are VAT exclusive.

**[INS 10,015] Forms**

3 The forms referred to in Schedule 2 (or similar forms) are to be used in respect of the matters provided for by the section of the Act to which each form respectively relates.

**[INS 10,020] Prescribed deposit requirement for insurers**

4 For the purpose of section 20(1) of the Act, the deposit must be—

- (a) any Fiji Government Security; or
- (b) a deposit with a financial institution licensed under the Banking Act 1995.

**[INS 10,025] Prescribed deposit requirement for brokers**

5 For the purpose of section 20(2) of the Act, the deposit or guarantee must be—

- (a) any Fiji Government Security;
- (b) a deposit with a financial institution licensed under the Banking Act 1995; or
- (c) a bond or guarantee.

**[INS 10,030] Prescribed investments**

6 (1) For the purpose of section 37 of the Act, at least 20% of the net insurance fund assets of a life insurer must be invested in Fiji Government Securities and at least a further 10% of the net insurance fund assets invested in—

- (a) securities charged on the revenues of the Government;
- (b) loans or securities guaranteed fully as regards principal and interest by the Government;
- (c) loans to statutory bodies not guaranteed by the Government;
- (d) loans to local government authorities not guaranteed by the Government; or
- (e) loans to Home Finance Company Limited.

(2) Investment of assets of both life insurers and general insurers must be carried out with due regard to sufficient security, liquidity and income.

**[INS 10,035] Prescribed form and amount of professional indemnity and fidelity guarantee insurance required by brokers**

7 For the purpose of section 44(1) of the Act—

- (a) a policy must indemnify the broker against any breach of professional duty to an insured, against fraud and against any misconduct resulting in a breach of section 65 of the Act and must—
  - (i) be in the name of the broker;
  - (ii) state the sum insured;

- (iii) state the deductible or excess applicable under the policy;
  - (iv) state the period of cover;
  - (v) state the name of the insurer;
  - (vi) state that at least one reinstatement is provided and in the case of a group policy covering a number of intermediaries, multiple reinstatements are required;
  - (vii) clearly state what exclusions are applicable under the policy;
  - (viii) clearly state the activities covered under the policy;
  - (ix) include a non-avoidance of claims clause (such as where the broker failed to comply with a duty of disclosure or by misrepresentation); and
  - (x) state that any claim under the policy will be governed by the laws of Fiji;
- (b) the prescribed amount of cover for each policy must not be less than \$1,000,000, or 50% of gross premiums handled during the previous calendar year, whichever is the greater;
- (c) the maximum amount of cover required for each policy is \$2,500,000.

**[INS 10,040] Prescribed returns and reports to be disclosed by insurers**

- 8 For the purpose of section 56(1) of the Act, the prescribed returns or reports are—
- (a) the audit report provided pursuant to section 53(1) of the Act;
  - (b) Forms 6B and 6C for general insurers; and
  - (c) Forms 8A, 8B and 8C for life insurers.

**[INS 10,045] Prescribed returns and reports to be disclosed by brokers**

- 9 For the purpose of section 56(2) of the Act, the prescribed returns or reports are—
- (a) the audit report provided pursuant to section 53(1) of the Act; and
  - (b) Forms 12A and 12B.

**[INS 10,050] Prescribed classes for notification of expiration of insurance cover**

- 10 For the purpose of section 125(2) of the Act, other prescribed classes of insurance include compulsory third party insurance.

**[INS 10,055] Prescribed interest rate for settlement of life claims**

- 11 For the purpose of section 142(2) of the Act, the prescribed rate is a compounded amount equivalent to the commercial banks' average lending rate as determined by the Reserve Bank.

**[INS 10,060] Repeal**

- 12 The Insurance Regulations, 1979 is repealed.

[The next page is 403,621]



[INS 10,160]

SCHEDULE 1  
(Regulation 2)

FEES

	\$
1. Application fee for insurer's licence — section 24(3)	3,000
2. Replacement of insurer's licence fee — section 26(4)	100
3. Annual fee for insurer's licence — section 30(1)	3,000
4. Application fee for broker's licence — section 42(2)(a)	2,000
5. Application fee for corporate agent's licence — section 42(2)(a)	400
6. Application fee for individual agent's licence — section 42(2)(a)	200
7. Replacement of intermediary's licence fee — section 45(3)	50
8. Fee to inspect register — section 164(2)	5

403,621

Service 0

[INS 10,165]

SCHEDULE 2

Regulation 3

FORMS

[Sch 2 am LN 108 of 2002 reg 2, opn 31 Dec 2002]

<i>Form No.</i>	<i>Form Description</i>
1.	Offshore placement notice — section 17(4)
2.	Application for licensing as an insurer — section 24(3)
3.	Application for licensing as a broker — section 42(2)
4.	Application for licensing as an agent — section 42(2)
5.	Application for approval of appointed auditor — section 52(2)
6.	Annual returns for general insurers — section 60(1)
7.	Quarterly returns for general insurers — section 60(2)
8.	Annual returns for life insurers — section 60(1)
9.	Quarterly returns for life insurers — section 60(2)
10.	Preparation of actuarial abstracts — section 62(1)
11.	Preparation of statement of life insurance business — section 62(4)
12.	Annual returns for brokers — section 66(1)
13.	Quarterly returns for brokers — section 66(2)
14.	Statement of unclaimed moneys — section 144(1)
15.	Statement of moneys paid — section 144(3)
16.	Memorandum of transfer — section 147(3)(a)
17.	Appointment where nominee is a minor — section 152(2)

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Service 0

## INSURANCE ACT 1998

[INS 10,175]

## FORM 1

PLACEMENT OF INSURANCE BUSINESS WITH AN UNLICENSED OFFSHORE INSURER

CLIENT ACKNOWLEDGEMENT

INSURANCE ACT 1998

(Section 17(4))

ACKNOWLEDGEMENT BY AN INTENDING INSURED THAT AN INSURANCE CONTRACT IS TO BE ARRANGED OR EFFECTED WITH AN UNLICENSED OFFSHORE INSURER

*NOTICE TO THE INSURED*

Your insurance contract is to be arranged or effected wholly or partly with an unlicensed offshore insurer that is not licensed under the Insurance Act 1998 to conduct insurance business in Fiji. Such insurers are not subject to the provisions of the Insurance Act 1998 and are not supervised by the Reserve Bank of Fiji.

It is a matter for your consideration whether you should obtain further information from the insurance intermediary involved, on such matters as—

- (a) the name and postal address of the insurer;
- (b) country of incorporation of the insurer and whether that country has a scheme of financial supervision of insurers;
- (c) paid-up capital of the insurer and its financial position; and
- (d) which country's laws will determine disputes under the contract.

*ACKNOWLEDGEMENT*

I,.....(full name) of .....(address) have read the above notice and I acknowledge and understand that the insurance contract is to be arranged or effected wholly or partly with an unlicensed offshore insurer that is not licensed under the Insurance Act 1998 to conduct insurance business in Fiji and is not subject to the supervision of the Reserve Bank of Fiji.

..... Dated this .....day of .....in the year .....

(signature of insured)

.....  
(company stamp if insured is a body corporate)

**INSURANCE ACT 1998**

**[INS 10,180]**

**FORM 2**

## APPLICATION FOR LICENSING AS AN INSURER

- I. Name of applicant: .....
- II. Date of incorporation: .....
- III. Place of incorporation: .....
- IV. Whether public/private company or mutual association: .....
- V. (i) If incorporated in Fiji—
- (a) Address of registered office: .....
- (b) Street address of principal place of business (*if different to above*): .....
- (c) Address for service of notices (*section 158 of Insurance Act 1998*): .....
- (d) Postal address: .....
- (e) Telephone No: .....
- (f) Fax No: .....
- (ii) If not incorporated in Fiji—
- (a) Address of head office: .....
- (b) Street address of principal place of business in Fiji: .....
- (c) Address in Fiji for service of notices (*section 158 of Insurance Act 1998*). .....
- (d) Postal address in Fiji: .....
- (e) Telephone No in Fiji..... Head Office .....
- (f) Fax No in Fiji..... Head Office .....

**VI. Particulars regarding directors:**

<i>Full Name</i>	<i>Address</i>	<i>Qualifications/Experience</i> <i>(particularly in relation to insurance)</i>
------------------	----------------	--

[illegible]

<i>Full Name</i>	<i>Address</i>	<i>Qualifications/Experience</i> <i>(particularly in relation to insurance)</i>
.....		

VII. Particulars regarding principal officer (*section 18 of the Insurance Act 1998*)—

- (a) Full name:.....
- (b) Address:.....
- (c) Citizenship:.....
- (d) Qualifications/experience (*particularly in relation to insurance*):.....

## VIII. (i) Is any director, principal officer, general manager, secretary or other similar person of the applicant a director, principal officer, general manager, secretary or other similar person of any insurer or broker in Fiji, or elsewhere?:

Yes/No

If "yes" give details:.....

.....

.....

## (ii) Is any director, principal officer, general manager, secretary or other similar person of the applicant a disqualified person as described in section 23 of the Insurance Act 1998?:

Yes/No

If "yes" give details:.....

.....

.....

IX. State the class or classes of insurance business for which the applicant is seeking a licence in Fiji (e.g. all or certain (*specify*) classes of general insurance; all or certain (*specify*) classes of life insurance):.....

## X. Give particulars of business other than insurance business which the applicant carries on, or proposes to carry on, whether in Fiji or elsewhere:

## XI. (a) For an applicant which is a stock company, give details of capital:

*Authorised*:.....shares of \$ .....each, totalling \$ .....

*Paid Up*:..... shares of \$ .....each, totalling \$ .....

Allocation of paid up shares: \$ .....\$ .....

\*Local

\*\*Foreign

## (b) Provide the following details in respect of any person who holds 10% or more of the paid up shares of the applicant:

<i>Name</i>	<i>Citizenship or Place of incorporation</i>	<i>Percentage of paid up shares held</i>	<i>Value of shares</i> \$
.....			

Name	Citizenship or Place of incorporation	Percentage of paid up shares held	Value of shares \$
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

\*"Local" means:

- (a) in the case of an individual, a person who is a citizen of Fiji;
- (b) in the case of a company, a company which is incorporated in Fiji and has its voting power controlled by shareholders who are citizens of Fiji or is otherwise howsoever controlled by shareholders who are citizens of Fiji;

\*\*\*"Foreign" means a person or company who is not local in the sense defined above.

XII. Give details (*name, address, business*) of any person related to the applicant ('related' is defined in section 2(3) of the Insurance Act 1998):

.....

XIII. Is the deposit that is required under section 20 of the Insurance Act 1998 lodged with this application? (*Note: the deposit must be lodged with the Reserve Bank before a licence can be granted*):

Yes/No

If "yes", give particulars of deposit (*type of security, amount, term, maturity date etc*):

.....

XIV. If applicant is not incorporated in Fiji:

(a) Does applicant carry on any insurance business outside Fiji? Yes/No

(b) If the answer to (a) is "yes":

(i) In which places?.....

(ii) Does the applicant in all respects comply with the laws of that/those place/places relating to the carrying on of that business? (*if "no", attach details*)

Yes/No

(iii) Did the applicant in all respects comply with the law of that/those place/places relating to the carrying on of insurance business during the preceding 5 years? (*if "no", attach details*)

Yes/No

XV. Name of bank in Fiji which is designated to be the applicant's principal bank:

.....

XVI. For an application to carry on life insurance business, set out the name, address, qualification(s) and actuarial experience of an actuary who is proposed for the purposes of section 61 of the Insurance Act 1998:

.....

XVII. Particulars of proposed senior staff in Fiji, in particular those responsible for the following functions:

	Name	Qualifications	Experience	Citizenship
Accounting .....				
Claims .....				
Underwriting .....				
Agents .....				
(Provide similar details for any other senior staff)				

XVIII. What operations will be handled locally? Give details:

.....

.....

.....

XIX. What operations will be handled overseas? Give details, including approximate annual cost, and reasons why these cannot be handled locally. Identify what steps, if any, are being or will be taken to ensure that these operations are handled locally and when:

.....

.....

.....

XX. Attach a summary of reinsurance arrangements, including the following particulars for each class of business—

- (a) Net retention in respect of any one risk, or M.P.L. in respect of any one risk if business is written on that basis;
- (b) Net retention in respect of any one event;
- (c) Details of all reinsurance treaties including—
  - (i) in respect of each quota share treaty, the pool limit, the percentage of limit reinsured, commission rate and the reinsurers and extent of their respective participation;
  - (ii) in respect of each surplus treaty, the retention limit, the maximum number of lines of the treaty, commission rate and the reinsurers and the extent of their respective participation;
  - (iii) in respect of each excess of loss treaty, show deductible or attachment point of cover, the level of cover, the premium rate, commission rate (if any) and the reinsurers and the extent of their respective participation.

Note: the above summary is to be supported by copies of cover notes and/or placing slips as soon as they become available.

#### DECLARATION

I hereby declare that the above statements and details are correct and accept that any statement or detail found to be incorrect may result in prosecution under the Insurance Act 1998. I also declare that any alterations in particulars stated herein and in attachments submitted will be forthwith communicated to the Reserve Bank of Fiji in writing.

Signed on this.....day of....., .....

.....  
Director.....  
Director.....  
Principal Officer

XXI. Every application must be accompanied by—

- (a) a copy of the Memorandum of Association or other instrument or document by which the applicant is constituted;
- (b) a copy of the Articles of Association or other rules of the applicant;
- (c) a copy of the certificate of incorporation of the applicant or a copy of the certificate of registration of the applicant as a foreign company, whichever is applicable;
- (d) a copy of the last 2 audited accounts and statements (including profit and loss account, appropriation accounts and balance sheet) of the applicant, if applicable. Where the applicant is related to another person pursuant to section 2(3) of the Insurance Act 1998, the last 2 audited accounts of the related person must be lodged with the application;
- (e) statement in accordance with Form 6C for general insurers or Form 8C for life insurers, made at any date not more than 3 months before the date of the application;
- (f) particulars, as specified in Form 5, in respect of the person who is to be, or has been appointed by the applicant to act as its auditor for the purpose of Part 5 of the Insurance Act 1998;
- (g) details of the applicant's accounting and reporting systems;
- (h) a copy of the applicant's current and proposed corporate structure and organisational chart; and
- (i) the prescribed fee.

XXII. Every application for a licence to carry on life insurance business must be accompanied by a feasibility study which must include projections prepared by an actuary of expected results and financial position covering at least 5 years of operation in Fiji containing summaries of revenue accounts, actuarial liabilities and balance sheets made upon 2 bases viz—

- (a) assuming that a conservative amount of new sums insured is written each year; and
- (b) assuming that a reasonably rapid expansion of business occurs, together with—
  - (i) a statement of all assumptions adopted;
  - (ii) a copy of the market survey report or other evidence upon which the amounts of new business assumed in subparagraphs (a) and (b) of paragraph XXII are based;
  - (iii) a certificate signed by an actuary that projections have been prepared after examination of the aims of the insurer and the types of policy to be adopted and are suitable for inclusion by the insurer in the information supporting the application for licensing; and
  - (iv) a statement as to the manner in which any deficiencies shown in the projections will be financed.

XXIII. Every application for a licence to carry on any class of insurance business other than life insurance business must be accompanied by a feasibility study which must include a statement of expected results for the next 3 years in the light of all the relevant circumstances and the evidence, such as a market survey report, on which such statement is based.



[The next page is 403,841]

## INSURANCE ACT 1998

[INS 10,185]

## FORM 3

## APPLICATION FOR LICENSING AS A BROKER

NEW APPLICATION ☐RENEWAL APPLICATION ☐

(Tick as applicable)

- I. Name of applicant: .....
- II. Date of incorporation (*applicable only to a corporate broker*): .....
- III. Place of incorporation (*applicable only to a corporate broker*): .....
- IV. Address of registered office: .....
- V. Street address of principal place of business (*if different to above*): .....
- VI. Address for service of notices (*section 158 of Insurance Act 1998*): .....
- VII. Postal address: .....
- VIII. Telephone No: ..... Fax No: .....
- IX. Particulars regarding directors (*applicable only to a corporate broker*)—  

Full Name	Address	Qualifications / Experience ( <i>particularly in relation to insurance</i> )
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
- X. Particulars regarding principal officer (*section 18 of the Insurance Act 1998*)—  
 (a) Full name: .....  
 (b) Address: .....  
 (c) Citizenship: .....  
 (d) Qualifications/experience (*particularly in relation to insurance*): .....
- XI. (i) Is any director, principal officer, general manager, secretary or other similar person of the applicant a director, principal officer, general manager, secretary or other similar person of any insurer or broker in Fiji, or elsewhere?  
 Yes/No  
 If "yes" give details: .....
- (ii) Does any director, principal officer, general manager, secretary or other similar person of the applicant fall within the definition of a disqualified person as described in section 23 of the Insurance Act 1998?  
 Yes/No  
 If "yes" give details: .....

XII. State the class or classes of insurance business for which the applicant is seeking a licence in Fiji (eg all or certain (*specify*) classes of general insurance; all or certain (*specify*) classes of life insurance):

XIII. Give particulars of business other than insurance business which the applicant carries on, or proposes to carry on, whether in Fiji or elsewhere:

XIV. (a) For an applicant which is a stock company, give details of capital:

*Authorised*:..... Shares of \$ ..... each, totalling \$ .....

*Paid Up*:..... Shares of \$ ..... each, totalling \$ .....

Allocation of paid up shares: \$ ..... \$ .....

\*Local \*\*Foreign

(b) Provide the following details in respect of any person who holds 10% or more of the paid up shares of the applicant:

Name	Citizenship or place of incorporation	Percentage of paid up shares held	Value of shares \$
------	---------------------------------------	-----------------------------------	--------------------

.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

\*"Local" means:

- (a) in the case of an individual, a person who is a citizen of Fiji;
- (b) in the case of a company, a company which is incorporated in Fiji and has its voting power controlled by shareholders who are citizens of Fiji or is otherwise howsoever controlled by shareholders who are citizens of Fiji;

\*\*"Foreign" means a person or company who is not local in the sense defined above.

XV. Is the deposit that is required under section 20 of the Insurance Act 1998 lodged with this application? (*Note: the deposit must be lodged with the Reserve Bank before a licence can be granted or renewed*):

Yes/No

If "yes" give particulars of deposit (*type of security, amount, term, maturity date etc*).

XVI. Give details (name of insurer, amount of cover provided and amount of deductible/excess applicable) of the applicant's professional indemnity policy of insurance and fidelity guarantee policy of insurance:

#### DECLARATION

I hereby declare that the above statements and details are correct and accept that any statement or detail found to be incorrect may result in prosecution under the Insurance Act 1998. I also declare that any alterations in particulars stated herein and in attachments submitted will be forthwith communicated to the Reserve Bank of Fiji in writing.

Signed on this.....day of....., .....

.....  
Director/Proprietor.....  
Director/Proprietor.....  
Principal Officer

## XVII. Every new application must be accompanied by—

- (a) a copy of the Memorandum of Association or other instrument or document by which the applicant is constituted (*applicable only to a corporate broker*);
- (b) a copy of the Articles of Association or other rules of the applicant (*applicable only to a corporate broker*);
- (c) a copy of the certificate of incorporation of the applicant or a copy of the certificate of registration of the applicant as a foreign company, whichever is applicable (*applicable only to a corporate broker*);
- (d) a copy of the last 2 audited accounts and statements (including profit and loss account, appropriation accounts and balance sheet) of the applicant, if applicable. Where the applicant is related to another person pursuant to section 2(3) of the Insurance Act 1998, the last 2 audited accounts of the related person must be lodged with the application (*applicable only to a corporate broker*);
- (e) statement in accordance with Form 12B made at any date not more than 3 months before the date of the application;
- (f) particulars, as specified in Form 5, in respect of the person who is to be, or has been appointed by the applicant to act as its auditor for the purpose of Part 5 of the Insurance Act 1998;
- (g) a feasibility study which must include a statement of expected results for the next 3 years in the light of all the relevant circumstances and the evidence, such as a market survey report, on which such statement is based;
- (h) details of the applicant's accounting and reporting systems;
- (i) a copy of the applicant's current or proposed corporate structure and organisational chart; and
- (j) the prescribed fee.

## XVIII. Every renewal application must be accompanied by—

- (a) particulars, as specified in Form 5, in respect of the person who is to be, or has been appointed by the applicant to act as its auditor for the purpose of Part 5 of the Insurance Act 1998;
- (b) budget projections for the following calendar year; and
- (c) the prescribed fee.

## INSURANCE ACT 1998

[INS 10,190]

## FORM 4

## APPLICATION FOR LICENSING AS AN AGENT

NEW APPLICATION ☐RENEWAL APPLICATION ☐

(Tick as applicable)

- I. Name of applicant: .....
- II. Licence No (*applicable only to licence renewals*): .....
- III. Date of incorporation (*applicable only to a corporate agent*): .....
- IV. Place of incorporation (*applicable only to a corporate agent*): .....
- V. Address for service of notices (*section 158 of Insurance Act 1998*): .....
- VI. Postal address: .....
- VII. Telephone No: ..... Fax No: .....
- VIII. Details of applicant's employment history, qualifications and experience (*particularly in relation to insurance*): .....
- IX. Has the applicant (*in the case of an application for a corporate agent any director, general manager, secretary or other similar person*) been convicted of an offence in respect of conduct relating to insurance or dishonest conduct or at any time been declared bankrupt?
- Yes/No
- If "yes" give details: .....
- X. State the class or classes of insurance business for which the applicant is seeking a licence in Fiji and the name of the insurer for each class or classes of insurance business the applicant will be acting for:
- | Name of insurer | Class(es) of business |
|-----------------|-----------------------|
| .....           | .....                 |
| .....           | .....                 |
| .....           | .....                 |
- XI. As accounted for in the policies register, provide details of the premiums paid or payable on policies obtained as an agent during the 12 months ending 30 September (*applicable only to licence renewals*):
- Life insurance \$ ..... General insurance \$ .....
- XII. As accounted for in the policies register, provide details of the number of policies obtained as an agent during the 12 months ending 30 September (*applicable only to licence renewals*):
- Life insurance ..... General insurance .....
- XIII. Provide details of commissions received as an agent from each nominated insurer during the 12 months ending 30 September (*applicable only to licence renewals*):

Life insurance \$ ..... General insurance \$ .....

XIV. If any details have changed since your last licence application, provide details here:

## AGENT DECLARATION

I hereby declare that the above statements and details are correct and I understand and accept that any statement or detail found to be incorrect may result in the rejection of my application/immediate cancellation or revocation of my licence and/or prosecution under the Insurance Act 1998.

Signed on this ..... day of ....., .....

Agent's signature

## NOMINATED INSURER(S) DECLARATION

We hereby certify that we are satisfied that ..... remains, by reason of reputation and/or personal qualities, skill, knowledge, financial standing and otherwise, a fit and proper person to be an insurance agent of our company.

1. ....  
Company name Name of principal officer

Signature of principal officer

Class(es) of business

Signed on this ..... day of ....., .....

2. ....  
Company name Name of principal officer

Signature of principal officer

Class(es) of business

Signed on this ..... day of ....., .....

3. ....  
Company name Name of principal officer

.....  
Signature of principal officer

.....  
Class(es) of business

Signed on this .....day of ....., .....

XV. Every new and renewal application must be accompanied by:

- (a) the prescribed fee; and
- (b) where applicant is an individual, 2 passport sized photos.

[The next page is 403,861]

## INSURANCE ACT 1998

[INS 10,195]

## FORM 5

## APPLICATION FOR APPROVAL OF APPOINTED AUDITOR

- I. Name of auditor: .....
- II. Street address of principal place of business: .....
- III. Postal address: .....
- IV. Firm auditor is employed by: .....
- V. Telephone No: ..... Fax No: .....
- VI. Is the auditor a director, principal officer, manager, employee of, related to, or agent of any insurer or broker in Fiji, or elsewhere?:  
Yes/No
- If "yes" give details: .....
- .....
- .....
- VII. Does the auditor hold a current certificate of practice issued by the Fiji Institute of Accountants? .....
- Yes/No
- VIII. Provide details of auditor's qualifications and experience (*particularly in relation to insurance*):  
.....
- .....
- .....
- IX. Provide details of the reasons for any change in auditor (*applicable only to an application for a replacement auditor*):  
.....
- .....
- .....

## DECLARATION

I hereby declare that the above statements and details are correct and I understand and accept that any statement or detail found to be incorrect may result in prosecution under the Insurance Act 1998.

Signed this.....day of....., .....

.....  
Name of principal officer

.....  
principal officer's signature



## INSURANCE ACT 1998

[INS 10,200]

## FORM 6A

## UNDERWRITING ACCOUNT

NAME OF INSURER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
<b>PART A — PREMIUMS</b>				
Gross premium income [6D. row 4]	1			
less				
Reinsurance outwards [6D. row 13]	2			
NET PREMIUM INCOME [1-2]	3			
add				
Retained unearned premiums — opening [6D. row 15]	4			
less				
Retained unearned premiums — closing [6D. row 16]	5			
NET EARNED PREMIUMS [3+4-5]	6			
<b>PART B — CLAIMS</b>				
Net claims paid [6E. row 8]	7			
add				
Net claims outstanding — closing [6E. row 9]	8			
less				
Net claims outstanding — opening [6E. row 10]	9			
NET CLAIMS INCURRED [7+8-9]	10			
<b>PART C — UNDERWRITING EXPENSES</b>				
Commission expense [6E. row 12+13]	11			
Acquisition expense [6E. row 14]	12			
TOTAL EXPENSES [6G. row 28] [sum 11:12]	13			
UNDERWRITING SURPLUS (DEFICIT) [6-10-13]	14			

Signature .....  
(Principal Officer)

Signature .....  
(Auditor)

Date ...../...../.....

Date ...../...../.....

## INSURANCE ACT 1998

[INS 10,205]

## FORM 6B

## PROFIT AND LOSS STATEMENT

NAME OF INSURER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
<b>PART A — PROFIT AND LOSS ACCOUNT</b>				
Non-underwriting income				
- Interest	1	_____	_____	_____
- Rent	2	_____	_____	_____
- Dividends	3	_____	_____	_____
- Gain (loss) on sale of assets	4	_____	_____	_____
- Other non-underwriting income	5	_____	_____	_____
Total non-underwriting income [sum 1.5]	6	_____	_____	_____
Underwriting surplus (deficit) [6A. row 14]	7	_____	_____	_____
Expenses not included in Return GI [6G. row 29]	8	_____	_____	_____
Abnormal / extraordinary items (attach details)	9	_____	_____	_____
PRE-TAX PROFIT (LOSS) [sum 6 9]	10	_____	_____	_____
Taxation expense	11	_____	_____	_____
<b>PROFIT (LOSS) AFTER TAXATION</b> [10-11]	12	_____	_____	_____
<b>PART B — APPROPRIATION ACCOUNT</b>				
Unappropriated profit (loss) brought forward from last period [row 21. last yr]	13			_____
add				
Profit (loss) after taxation for the current period [from row 12]	14			_____
Other transfers in (attach details)	15			_____
AMOUNT AVAILABLE FOR APPROPRIATION [sum 13:15]	16			_____
less				
Dividends for the period (paid or proposed)	17			_____
Transfers to head office	18			_____
Transfers to reserves	19			_____
Other appropriations (attach details)	20			_____
<b>UNAPPROPRIATED PROFIT (LOSS) CARRIED FORWARD</b> [16. (sum 17:20)]	21			_____

403,864

Signature .....  
(Principal Officer)

Signature .....  
(Auditor)

Date ...../ ...../ .....

Date ...../ ...../ .....

## INSURANCE ACT 1998

[INS 10,210]

## FORM 6C

## BALANCE SHEET

NAME OF INSURER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

PARTICULARS	Row No.	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
<b>ASSETS</b>				
Cash on hand	1			
Outstanding premiums:				
- 3 months and under	2			
- over 3 months but 6 months and under	3			
- over 6 months	4			
Amounts due from reinsurers on outstanding claims	5			
Amounts due from reinsurers on claims paid:				
- 3 months and under	6			
- over 3 months but 6 months and under	7			
- over 6 months	8			
Deferred reinsurance expense	9			
Deferred acquisition expense	10			
Prepayments:				
- related persons	11			
- non related persons	12			
Sundry debtors:				
- related persons	13			
- non related persons	14			
Other (attach details)	15			
<u>Sub-total</u> (sum 1.15)	16			
<b>LOANS * (attach supporting schedules)</b>				
Loans to directors and other persons prescribed in section 32(1)(a):				
- secured	17			
- unsecured	18			
Loans to related persons:				
- secured	19			
- unsecured	20			
Unsecured employee loans	21			

PARTICULARS	Row No.	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
Other loans:				
- secured	22			
- unsecured	23			
Other (attach details)	24			
<b>Sub-total (loans)</b> (sum 17:24)	25			
<b>INVESTMENTS* (attach supporting schedules)</b>				
Land and buildings	26			
Government securities	27			
Bank deposits	28			
Debentures with:				
- related persons	29			
- non related persons	30			
Shares in:				
- related persons	31			
- non related persons	32			
Other (attach details)	33			
<b>Sub-total (investments)</b> (sum 26:33)	34			
<b>FIXED ASSETS</b>				
Motor vehicles	35			
Furniture and fittings	36			
Computer hardware	37			
Computer software	38			
Other (attach details)	39			
<b>Sub-total (fixed assets)</b> (sum 35:39)	40			
<b>INTANGIBLE ASSETS</b>				
Future income tax benefit	41			
Goodwill	42			
Establishment costs	43			
Other (attach details)	44			
<b>Sub-total (intangible assets)</b> (sum 41:44)	45			
<b>OTHER ASSETS</b>				
Other amounts due:				
- related persons	46			
- non related persons	47			
Other (attach details)	48			
<b>Sub-total (other assets)</b> (sum 46:48)	49			

403,867

Service 0

PARTICULARS	Row No.	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
<b>TOTAL ASSETS</b> [sum 16+25+34+40+45+49]	50			
<b>LIABILITIES</b>				
<b>UNDERWRITING PROVISIONS</b>				
Unearned premium provision	51			
Outstanding claims provision:				
- reported claims	52			
- IBNR claims	53			
CAE provision	54			
Other [attach details]	55			
<b>Sub-total (U/W provisions)</b> [sum 51:55]	56			
<b>OTHER PROVISIONS</b>				
Taxation	57			
Dividends	58			
Stamp duty	59			
Fire service levy	60			
Employee entitlements	61			
Doubtful debts	62			
Other (attach details)	63			
<b>Sub-total (provisions)</b> [sum 57:63]	64			
<b>BORROWINGS</b>				
Borrowing from related persons	65			
Other borrowings	66			
<b>Sub-total (provisions)</b> [sum 65:66]	67			
<b>OTHER LIABILITIES</b>				
Amounts due:				
- to insurers	68			
- to reinsurers	69			
- to related persons	70			
- to agents and brokers	71			
Sundry creditors	72			
Other (attach details)	73			
<b>Sub-total (other liabilities)</b> [sum 68:73]	74			
<b>TOTAL LIABILITIES</b> [sum 56+64+67+74]	75			
<b>NET ASSETS</b> [50-75]	76			
<b>CONTINGENT LIABILITIES</b>	77			

403,868

PARTICULARS	Row No.	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
<b>OWNERS' FUNDS</b>				
Authorised capital	78	_____	_____	_____
Paid-up capital	79	_____	_____	_____
Retained profits (loss)	80	_____	_____	_____
Balance of head office account	81	_____	_____	_____
Asset revaluation reserve	82	_____	_____	_____
General reserve	83	_____	_____	_____
Other [attach details]	84	_____	_____	_____
<b>TOTAL OWNERS' FUNDS</b> [sum 78:84]	85	_____	_____	_____

Signature ..... Signature .....  
 (Principal Officer) (Auditor)

Date ...../ ...../ .....

Date ...../ ...../ .....

403,869

Service 0



[The next page is 403,881]

Service 0

403,870

## INSURANCE ACT 1998

## FORM 6D

## STATEMENT OF PREMIUMS

[INS 10,215]

NAME OF INSURER: \_\_\_\_\_ INSIDE FIJI/OUTSIDE FIJI (delete as applicable)

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

PARTICULARS	Row No	FIRE	HOUSE HOLDERS	MOTOR VEHICLE	MARINE HULL	MARINE CARGO	CTY & BURGLARY	MOTOR CTP	PERSONAL ACCIDENT	PROF INDEMNITY	PUBLIC LIABILITY	WORKERS COMP	MEDICAL	TERM LIFE	OTHER	TOTAL
Total premiums received (including unloaded business and third party collection) less returned premiums:	1	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
- Direct business	2															
- Inwards reinsurance business	3															
Less Third party collections																
GROSS PREMIUM																
INCOME	4															
Trusty reinsurance onwards:																
(a) Local	5															
(b) Overseas Proportional	6															
(c) Overseas Non-Proportional	7															
Sub-total (totaly)	8															
Facultative reinsurance onwards:																
(a) Local	9															
(b) Overseas Proportional	10															
(c) Overseas Non-Proportional	11															

403,881

Service 0

PARTICULARS	Row No	FIRE	HOUSE HOLDERS	MOTOR VEHICLE	MARINE HULL	MARINE CARGO	CTT & BURGLARY	MOTOR CTP	PERSONAL AUTOMOBILE	PROP INDUSTRY	PUBLIC LIABILITY	WORKERS COMP	MEDICAL	TERM LIFE	OTHER	TOTAL
Sub-total (tentative)	12	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
<b>TOTAL REINSURANCE</b>	13															
<b>NET PREMIUM INCOME</b>	14															
Retained Unearned Premium Provision:																
- UPP at beginning of year	15															
- UPP at end of year	16															
<b>NET EARNED PREMIUMS</b>	17															
No individual policies issued / renewed	18															
No group policies issued / renewed	19															
No person covered by group policies	20															

Service 0

403,882

Signature ..... (Principal Officer)      Signature ..... (Auditor)

Date ...../...../.....      Date ...../...../.....

## INSURANCE ACT 1998

## FORM 6E

## STATEMENT OF CLAIMS AND COMMISSIONS

[INS 10,220]

NAME OF INSURER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

INSIDE FIJI  
OUTSIDE FIJI  
(delete as applicable)

Row No	PARTICULARS	FIRE	HOUSE HOLDERS	MOTOR VEHICLE	MARINE HULL	MARINE CARGO	CT & BURGLARY	MOTOR CTP	PERSONAL ACCIDENT	POST INDEMNITY	PUBLIC LIABILITY	WORKERS COMP	MEDICAL	TERM LIFE	OTHER	TOTAL
1	PART A — CLAIMS															
2	GROSS CLAIMS PAID															
3	- Direct business															
	- Inwards reinsurance business															
	Sub-total [sum 1:2]															
4	REINSURANCE RECOVERIES															
5	- Local reinsurers															
6	- Overseas proportional															
7	- Overseas non-proportional															
	Sub-total [sum 4:6]															
8	NET CLAIMS PAID [sum 3-7]															
9	Net claims outstanding — closing															
10	Net claims outstanding — opening															
11	NET CLAIMS INCURRED [sum 8+9-10]															

403,883

Service 0

PARTICULARS	Row No	FIRE	HOUSEHOLDERS	MOTOR VEHICLE	MARINE HULL	MARINE CARGO	ST & BURGLARY	MOTOR CTP	PERSONAL ACCIDENT	HEAVY INDEMNITY	PUBLIC LIABILITY	WORKERS COMP	MEDICAL	TERM LIFE	OTHER	TOTAL
		\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
<b>PART B -- UNDERWRITING EXPENSES</b>																
Commission expense	12															
- brokers	13															
- agents	14															
Acquisition expense	15															
UNDERWRITING EXP. [sum 12:14]																
<b>PART C -- UNDERWRITING RESULT</b> [(6) r 17 - 6E r 11 - 6E r 15]	16															
<b>PART D -- UNDERWRITING RATIOS</b>																
Loss ratio [(6E r 11/6D) x 177*100]	17	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%
Expense ratio [(6E r 15/6D) x 177*100]	18	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%
Combined ratio [sum 17:18]	19															

Service 0

403,884

Signature ..... Date ..... Signature ..... Date .....  
 (Principal Officer) (Auditor)

## INSURANCE ACT 1998

## FORM 6F

[INS 10,230]

## STATEMENT OF CLAIMS RUN-OFF BY ACCIDENT YEAR

NAME OF INSURER: _____		YEAR ENDING: 31 DECEMBER _____		INSIDE/OUTSIDE FIJI (delete as applicable)													
Row No	PARTICULARS BY VALUES \$ or No value as appropriate	FIRE \$	HOUSE HOLDERS \$	MOTOR VEHICLE \$	MARINE HULL \$	MARINE CARGO \$	CT & BURGLARY \$	MOTOR CTP \$	PERSONAL ACCIDENT \$	PROP INDEMNITY \$	PUBLIC LIABILITY \$	WORKERS COMP \$	MEDICAL \$	TERM LIFE \$	OTHER \$	TOTAL \$	
1	No of claims reported this financial year where the event giving rise to the claim occurred:																
2	(a) this year																
3	(b) in the year prior to (a)																
4	(c) in the year two years prior to (a)																
5	(d) in any year earlier than (c)																
6	TOTAL NO OF CLAIMS REPORTED [sum 1+4]																
7	Gross claim payments this financial year where the event giving rise to the claim occurred (\$):																
8	(a) this year																
9	(b) in the year prior to (a)																
10	(c) in the year two years prior to (a)																
11	(d) in any year earlier than (c)																
12	TOTAL GROSS CLAIMS PAYMENT [sum 6+9]																
13	No of claims outstanding at end of financial year where the event giving rise to the claim occurred:																
14	(a) this year																
15	(b) in the year prior to (a)																
16	(c) in the year two years prior to (a)																
17	(d) in any year earlier than (c)																
18	TOTAL NO OF OUTSTANDING CLAIMS [sum 11+14]																

403,885

Service 0

PARTICULARS BY VALUES \$ or Nil value as appropriate	Row No	FIRE \$	HOUSE HOLDERS \$	MOTOR VEHICLE \$	MARINE HULL \$	MARINE CARGO \$	FTT & BURGLARY \$	MOTOR CTP \$	PERSONAL ACCIDENT \$	TRAVEL INSURANCE \$	PUBLIC LIABILITY \$	WORKERS COMP \$	MEDICAL \$	TERM LIFE \$	OTHER \$	TOTAL \$
Gross expected future payments on outstanding reported claims where the event giving rise to the claim occurred (S):																
(a) this year	16															
(b) in the year prior to (a)	17															
(c) in the year two years prior to (a)	18															
(d) in any year earlier than (c)	19															
Gross provision for IBNR claims (all accident years)	20															
<b>TOTAL GROSS O/S PROVISION</b> [sum 16-20]	21															
Reinsurance recoveries expected on reported outstanding claims where the event giving rise to the claim occurred (S):																
(a) this year	22															
(b) in the year prior to (a)	23															
(c) in the year two years prior to (a)	24															
(d) in any year earlier than (c)	25															
Estimated reinsurance recoveries on IBNR claims	26															
<b>TOTAL REINSURANCE RECOVERIES ON O/S</b> [sum 22-26]	27															

Service 0

403,886

## INSURANCE ACT 1998

[INS 10,235]

## FORM 6G

## STATEMENT OF GENERAL EXPENSES

NAME OF INSURER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
<b>PART A - TYPE OF EXPENSE</b>				
Head office charges	1			
Related body charges	2			
Salaries and wages	3			
Commissions	4			
Management fees	5			
Staff training	6			
Fiji National Provident Fund	7			
Other employee costs	8			
Directors' fees	9			
Expenses in respect of:				
Accounting services	10			
Advertising	11			
Auditing services	12			
Computing services	13			
Consultancy services	14			
Donations	15			
Doubtful debts	16			
Entertainment	17			
Insurance	18			
Interest expense	19			
Motor vehicle expenses	20			
Printing and stationery	21			
Repairs and maintenance	22			
Rent and rates	23			
Travel and accommodation	24			
Depreciation	25			
Other expenses (attach details)	26			
Sub-total [sum 1:26]	27			
<b>PART B - EXPENSE ALLOCATION</b>				
Underwriting expenses	28			
Management / administration expenses	29			

403,887

Service 0



PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
Total Allocated (sum 28:29)	30			
(NOTE THAT ROW 27 MUST EQUAL ROW 30)				
State basis of expense allocation .....				
.....				
.....				

Signature .....  
(Principal Officer)

Signature .....  
(Auditor)

Date ...../ ...../ .....

Date ...../ ...../ .....

[The next page is 403,901]

## INSURANCE ACT 1998

[INS 10,240]

## FORM 6H

## STATEMENT OF UNEARNED PREMIUMS

NAME OF INSURER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

INSIDE FIJI  
OUTSIDE FIJI  
(delete as applicable)

Row No	Month	Net Premium income derived during month	Unearned proportion	Unearned premiums			
		\$		\$			
1	January		1/24				
2	February		3/24				
3	March		5/24				
4	April		7/24				
5	May		9/24				
6	June		11/24				
7	July		13/24				
8	August		15/24				
9	September		17/24				
10	October		19/24				
11	November		21/24				
12	December		23/24				
13	TOTAL						
14	Amount of unclosed business included in row 12						
15	Unearned premium provision shown at 6C, row 51						
16	Comparative excess (or deficiency) of unearned premium provision			[15-13]			
STATE THE METHOD THE INSURER HAS USED TO CALCULATE ITS UNEARNED PREMIUM PROVISION:							

Signature .....  
(Principal Officer)

Signature .....  
(Auditor)

Date ...../...../.....

Date ...../...../.....

Service 0

403,902

INSURANCE ACT 1998

[INS 10,245]

FORM 61

STATEMENT OF REINSURANCE ARRANGEMENTS

NAME OF INSURER:		YEAR ENDING: 31 DECEMBER													
Row No	PARTICULARS	FIRE	HOUSE HOLDERS	MOTOR VEHICLE	MARINE HULL	MARINE CARGO	CIT & BURGLARY	MOTOR CTP	PERSONAL ACCIDENT	PROP INDEMNITY	PUBLIC LIABILITY	WORKERS COMP	MEDICAL	TERM LIFE	OTHER
<b>PART A — RETENTIONS</b>															
1	HIGHEST RISK RETENTION (NET)														
2	- Base retention														
3	- Additional co-insurance (if any)														
	Sub-total (IRR) 1:2]														
<b>PART B — LIMITS</b>															
4	MAXIMUM EVENT RETENTION (NET)														
5	- Base retention														
6	- Additional co-insurance (if any)														
	Sub-total (MFR) 4:3]														
7	MAXIMUM ACCEPTANCE / UNDERWRITING LIMIT														
8	MAXIMUM AUTOMATIC PER RISK CAPACITY														
<b>PART C — COVER</b>															
9	MAXIMUM CATASTROPHE COVER ARRANGED														
10	MPL used (if any)														
11	Number of reinsurances														
12	Accumulated loss (incop loss)														
<b>PART D — BUSINESS WRITTEN BY THE COMPANY NOT PROTECTED BY OUTWARDS REINSURANCE ARRANGEMENTS</b>															
Row No	Class of business	Maximum loss in respect of one risk		Maximum loss in respect of one event		Class of business		Row No	Maximum loss in respect of one risk		Maximum loss in respect of one event				
13								16							
14								17							
15								18							

Signature ..... Date ...../...../.....

Signature ..... Date ...../...../.....  
(Principal Officer)

(Auditor)

NB. Details of reinsurance arrangements and full list of participants to be attached

Service 0

403,904

INSURANCE ACT 1998

FORM 6J

STATEMENT OF GROSS AGGREGATE EXPOSURES

[INS 10,250]

NAME OF INSURER:		YEAR ENDING: 31 DECEMBER														
PARTICULARS	Row No	Fire	HOUSE HOLDERS	MOTOR VEHICLE	MARINE HULL	MARINE CARGO	CT & BURGLARY	MOTOR CTP	PERSONAL ACCIDENT	PROF IDENTITY	PUBLIC LIABILITY	WORKERS COMP	MEDICAL	TERM LIFE	OTHER	TOTAL
		\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
GROSS AGGREGATE EXPOSURES																
INSIDE FIJI																
- Western Division	1															
- Central Division	2															
- Northern Division	3															
- Eastern Division	4															
Sub-total — Inside fiji	5															
OUTSIDE FIJI	6															
TOTAL	7															

403,905

Signature ..... Date ..... Signature ..... Date .....  
(Principal Officer) (Auditor)

## INSURANCE ACT 1998

[INS 10,255]

## FORM 6K

## BUDGET PROJECTIONS

NAME OF INSURER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

PARTICULARS	Row No	INSIDE FIJI	OUTSIDE FIJI	IN TOTAL
<b>PART A — PREMIUMS</b>				
Gross premium income \$	1	_____	_____	_____
Outwards reinsurance \$	2	_____	_____	_____
Net premium income \$	3	_____	_____	_____
<b>PART B — OPERATING RESULTS</b>				
Underwriting \$	4	_____	_____	_____
Loss ratio %	5	_____	_____	_____
Expense ratio %	6	_____	_____	_____
Overall after tax \$	7	_____	_____	_____
<b>PART C — FINANCIAL POSITION</b>				
Net assets at end of year \$	8	_____	_____	_____
<b>PART D — MATERIAL CHANGES</b> (eg business classes or geographical concentration, capital and asset/liability structure, management, information systems and/or reinsurance arrangements). _____ _____ _____ _____ _____				
<b>PART E — STATE ASSUMPTIONS USED</b> _____ _____				


Signature ..... Date: .....  
(Principal Officer)



[The next page is 403,921]

## INSURANCE ACT 1998

[INS 10,260]

## FORM 7A

## OPERATING ACCOUNT

NAME OF INSURER: \_\_\_\_\_

QUARTER ENDING: \_\_\_\_\_

PARTICULARS	Row No	INSIDE FII \$	OUTSIDE FII \$	IN TOTAL \$
<b>NET ASSETS AT BEGINNING OF QUARTER</b> (row 24. last qtr)	1			
Gross premium income	2			
Reinsurance outwards	3			
<b>NET PREMIUM INCOME</b> [2-3]	4			
Retained unearned premiums — opening	5			
Retained unearned premiums — closing	6			
<b>NET EARNED PREMIUMS</b> [4+5-6]	7			
Net claims paid	8			
Net claims outstanding — closing	9			
Net claims outstanding — opening	10			
<b>NET CLAIMS INCURRED</b> [8+9-10]	11			
Underwriting expenses	12			
<b>UNDERWRITING RESULT FOR QUARTER</b> [7+11-12]	13			
Non underwriting income	14			
Non underwriting expenses	15			
Abnormal / extraordinary items (attach details)	16			
Taxation expense	17			
Other (attach details)	18			
<b>PROFIT / LOSS FOR QUARTER</b> [13+14-15+16-17+18]	19			
Subscription / redemption of capital (attach details)	20			
Dividends provided for or paid	21			
Transfer of funds (attach details)	22			
Other (attach details)	23			
<b>NET ASSETS AT END OF QUARTER</b>	24			

403,921

Service 0

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
[NOTE THAT ROW 24 MUST EQUAL FORM 7B, ROW 76]  Net premium income for 12 months ending this quarter	[19+20-21- 22+23]  25			

Signature .....  
(Principal Officer)

Date ...../...../.....

Service 0

403,922

## INSURANCE ACT 1998

[INS 10,265]

## FORM 7B

## BALANCE SHEET

NAME OF INSURER: \_\_\_\_\_

QUARTER ENDING: \_\_\_\_\_

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
<b>ASSETS</b>				
Cash on hand	1	_____	_____	_____
Outstanding premiums:				
- 3 months and under	2	_____	_____	_____
- over 3 months but 6 months and under	3	_____	_____	_____
- over 6 months	4	_____	_____	_____
Amounts due from reinsurers on outstanding claims	5	_____	_____	_____
Amounts due from reinsurers on claims paid:				
- 3 months and under	6	_____	_____	_____
- over 3 months but 6 months and under	7	_____	_____	_____
- over 6 months	8	_____	_____	_____
Deferred reinsurance expense	9	_____	_____	_____
Deferred acquisition expense	10	_____	_____	_____
Prepayments:				
- related persons	11	_____	_____	_____
- non related persons	12	_____	_____	_____
Sundry debtors:				
- related persons	13	_____	_____	_____
- non related persons	14	_____	_____	_____
Other (attach details)	15	_____	_____	_____
<u>Sub-total</u> [sum 1:15]	16	_____	_____	_____
<b>LOANS* (attach supporting schedules)</b>				
Loans to directors and other persons prescribed in section 32(1)(a):				
- secured	17	_____	_____	_____
- unsecured	18	_____	_____	_____
Loans to related persons:				

403,923

Service 0

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
- secured	19			
- unsecured	20			
Unsecured employee loans	21			
Other loans:				
- secured	22			
- unsecured	23			
Other (attach details)	24			
<u>Sub-total (loans)</u> [sum 17:24]	25			
<b>INVESTMENTS* (attach supporting schedules)</b>				
Land and buildings	26			
Government securities	27			
Bank deposits	28			
Debentures with:				
- related persons	29			
- non related persons	30			
Shares in:				
- related persons	31			
- non related persons	32			
Other (attach details)	33			
<u>Sub-total (investments)</u> [sum 26:33]	34			
<b>FIXED ASSETS</b>				
Motor vehicles	35			
Furniture and fittings	36			
Computer hardware	37			
Computer software	38			
Other (attach details)	39			
<u>Sub-total (fixed assets)</u> [sum 33:39]	40			
<b>INTANGIBLE ASSETS</b>				
Future income tax benefit	41			
Goodwill	42			
Establishment costs	43			
Other (attach details)	44			
<u>Sub-total (intangible assets)</u> [sum 41:44]	45			
<b>OTHER ASSETS</b>				
Other amounts due:				
- related persons	46			
- non related persons	47			

PARTICULARS	Row No	INSIDE FJI \$	OUTSIDE FJI \$	IN TOTAL \$
Other (attach details)	48			
<u>Sub-total (other assets)</u> [sum 46:48]	49			
<b>TOTAL ASSETS</b> [sum 16+25+34+40+45+49]	50			
<b>LIABILITIES</b>				
<b>UNDERWRITING PROVISIONS</b>				
Unearned premium provision	51			
Outstanding claims provision:				
- reported claims	52			
- IBNR claims	53			
CAE provision	54			
Other (attach details)	55			
<u>Sub-total (U/W provisions)</u> [sum 51:55]	56			
<b>OTHER PROVISIONS</b>				
Taxation	57			
Dividends	58			
Stamp duty	59			
Fire service levy	60			
Employee entitlements	61			
Doubtful debts	62			
Other (attach details)	63			
<u>Sub-total (provisions)</u> [sum 57:63]	64			
<b>BORROWINGS</b>				
Borrowing from related persons	65			
Other borrowings	66			
<u>Sub-total (borrowings)</u> [sum 65:66]	67			
<b>OTHER LIABILITIES</b>				
Amounts due:				
- to insurers	68			
- to reinsurers	69			
- to related persons	70			
- to agents and brokers	71			
Sundry creditors	72			
Other (attach details)	73			
<u>Sub-total (other liabilities)</u> [sum 68:73]	74			
<b>TOTAL LIABILITIES</b> [sum 56+64+67+74]	75			
<b>NET ASSETS</b> [50-75]	76			

403,925

Service 0

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
<b>CONTINGENT LIABILITIES</b>	77			
<b>OWNERS' FUNDS</b>				
Authorised capital	78			
Paid-up capital	79			
Retained profits (loss)	80			
Balance of head office account	81			
Asset revaluation reserve	82			
General reserve	83			
Other (attach details)	84			
<b>TOTAL OWNERS' FUNDS</b> [sum 78:84]	85			

Signature .....  
(Principal Officer)

Date ...../...../.....

[The next page is 403,941]

## INSURANCE ACT 1998

[INS 10,270]

## FORM 8A

## STATEMENT OF REVENUE AND DISTRIBUTION

NAME OF INSURER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

PARTICULARS	Row No	ALL STATUTORY FUNDS	OWNERS' FUND	TOTAL
<b>PART A — REVENUE</b>				
Net Insurance Premiums	1			
Net Consideration for Annuities	2			
Investment Income:				
- Interest	3			
- Rent	4			
- Dividends	5			
- Others	6			
Gain (loss) on Disposal of Assets	7			
Asset Value Appreciation (Depreciation)	8			
Other income	9			
<b>TOTAL INCOME</b> (sum 1-9)	10			
Net Policy Payments	11			
Net Commissions Incurred	12			
Operating Expenses	13			
Increase (Decrease) in policy Liabilities	14			
<b>TOTAL OUTGOING</b> (sum 11-14)	15			
<b>PRE-TAX REVENUE SURPLUS (DEFICIT)</b> (10-15)	16			
Taxation expense	17			
<b>AFTER-TAX REVENUE SURPLUS (DEFICIT)</b> (16-17)	18			
<b>PART B — DISTRIBUTION</b>				
Balance of Revenue Account at the beginning of the year (row 28, Last yr)	19			
Revenue Surplus (Deficit) for this period (from row 18)	20			
Other Transfers in	21			
<b>BALANCE OF REVENUE ACCOUNT BEFORE DISTRIBUTIONS</b> (sum 19-21)	22			
Bonuses Provided For or Paid	23			
Transfer to Owners' Fund	24			
Transfers to Reserves	25			
Dividends Provided For or Paid	26			

403,941

Service 0



PARTICULARS	Row No	ALL STATUTORY FUNDS	OWNERS' FUND	TOTAL
Other Transfers Out (attach details)	27	_____	_____	_____
BALANCE OF REVENUE ACCOUNT AT THE END OF THE YEAR [22-23-24-25-26-27]	28	_____	_____	_____

Signature .....

(Principal Officer)

Date: ...../...../.....

Signature .....

(Auditor)

Date: ...../...../.....

## INSURANCE ACT 1998

[INS 10,275]

FORM 8B

## STATEMENT OF REVENUE AND DISTRIBUTION

NAME OF INSURER: \_\_\_\_\_

NAME OF STATUTORY FUND: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

PARTICULARS	Row No	PARTICIPATING \$	NON- PARTICIPATING \$	TOTAL \$
<b>A. REVENUE</b>				
Net Insurance Premiums [8D row 11]	1			
Net Consideration for Annuities [8D row 14]	2			
Investment Income				
- Interest	3			
- Rent	4			
- Dividends	5			
- Others	6			
Gain (loss) on Disposal of Assets	7			
Asset Value Appreciation (Depreciation)	8			
Other income	9			
TOTAL INCOME [sum 1-9]	10			
Net Policy Payments [8E row 11]	11			
Net Commissions Incurred [8D row 20]	12			
Operating Expenses	13			
Increase (Decrease) in policy Liabilities [10C row 4]	14			
TOTAL OUTGOING [sum 11-14]	15			
PRE-TAX REVENUE SURPLUS (DEFICIT) [10-15]	16			
Taxation	17			
AFTER-TAX REVENUE SURPLUS (DEFICIT) [16-17]	18			
<b>B. DISTRIBUTION</b>				
Balance of Revenue Account at the beginning of the year	19			
Revenue Surplus (Deficit) for this period [from row 18]	20			
Other transfers in	21			

403,943

Service 0

PARTICULARS	Row No	PARTICIPATING \$	NON- PARTICIPATING \$	TOTAL \$
BALANCE OF REVENUE ACCOUNT BEFORE DISTRIBUTIONS [sum 19 21]	22			
Bonuses Provided For or Paid	23			
Transfer to Owners' Fund	24			
Transfers to Reserves	25			
Dividends Provided For or Paid	26			
Other Transfers Out (attach details)	27			
BALANCE OF STATUTORY FUND AT THE END OF THE YEAR [22-23-24-25- 26-27]	28			

Signature .....

(Principal Officer)

Date: ...../...../.....

Signature .....

(Auditor)

Date: ...../...../.....

## INSURANCE ACT 1998

[INS 10,280]

## FORM 8C

## BALANCE SHEET

NAME OF INSURER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
<b>ASSETS</b>				
Cash on hand	1	_____	_____	_____
Outstanding premiums	2	_____	_____	_____
Amounts due from reinsurances on outstanding claims	3	_____	_____	_____
Amounts due from reinsurers on claims paid:				
- 3 months and under	4	_____	_____	_____
- over 3 months but 6 months and under	5	_____	_____	_____
- over 6 months	6	_____	_____	_____
Deferred reinsurance expense	7	_____	_____	_____
Deferred acquisition expense	8	_____	_____	_____
Prepayments				
- related persons	9	_____	_____	_____
- non related persons	10	_____	_____	_____
Sundry debtors:				
- related persons	11	_____	_____	_____
- non related persons	12	_____	_____	_____
Other (attach details)	13	_____	_____	_____
<b>Sub-total</b> <small>(sum 1:13)</small>	14	_____	_____	_____
<b>LOANS * (attach supporting schedules)</b>				
Loans to directors and other persons prescribed in section 32(1)(a):				
- secured	15	_____	_____	_____
- unsecured	16	_____	_____	_____
Loans to related persons				
- secured	17	_____	_____	_____
- unsecured	18	_____	_____	_____
Unsecured employee loan	19	_____	_____	_____
Other loans				

403,945

Service 0

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
- secured	20			
- unsecured	21			
Other (attach details)	22			
<b>Sub-total (loans)</b> [sum 15:22]	23			
<b>INVESTMENTS* (attach supporting schedules)</b>				
Land and buildings	24			
Government securities	25			
Bank deposits	26			
Debentures with:				
- related persons	27			
- non related persons	28			
Shares in:				
- related persons	29			
- non related persons	30			
Other (attach details)	31			
<b>Sub-total (investments)</b> [sum 24:31]	32			
<b>FIXED ASSETS</b>				
Motor vehicles	33			
Furniture and fittings	34			
Computer hardware	35			
Computer software	36			
Other (attach details)	37			
<b>Sub-total (fixed assets)</b> [sum 33:37]	38			
<b>INTANGIBLE ASSETS</b>				
Future income tax benefit	39			
Goodwill	40			
Establishment costs	41			
Other (attach details)	42			
<b>Sub-total (intangible assets)</b> [39:42]	43			
<b>OTHER ASSETS</b>				
Other amounts due:	44			
- related persons	45			

403,946

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
- non related persons	46			
Other (attach details)				
<b>Sub-total (other assets)</b> [sum 44:46]	47			
<b>TOTAL ASSETS</b> [sum 14+23+32+38+43+47]	48			
<b>LIABILITIES</b>				
Balance of revenue account at year end [8Ar23co13]	49			
Claims admitted but not paid	50			
Unearned premium provision	51			
Other (attach details)	52			
<b>Sub-total</b> [sum 49:52]	53			
<b>OTHER PROVISIONS</b>				
Taxation	54			
Dividends	55			
Stamp duty	56			
Fire service levy	57			
Employee entitlements	58			
Doubtful debts	59			
Other (attach details)	60			
<b>Sub-total (other provisions)</b> [sum 54:60]	61			
<b>BORROWINGS</b>	62			
Borrowings from related persons	63			
Other borrowings				
<b>Sub-total (borrowings)</b> [sum 62:63]	64			
<b>OTHER LIABILITIES</b>				
Amounts due:				
- to insurers	65			
- to reinsurers	66			
- to related persons	67			
- to agents and brokers	68			
Sundry creditors	69			
Other (attach details)	70			

403,947

Service 0

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
<b>Sub-total (other liabilities)</b> [sum 65:70]	71			
<b>TOTAL LIABILITIES</b> [sum 53+61+64+71]	72			
<b>NET ASSETS</b> [48-72]	73			
<b>CONTINGENT LIABILITIES</b>	74			
<b>OWNERS' FUNDS</b>				
Authorised capital	75			
Paid-up	76			
Retained profits (loss)	77			
Balance of head office account	78			
Asset revaluation reserve	79			
General reserve	80			
Other (attach details)	81			
<b>TOTAL OWNERS' FUNDS</b> [sum 75:81]	82			

Signature ..... Signature .....  
 (Principal Officer) (Auditor)  
 Date: ..... / ..... / ..... Date: ..... / ..... / .....

[The next page is 403,961]

## INSURANCE ACT 1998

## FORM 8D

## STATEMENT OF PREMIUM AND COMMISSION

[INS 10,285]

INSIDE/OUTSIDE FIJI (delete as applicable)

NAME OF INSURER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

NAME OF STATUTORY FUND: \_\_\_\_\_

PARTICULARS	Row No	Ordinary life (individual)				Industrial life	Group life (term)	Other (Individual)	Other (Group)	TOTAL
		Whole of Life	Endowment	Term						
					Term					
\$	\$	\$	\$	\$	\$	\$	\$	\$		
PART A — PREMIUMS		1								
Direct Insurance Premiums:		2								
- new										
- renewal										
Sub-total — Direct		3								
Reinsurance Premiums Inwards		4								
GROSS INSURANCE PREMIUMS		5								
Reinsurance Premiums Coded:										
- treaty local		6								
- treaty overseas		7								
- facultative local		8								
- facultative overseas		9								
Sub-total — Cessions		10								
NET INSURANCE PREMIUMS		11								
Gross Consideration for Annuities		12								
Reinsurance Premiums Coded		13								

403,961

Service 0



PARTICULARS	Row No	Ordinary life (individual)			Industrial life	Group life (term)	Other (Individual)	Other (Group)	TOTAL
		Whole of Life	Endowment	Term					
NET CONSIDERATION FOR ANNUITIES	14								\$
PART B — COMMISSIONS	15								
Paid or Payable:	16								
(i) Direct business	17								
- new	18								
- renewal	19								
(ii) Reinsurance business	20								
Sub-total — Paid or Payable									
Received or Receivable									
NET COMMISSIONS INCURRED									

Signature ..... Date ..... Signature ..... Date .....  
 (Principal Officer) (Auditor)

Service 0

403,962

## INSURANCE ACT 1998

[INS 10,295]

## FORM 8F

## STATEMENT OF BUSINESS PROFILE

NAME OF INSURER:

INSIDE/OUTSIDE FIJI (delete as applicable)

YEAR ENDING: 31 DECEMBER

INDIVIDUAL BUSINESS	Row No	No of Policies		Amount Insured (\$)		Premiums (\$)
		Partic	Non-partic	Partic	Non-partic	
Life Business in Force at end of last year	1					
Old Life Policies Revived	2					
<b>NEW LIFE BUSINESS</b>						
Ordinary Life Insurance						
- Whole of Life insurance	3					
- Endowment insurance	4					
- Term insurance	5					
Sub total — ordinary life [sum 3 5]	6					
Industrial life Insurance	7					
Annuities	8					
TOTAL — NEW LIFE BUSINESS [sum 6 8]	9					
<b>TERMINATIONS AND TRANSFERS</b>						
Policies other than annuities						
- Death	10					
- Maturity	11					
- Expiry of term	12					
- Surrender	13					
- Forfeiture	14					
- Net transfer	15					
- Others	16					
Sub total — policies other than annuities [sum 10 16]	17					
Annuities	18					
TOTAL TERMINATIONS AND TRANSFERS [sum 17 18]	19					
<b>BUSINESS IN FORCE AT END OF YEAR</b>						
1 LIFE BUSINESS IN FORCE						
Ordinary Life Insurance						

## INSURANCE ACT 1998

## FORM 8E

## STATEMENT OF POLICY PAYMENTS

[INS 10,290]

NAME OF INSURER: \_\_\_\_\_  
YEAR ENDING: 31 DECEMBER \_\_\_\_\_INSIDE/OUTSIDE FIJI (delete as applicable)  
NAME OF STATUTORY FUND: \_\_\_\_\_

PARTICULARS	Row No	Ordinary life (individual)			Industrial life	Group life (term)	Other (Individual)	Other (Group)	TOTAL
		Whole of Life	Endowment	Term					
		\$	\$	\$	\$	\$	\$	\$	\$
<b>POLICY PAYMENTS</b>									
Gross Policy Payments									
- maturities	1								
- death	2								
- annuities	3								
- surrenders	4								
- accident and health	5								
- other	6								
Sub-total --- Gross payments	7								
Reinsurance Claims Payments	8								
Total Policy Payments	9								
Reinsurance Recoveries	10								
NET POLICY PAYMENTS	11								

403,963

Signature ..... (Principal Officer/Proprietor) Date ...../...../.....

Signature ..... (Auditor) Date ...../...../.....

## INSURANCE ACT 1998

[INS 10,300]

## FORM 8G

## STATEMENT OF GENERAL EXPENSES

NAME OF INSURER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
<b>PART A — TYPE OF EXPENSE</b>				
Head office charges	1	_____	_____	_____
Related body charges	2	_____	_____	_____
Salaries and wages	3	_____	_____	_____
Management fees	4	_____	_____	_____
Staff training	5	_____	_____	_____
Fiji National Provident Fund	6	_____	_____	_____
Other employee costs	7	_____	_____	_____
Director's fees	8	_____	_____	_____
Expenses in respect of:				
Accounting services	9	_____	_____	_____
Advertising	10	_____	_____	_____
Auditing services	11	_____	_____	_____
Computing services	12	_____	_____	_____
Consultancy services	13	_____	_____	_____
Donations	14	_____	_____	_____
Doubtful debts	15	_____	_____	_____
Entertainment	16	_____	_____	_____
Insurance	17	_____	_____	_____
Interest	18	_____	_____	_____
Motor vehicle expenses	19	_____	_____	_____
Printing and stationery	20	_____	_____	_____
Repairs and maintenance	21	_____	_____	_____
Rent and rates	22	_____	_____	_____
Travel and accommodations	23	_____	_____	_____
Depreciation	24	_____	_____	_____
Other expense: (attach details)	25	_____	_____	_____
Sub-total [sum 1:25]	26	_____	_____	_____

INDIVIDUAL BUSINESS	Row No	No of Policies		Amount Insured (\$)		Premiums (\$)
		Partic	Non-partic	Partic	Non-partic	
Whole of Life insurance	20					
Endowment insurance	21					
Term insurance	22					
<u>Sub total — ordinary life</u> [sum 20-22]	23					
Industrial life Insurance	24					
Annuities	25					
<u>Total — life business</u> [23+24+25]	26					
<b>2 OTHER BUSINESS IN FORCE</b>						
Accident	27					
Other	28					
<u>Sub total — other business</u> [sum 27:28]	29					
<b>TOTAL BUSINESS IN FORCE AT YEAR END</b> [26+29]	30					
GROUP BUSINESS	Row no	No of Policies	No of lives	Sums Insured (\$)		Premiums (\$)
<b>NEW BUSINESS</b>						
Life (Term) Insurance	31					
Accident Insurance	32					
Other	33					
<u>Sub total — new business</u> [sum 31:33]	34					
<b>BUSINESS IN FORCE:</b>						
Life (Term) Insurance	35					
Accident Insurance	36					
Others	37					
<u>Sub total — business in force</u> [sum 35:37]	38					
<b>TOTAL GROUP BUSINESS</b> [34+38]	39					

Signature .....  
(Principal Officer/Proprietor)

Signature .....  
(Auditor)

Date ...../...../.....

Date ...../...../.....

<b>PART B — COMMISSIONS</b>				
Net commissions	27	_____	_____	_____

Signature .....  
(Principal Officer)  
Date: ..... / ..... / .....

Signature .....  
(Auditor)  
Date: ..... / ..... / .....

403,967

Service 0

[The next page is 403,981]

## INSURANCE ACT 1998

[INS 10,305]

## FORM 8H

## BUDGET PROJECTION

NAME OF INSURER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

PARTICULARS	Row No	IN TOTAL		
		YR 1 \$	YR 2 \$	YR 3 \$
<b>PART A — PREMIUMS / COMMISSIONS</b>				
Net insurance premiums	1	_____	_____	_____
Net consideration for annuities	2	_____	_____	_____
Net commissions	3	_____	_____	_____
<b>PART B — OPERATING RESULTS</b>				
Net policy payments	4	_____	_____	_____
After tax revenue surplus (deficit)	5	_____	_____	_____
Balance of revenue account at year end	6	_____	_____	_____
<b>PART C — FINANCIAL POSITION</b>				
Projected actuarial liabilities at year end	7	_____	_____	_____
Net assets at end of year	8	_____	_____	_____
Total new business written	9	_____	_____	_____
Total business in force at year end	10	_____	_____	_____
<b>PART D — MATERIAL CHANGES</b> (eg business classes or geographical concentration, capital and asset / liability structure, management, information systems and / or reinsurance arrangements).				
_____				
_____				
_____				
_____				
<b>PART E — STATE ASSUMPTIONS USED</b>				
_____				
_____				
_____				



Signature ..... Date: ..... / ..... / .....  
(Principal Officer)

Service 0

403,982

## INSURANCE ACT 1998

[INS 10,310]

## FORM 9A

## STATEMENTS OF REVENUE AND DISTRIBUTION

NAME OF INSURER: \_\_\_\_\_

QUARTER ENDING: \_\_\_\_\_

PARTICULARS	Row No	ALL STATUTORY FUNDS \$	OWNERS' FUND \$	TOTAL \$
<b>PART A — REVENUE</b>				
Net Insurance Premiums	1			
Net Consideration for Annuities	2			
Investment Income:				
- Interest	3			
- Rent	4			
- Dividends	5			
- Others	6			
Gain (loss) on Disposal of Assets	7			
Asset Value Appreciation (Depreciation)	8			
Other income	9			
TOTAL INCOME (sum 1-9)	10			
Net Policy Payments	11			
Net Commissions Incurred	12			
Operating Expenses	13			
Increase (Decrease) in policy Liabilities	14			
TOTAL OUTGOING (sum 11-14)	15			
PRE-TAX REVENUE SURPLUS (DEFICIT) [10-15]	16			
Taxation expense	17			
AFTER-TAX REVENUE SURPLUS (DEFICIT) [16-17]	18			
<b>PART B — DISTRIBUTION</b>				
Balance of Revenue Account at the beginning of the quarter (row 28, Last qtr)	19			
Revenue Surplus (Deficit) for this period (from row 18)	20			
Other Transfers in	21			
BALANCE OF REVENUE ACCOUNT BEFORE DISTRIBUTIONS (sum 19-21)	22			
Bonuses Provided For or Paid	23			
Transfer to Owners' Fund	24			
Transfers to Reserves	25			
Dividends Provided For or Paid	26			

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Service 0

PARTICULARS	Row No	ALL STATUTORY FUNDS \$	OWNERS' FUND \$	TOTAL \$
Other Transfers Out (attach details)	27	_____	_____	_____
BALANCE OF REVENUE ACCOUNT AT THE END OF THE QUARTER [22-23-24-25-26-27]	28	_____	_____	_____

Signature .....  
(Principal Officer)

Date: ..... / ..... / .....

Service 0

403,984

## INSURANCE ACT 1998

[INS 10,315]

## FORM 9B

## BALANCE SHEET

NAME OF INSURER: \_\_\_\_\_

QUARTER ENDING: \_\_\_\_\_

PARTICULARS	Row No	INSIDE FIU \$	OUTSIDE FIU \$	IN TOTAL \$
<b>ASSETS</b>				
Cash on hand	1	_____	_____	_____
Outstanding premiums	2	_____	_____	_____
Amounts due from reinsurers on outstanding claims	3	_____	_____	_____
Amounts due from reinsurers on claims paid:				
- 3 months and under	4	_____	_____	_____
- over 3 months but 6 months and under	5	_____	_____	_____
- over 6 months	6	_____	_____	_____
Deferred reinsurance expense	7	_____	_____	_____
Deferred acquisition expense	8	_____	_____	_____
Prepayments:				
- related persons	9	_____	_____	_____
- non related persons	10	_____	_____	_____
Sundry debtors:				
- related persons	11	_____	_____	_____
- non related persons	12	_____	_____	_____
Other (attach details)	13	_____	_____	_____
<u>Sub-total</u> (sum 1.13)	14	_____	_____	_____
<b>LOANS*</b> (attach supporting schedules)				
Loans to directors and other persons prescribed in section 32(1)(a):				
- secured	15	_____	_____	_____
- unsecured	16	_____	_____	_____
Loans to related persons:				
- secured	17	_____	_____	_____
- unsecured	18	_____	_____	_____
Unsecured employee loan				
Other loans:	19	_____	_____	_____
- secured	20	_____	_____	_____
- unsecured	21	_____	_____	_____
Other (attach details)	22	_____	_____	_____

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PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
<u>Sub-total (loans)</u> [sum 15 22]	23			
<b>INVESTMENTS* (attach supporting schedules)</b>				
Land and buildings	24			
Government securities	25			
Bank deposits	26			
Debentures with:				
- related persons	27			
- non related persons	28			
Shares in:				
- related persons	29			
- non related persons	30			
Other (attach details)	31			
<u>Sub-total (investments)</u> [sum 24 31]	32			
<b>FIXED ASSETS</b>				
Motor vehicle:	33			
Furniture and fittings	34			
Computer hardware	35			
Computer software	36			
Other (attach details)	37			
<u>Sub-total (fixed assets)</u> [sum 33 37]	38			
<b>INTANGIBLE ASSETS</b>				
Future income tax benefit	39			
Goodwill	40			
Establishment costs	41			
Other (attach details)	42			
<u>Sub-total (intangible assets)</u> [sum 39 42]	43			
<b>OTHER ASSETS</b>				
Other amounts due:				
- related persons	44			
- non related persons	45			
Other (attach details)	46			
<u>Sub-total (other assets)</u> [sum 44 46]	47			
<b>TOTAL ASSETS</b> [sum 14 + 23 + 32 + 18 + 43 + 47]	48			
<b>LIABILITIES</b>				
Balance of revenue account at qtr end [9A r 28 col3]	49			
Claims admitted but not paid	50			

PARTICULARS	Row No	INSIDE FIU \$	OUTSIDE FIU \$	IN TOTAL \$
Unearned premium provision	51	_____	_____	_____
Other (attach details)	52	_____	_____	_____
<u>Sub-total</u> (sum 49-52)	53	_____	_____	_____
<b>OTHER PROVISIONS</b>				
Taxation	54	_____	_____	_____
Dividends	55	_____	_____	_____
Stamp duty	56	_____	_____	_____
Fire service levy	57	_____	_____	_____
Employee entitlements	58	_____	_____	_____
Doubtful debts	59	_____	_____	_____
Other (attach details)	60	_____	_____	_____
<u>Sub-total (other provisions)</u> (sum 54-60)	61	_____	_____	_____
<b>BORROWINGS</b>				
Borrowings from related persons	62	_____	_____	_____
Other borrowings	63	_____	_____	_____
<u>Sub-total (borrowings)</u> (sum 62-63)	64	_____	_____	_____
<b>OTHER LIABILITIES</b>				
Amounts due:				
- to insurers	65	_____	_____	_____
- to reinsurers	66	_____	_____	_____
- to related persons	67	_____	_____	_____
- to agents and brokers	68	_____	_____	_____
Sundry creditors	69	_____	_____	_____
Other (attach details)	70	_____	_____	_____
<u>Sub-total (other liabilities)</u> (sum 65-70)	71	_____	_____	_____
<b>TOTAL LIABILITIES</b> (sum 53+61+64+71)	72	_____	_____	_____
<b>NET ASSETS</b> (48-72)	73	_____	_____	_____
<b>CONTINGENT LIABILITIES</b>	74	_____	_____	_____
<b>OWNERS' FUNDS</b>				
Authorised capital	75	_____	_____	_____
Paid-up capital	76	_____	_____	_____
Retained profits (loss)	77	_____	_____	_____
Balance of head office account	78	_____	_____	_____
Asset revaluation reserve	79	_____	_____	_____
General reserve	80	_____	_____	_____

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Service 0

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
Other (attach details)	81			
TOTAL OWNERS' FUNDS (sum 75-81)	82			

Signature .....  
(Principal Officer)

Date: ...../...../.....

[The next page is 404,001]

Service 0

403,988

## INSURANCE ACT 1998

[INS 10,320]

## FORM 10A

## PROVISIONS RELATING TO THE PREPARATION OF ACTUARIAL ABSTRACTS

## PART 1

1. Abstracts must be so arranged that the numbers and letters of the items correspond with those of the items and Part 2 of this Form.
2. Specimen policy values must be given at the rate of interest employed in the valuation in respect of whole life insurance policies effected at the respective ages of 20, 30, 40 and 50 and having been in force respectively for 5 years, 10 years and upwards at intervals of 10 years; and similar policy values must be given in respect of endowment insurance policies effected at the respective ages of 20, 30, and 40 for endowment terms of 10, 20 and 30 years, and in the case of policies involving continuous disability benefits, specimens of the valuation factors must be given, provided that where the specimen policy values or valuation factors required by this direction to be given are the same as those given in any abstract previously prepared under Part 2 of the directions issued under section 62(1) previously submitted by the insurer to the Reserve Bank, it shall be sufficient in any abstract subsequently submitted to refer to the specimens so given in such manner as to enable the Reserve Bank to ascertain the required information.
3. In showing the proportion which that part of the annual premiums reserved as a provision for future expenses and profits bears to the total of the annual premiums, it shall be sufficient in any abstract subsequently submitted to refer to the specimens so given in such manner as to enable the Reserve Bank to ascertain the required information.
4. (a) The average rate of interest earned in any year by the assets constituting a statutory fund must, for the purposes of paragraph (2)(e) of Part 2 of this Form, be calculated by dividing the interest of the year by the mean fund of the year; and for the purposes of any such calculation the interest of the year must be taken to be the whole of the interest, dividends and rents credited to the statutory fund during the year after deduction of rates and taxes (any refund of rates or taxes made during the year being taken into account) and the mean fund of the year shall be ascertained by adding a sum equal to one-half of the amount of the statutory fund at the beginning of the year to a sum equal to one-half of that fund at the end of the year and deducting from the aggregate of those 2 sums an amount equal to one-half of the interest of the year.  
(b) The abstract must state in what manner the sums invested in reversions and the income and profits derived from those reversions have been treated in calculating the average rate of interest under paragraph (a).
5. Every abstract prepared in accordance with Part 2 of this Form must be signed by an actuary appointed under section 61(1) of the Act and must contain a certificate by the actuary as to the accuracy of the valuations made for the purposes of the abstract and of the valuation data.
6. For the purposes of this Form—  
**extra premium** means a charge for any risk not provided for in the minimum contract premium;  
**inter-valuation period** means, in relation to any valuation in respect of any class of business, the period to the valuation date of that valuation from the valuation date of the last preceding valuation under the Insurance Act 1998 or, if there is no preceding valuation under the Insurance Act 1998, from the valuation date of the last preceding valuation made in respect of that class of business, from the date on which the insurer began to carry on that class of business;



**maturity date** means the fixed date on which any benefit will become payable either absolutely or contingently;

**net premiums** means, in relation to any valuation, the premiums for which credit is taken in the valuation;

**premium term** means the period during which premiums are payable; and

**valuation date** means, in relation to any valuation, the date as at which the valuation is made.

## PART 2

1. The following statements must be annexed to every abstract prepared in accordance with this Form —

- (a) a Summary and Valuation, in accordance with Form 10B, of the policies included, at the valuation date, in the class of business to which the abstract relates; and
- (b) a Valuation Balance Sheet, in accordance with Form 10C.

2. Every abstract prepared in accordance with this Form must show—

- (a) the valuation date;
- (b) the general principles and full details of the methods adopted in the valuation of each of the various classes of insurance and annuities shown in Form 10B, including statements on the following matters—
  - (i) whether the principles were determined by the instruments constituting the insurer or by its articles of association or other rules or, if not, how the principles were determined;
  - (ii) the method by which the net premiums have been arrived at and how the ages at entry, premium terms and maturity dates have been treated for the purposes of the valuation;
  - (iii) the methods by which the valuation age, period from the valuation date to the maturity date, and the future premium terms, have been treated for the purpose of the valuation;
  - (iv) the rate of bonus taken into account where, by the method of valuation, definite provision is made for the maintenance of a specific rate of bonus;
  - (v) the method of allowing for—
    - (1) the incidence of the premium income; and
    - (2) premiums payable otherwise than annually;
  - (vi) the methods by which provision has been made for the following matters—
    - (1) the immediate payment of claims;
    - (2) future expenses and profits in the case of limited payment policies and paid-up policies;
    - (3) liabilities which exist or may arise in respect of lapsed policies not included in the valuation; and
    - (4) payment of benefits or waiver of premiums during disability—
      - (A) in operation at the valuation date; and
      - (B) not in operation at that date,and whether any reserves have been made for those matters;
  - (vii) whether under the valuation method adopted any policy would be treated as an asset, and what steps have been taken to eliminate any such asset from the valuation;

- (viii) a statement of the manner in which policies on under average lives and policies subject to premiums which include a charge for climatic, military or other extra risks have been dealt with; and
- (ix) the currency in which the valuation is made and the basis of conversion into that currency of the value of liabilities in other currencies;
- (c) the tables of mortality, sickness and accident used, and the rate of interest assumed, in the valuation;
- (d) the proportion of the annual amount of premiums that is reserved as a provision for future expenses and bonuses (the proportion to be separately identified in respect of insurances with immediate profits, with deferred profits and without profits);
- (e) the average rates of interest earned by the assets constituting the relevant statutory fund for each of the 5 years preceding the valuation date;
- (f) the basis adopted in the distribution of surplus as between the insurer and policy owners and whether that basis was determined by the instruments constituting the insurer or by its articles of association or other rules or, if not, how the basis was determined;
- (g) the general principles adopted in the distribution of surplus among policy owners, including statements on the following matters—
  - (i) whether the principles were determined by the instruments constituting the insurer, or by its articles of association or other rules or, if not, how the principles were determined;
  - (ii) the number of years' premiums to be paid, period to elapse, and other conditions to be fulfilled, before a bonus is allotted;
  - (iii) whether the bonus is allotted in respect of each year's premiums paid, or in respect of each completed calendar year or year of insurance or if not, how the bonus is allotted; and
  - (iv) whether the bonus vests immediately on allocation or, if not, the conditions of vesting;
- (h) the total amount of surplus arising during the inter-valuation period including surplus paid away and sums transferred to reserve funds or other accounts during that period, and the amount brought forward from the preceding valuation (to be stated separately) and the allocation of that surplus—
  - (i) to interim bonus paid;
  - (ii) among policy owners with immediate participation, giving the number of the policies which participated and the sums insured under the policies (excluding bonuses);
  - (iii) among policy owners with deferred participation, giving the number of policies which participated and the sums insured under the policies (excluding bonus);
  - (iv) among shareholders or to shareholders' accounts (any such sums passed through the accounts during the inter-valuation period to be separately stated);
  - (v) to every reserve fund, or other fund or account (any such sums passed through the accounts during the inter-valuation period to be separately stated); and
  - (vi) as carried forward unappropriated;
- (i) specimens, as at the valuation date, of the bonuses attaching to policies of \$1,000—

- (i) for the whole term of life effected at the respective ages of 20, 30 and 40, and having been in force respectively for 5 years, 10 years and upwards at intervals of 10 years (where different rates of bonus are allotted to policies under which the premiums are payable for a limited term only, similar specimen bonuses must be shown for policies having premium terms of 10 and 20 years respectively); and
- (ii) for endowment insurances effected at the respective ages of 20, 30 and 40, for endowment terms of 15, 20 and 30 years and effected at age 20 for an endowment term of 40 years, and having been in force respectively for 5 years, 10 years and upwards at intervals of 10 years, together with the amounts apportioned under the various ways in which the bonus is receivable;
- (j) where bonuses are allotted as reversionary additions to the sums insured under policies, a statement of the basis and conditions under which those bonuses may be surrendered for cash;
- (k) a statement of the value allowed for surrender of policies for \$1,000—
  - (i) for the whole term of life effected at the respective ages of 20, 30 and 40, having been respectively in force for 5 years, 10 years and upwards at intervals of 10 years; and
  - (ii) for endowment insurances effected at the respective ages 20, 30 and 40 for endowment terms of 15, 20 and 30 years, and at age 20 for an endowment term of 40 years, and having been in force for 5 years, 10 years and upwards at intervals of 10 years; and
- (l) a statement showing how the liability under any disability clause in a policy has been determined in the valuation with full information of the tables of sickness or accident rates used for the purpose.

[The next page is 404,021]

## INSURANCE ACT 1998

## FORM 10B

## SUMMARY AND VALUATION OF POLICIES

[INS 10,325]

NAME OF INSURER: \_\_\_\_\_

NAME OF STATUTORY FUND: \_\_\_\_\_

VALUATION AS AT 31 DECEMBER: \_\_\_\_\_

TYPE OF INSURANCE	PARTICULARS OF POLICIES FOR VALUATION						VALUATION LIABILITY			
	NO OF POLICIES	SUM INSURED	BONUSES	OFFICE YRLY PREM.	NET YEARLY PREMIUMS	SUM INSURED	BONUSES	NET YEARLY PREMIUMS	NET LIABILITY	
	\$	\$	\$	\$	\$	\$	\$	\$	\$	
ORDINARY INSURANCE <u>With Immediate Participation in Profits</u> For: Whole Term of Life Insurance Endowment Insurance Other Extra Premium Adjustment <u>Total Insurance</u> Deduct Reinsurance	1									
	2									
	3									
	4									
	5									
	6									
	7									
	8									
	With Deferred Participation in Profits For: Whole Term of Life Insurance Endowment Insurance Other Extra Premium Adjustment	9								
		10								
11										
12										
13										

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Service 0

TYPE OF INSURANCE:	PARTICULARS OF POLICIES FOR VALUATION						VALUATION LIABILITY			
	NO OF POLICIES	SUM INSURED	BONUSES	OFFICE YRLY PREM.	NET YEARLY PREMIUMS	SUM INSURED	BONUSES	NET YEARLY PREMIUMS	NET LIABILITY	
	\$	\$	\$	\$	\$	\$	\$	\$	\$	
<u>Total Insurance</u>	14									
Deduct Reinsurance	15									
Net Insurance	16									
<u>Total Net Insurance With Profits</u>	17									
<u>Without Participation in Profits</u>										
For: <u>Whole Term of Life Insurance</u>	18									
Endowment Insurance	19									
Other	20									
Extra Premium	21									
Adjustment	22									
<u>Total Insurance</u>	23									
Deduct Reinsurance	24									
<u>Total Net Insurance Without Profits</u>	25									
<u>Endowment</u>										
For: <u>Whole Term of Life Insurance</u>	26									
Endowment Insurance	27									
Other	28									
Extra Premium	29									
Adjustment	30									
<u>Total Endowments</u>	31									
Deduct Reinsurance	32									
<u>Total Net Endowment</u>	33									
<u>Annuities</u>										

Service 0

404,022

TYPE OF INSURANCE		PARTICULARS OF POLICIES FOR VALUATION						VALUATION LIABILITY			
		NO OF POLICIES	SUM INSURED	BONUSES	OFFICE YRLY PREM.	NET YEARLY PREMIUMS	SUM INSURED	BONUSES	NET YEARLY PREMIUMS	NET LIABILITY	
		\$	\$	\$	\$	\$	\$	\$	\$	\$	
Immediate Annuities on Lives  Other	34										
	35										
	36										
	37										
	38										
	39										
	40										
	41										
	42										
	43										
INDUSTRIAL INSURANCE  Monthly debit ordinary <u>Without participation in profits</u> For: Whole Term of Life Insurance Endowment Insurance Supplementary Accident Benefits <u>Total Monthly Debit Ordinary</u> Deduct Reinsurance	44										
	45										
	46										
	47										
	48										
	49										
	50										
	Net Monthly Debit Ordinary										
	Industrial Life Weekly Premium										
	For: Whole Term of Life With Limited Prem. Endowment Insurance										

404,023

Service 0

TYPE OF INSURANCE		PARTICULARS OF POLICIES FOR VALUATION					VALUATION LIABILITY			
		NO OF POLICIES	SUM INSURED	BONUSES	OFFICE YRLY PREM.	NET YEARLY PREMIUMS	SUM INSURED	BONUSES	NET YEARLY PREMIUMS	NET LIABILITY
		\$	\$	\$	\$	\$	\$	\$	\$	\$
Extended Term	51									
Supplementary Accident Benefits	52									
Total Industrial Life Weekly	53									
Deduct Reinsurance	54									
Net Industrial Life Weekly	55									
Sickness & Accident										
For: Whole Term of Life With Limited Prem.	56									
Handowment Insurance	57									
Extended Term	58									
Supplementary Accident Benefits	59									
Total Sickness & Accident	60									
Deduct Reinsurance	61									
Net Sickness & Accident	62									
Total Net Industrial Insurance	63									
TOTAL NET INSURANCE (ORDINARY AND INDUSTRIAL)	64									

Service 0

404,024

## INSURANCE ACT 1998

[INS 10,330]

## FORM 10C

## VALUATION BALANCE SHEET

NAME OF INSURER: \_\_\_\_\_

NAME OF STATUTORY FUND: \_\_\_\_\_

VALUATION AS AT 31 DECEMBER \_\_\_\_\_

PARTICULARS	Row No	INSIDE FIJI	OUTSIDE FIJI	IN TOTAL
		\$	\$	\$
NET LIABILITIES UNDER POLICIES				
Brokerage earned:				
• On Registers in Fiji	1			
• Other (attach details)	2			
- in any other form	3			
TOTAL NET LIABILITIES [sum 1:2]	4			
Increase (decrease) in policy liabilities	5			
BALANCE OF STATUTORY FUND [sum 3:4]	6			

404,025

Service 0



[The next page is 404,041]

## INSURANCE ACT 1998

[INS 10,335]

## FORM 11

PROVISIONS RELATING TO THE PREPARATION OF STATEMENTS OF LIFE  
INSURANCE BUSINESS

## PART 1

1. Statements prepared under this Form must be prepared, so far as practicable, in tabular form and must be identified by numbers and letters corresponding with those of the items of Part 2 of this Form.
2. Except with respect to rates of premium or contribution, items in statements prepared under this Form must be shown to the nearest dollar.
3. Extra premiums where shown separately in Form 10C must not be included in statements prepared under this Form.
4. Every statement prepared under this Form must be prepared and signed by the actuary appointed under section 61(1) of the Act.
5. For the purposes of this Form —
  - extra premiums** means a charge for any risk not provided for in the minimum contract premium;
  - net premiums** means the premiums for which credit is taken in the valuation in connection with which any statement is prepared; and
  - valuation date** means, in relation to any valuation, the date as at which the valuation is made.
6. Statements must be prepared under this Form both for the total business before deduction in respect of reinsurances of the risks of the insurer, and for those reinsurances.
7. Where the rates of office premiums required to be shown in any statement prepared under this Form are the same as the rates shown in any statement previously so prepared and submitted to the Reserve Bank, it shall be sufficient to refer to the rates so shown in such manner as to enable the Reserve Bank to ascertain the required information.

## PART 2

The Statements to be prepared under this Part are as follows—

1. Statements as to policies issued in Fiji, separately prepared in respect of policies with and without participation in profits, showing—
  - (a) in relation to policies for the whole term of life, the rates of office premiums charged, in accordance with the published tables in use, for new policies giving the rates for decennial ages of entry from 20 to 70 inclusive;
  - (b) in relation to endowment insurance policies, the rates of office premiums charged, in accordance with the published tables in use, for new policies with original terms of 10, 15, 20, 30 and 40 years, giving the rates for ages at entry 20, 30 and 40, but excluding policies under which the age at maturity exceeds 60;
  - (c) in relation to policies specified in the preceding provisions of this item under which a continuous disability benefit is granted, the office premiums for that benefit under new policies, and the conditions which must be fulfilled before a continuous disability benefit—
    - (i) is allowed
    - (ii) ceases to be allowed; and
  - (d) in relation to sinking fund policies the rates of office premiums charged in accordance with the published tables in use for new policies with original terms of

10, 15, 20 and 30 years, provided that, in the case of industrial policies, there must be shown, in lieu of the rates of office premiums charged as specified in the foregoing items, the sums insured by new policies, in accordance with the published tables in use, in return for fixed weekly and monthly office premiums and in addition the sums insured for ages at entry 1, 5, 10 and 15.

2. Statements must be separately prepared in respect of policies with immediate profits, with deferred profits, and without profits, showing in quinquennial groups—

(a) in relation to policies on single lives for the whole term of life—

- (i) the total amount insured (specifying sums insured and reversionary bonuses separately), grouped according to ages attained;
- (ii) the amount per annum, after deducting abatements made by application of bonus, of office premiums payable throughout life, and of the corresponding net premiums, grouped according to ages attained; and
- (iii) the amount per annum, after deducting abatements made by application of bonus, of office premiums payable for a limited number of years, and of the corresponding net premiums, grouped in accordance with the grouping adopted for the purposes of the valuation;

(b) in relation to endowment insurance policies on single lives—

- (i) the total amount insured (specifying sums insured and reversionary bonuses separately), grouped in accordance with the grouping adopted for the purposes of the valuation; and
- (ii) the amount per annum, after deducting abatements made by application of bonus, of office premiums payable and of the corresponding net premiums, grouped in accordance with the grouping adopted for the purposes of the valuation;

(c) in relation to policies specified in the preceding provisions of this item, under which a continuous disability benefit is granted—

- (i) the total amount of continuous disability benefit insured under the policies, grouped in accordance with the grouping adopted for the purposes of the valuation; and
- (ii) the amount per annum, after deducting abatements made by application of bonus, of office premiums payable (including premiums of which payment is, at the valuation date, suspended owing to disability arising from sickness or accident) and the corresponding net premiums, grouped according to the grouping adopted for the purposes of the valuations; and

(d) in relation to sinking fund policies (other than annuity policies)—

- (i) the total amount insured (specifying sums insured and reversionary bonuses separately) grouped according to the number of complete years from the valuation date to the date of maturity of the policies; and
- (ii) the amount per annum, after deducting abatements made by application of bonus, of office premiums payable, and of the corresponding net premiums grouped according to the number of years' payments remaining to be made, provided that—

- (a) in relation to endowment insurance policies or sinking fund policies which will reach maturity in less than 5 years, and which are grouped for the purposes of the valuation according to the years in which the policies will mature for payment, the information required by subparagraphs (b)(i), (c)(i) and (d)(i) must be given for each year instead of quinquennial groups; and

- (b) where the net premiums in respect of policies for the whole term of life with premiums payable for a limited number of years, or the net premiums in respect of endowment insurance policies, are grouped for the purposes of the valuation otherwise than according to the number of years' payments remaining to be made, or where the sums insured under endowment insurance policies are grouped for the purposes of the valuation otherwise than according to the years in which the policies will mature for payment or in which they are assumed to mature if earlier than the true year, then, in any such case, the valuation constants and an explanation of the method by which they are calculated must be given for each group, and, in the case of the sums insured under endowment insurance policies, a statement must also be given of the amount insured maturing for payment in each of the 2 years following the valuation date.
- 3. Statements in relation to immediate annuities on single lives for the whole term of life and annuities which were originally deferred but which have been entered into before or on the valuation date, separately prepared in respect of annuities on male and female lives, showing in quinquennial age groups the total amount of those annuities, grouped according to ages attained at the valuation date.
- 4. Statements in relation to deferred annuities which have not been entered upon before or on the valuation date, separately prepared in respect of annuities on male and female lives, showing in quinquennial groups—
  - (a) the total number of those annuities, grouped according to the number of years from the valuation date to the date the annuity is to be entered upon, and either—
    - (i) the average age (obtained by weighting according to the amount of the annuity) attained at the valuation date by the prospective annuitants; or
    - (ii) the valuation constants and an explanation of the method by which they are calculated; and
  - (b) the amount per annum of office premiums payable and of the corresponding net premiums, grouped according to the number of years' payments remaining to be made.
- 5. Statements in relation to sinking fund policies, being immediate annuity policies, showing in quinquennial groups the total amount of those annuities, grouped according to the number of years from the valuation date to the date the annuities cease to be payable.
- 6. Statements showing in quinquennial groups the amount per annum of continuous disability benefits payable at the valuation date in respect of disability of more than one year's duration, grouped according to ages attained.
- 7. Statements showing the total amount of continuous disability benefit paid and premiums waived in each of the 5 years immediately preceding the valuation date.

## INSURANCE ACT 1998

[INS 10,340]

## FORM 12A

## PROFIT AND LOSS STATEMENT

NAME OF BROKER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
<b>REVENUE</b>				
Brokerage earned:				
- as commission	1			
- as fees	2			
- in any other form	3			
Total brokerage [sum 1:3]	4			
Interest income earned	5			
Other investment income	6			
Consultancy fees or commissions	7			
Other revenue (attach details)	8			
TOTAL REVENUE FOR THE YEAR [sum 4:8]	9			
<b>EXPENSES</b>				
Salaries and wages	10			
Directors' fees	11			
PI and Fidelity guarantee insurance	12			
Rent	13			
Travel	14			
Audit fees	15			
Training	16			
Other expenses (attach details)	17			
TOTAL REVENUE FOR THE YEAR [sum 10:17]	18			
Abnormal/extraordinary items (attached details)	19			
PROFIT (LOSS) BEFORE TAX [9-18+19]	20			
Taxation expense	21			
NET PROFIT (LOSS) FOR THE YEAR [20-21]	22			
<b>DISTRIBUTION</b>				
RETAINED PROFIT (LOSS) brought forward from last period	23			

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DIVIDEND/CAPITAL WITHDRAWALS (paid or proposed)	24			_____
OTHER TRANSFERS (attach details)	25			_____
RETAINED PROFIT (LOSS) carried forward to the next period	26	[22+23- 24+25]		_____

Signature .....  
(Principal Officer/Proprietor)

Signature .....  
(Auditor)

Date ...../ ...../ .....

Date ...../ ...../ .....

404,045

Service 0

[The next page is 404,061]

## INSURANCE ACT 1998

[INS 10,345]

## FORM 12B

## BALANCE SHEET

NAME OF INSURER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
<b>ASSETS</b>				
Cash on hand	1	_____	_____	_____
Insurance broking account	2	_____	_____	_____
Outstanding premiums				
- 30 days and under	3	_____	_____	_____
- over 30 days but less than 3 months	4	_____	_____	_____
- over 3 months	5	_____	_____	_____
Prepayments	6	_____	_____	_____
Sundry debtors	7	_____	_____	_____
Other (attach details)	8	_____	_____	_____
<u>Sub-total</u> [sum 1:8]	9	_____	_____	_____
<b>LOANS</b> *(attach supporting schedules)				
Loans:				
- secured	10	_____	_____	_____
- unsecured	11	_____	_____	_____
Loans to related persons:				
- secured	12	_____	_____	_____
- unsecured	13	_____	_____	_____
Other (attach details)	14	_____	_____	_____
<u>Sub-total (loans)</u> [sum 10:14]	15	_____	_____	_____
<b>INVESTMENTS</b> *(attach supporting schedules)				
Land and buildings	16	_____	_____	_____
Government securities	17	_____	_____	_____
Bank deposits	18	_____	_____	_____
Debentures with				
- related persons	19	_____	_____	_____
- non related persons	20	_____	_____	_____

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Service 0



PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
Shares in:				
- related persons	21			
- non related persons	22			
Other (attach details)	23			
Sub-total (investments) [sum 16:23]	24			
<b>FIXED ASSETS</b>				
Motor Vehicles	25			
Furniture and fittings	26			
Computer hardware	27			
Computer software	28			
Other (attach details)	29			
Sub-total (fixed assets) [sum 25:29]	30			
<b>OTHER ASSETS</b>				
Amounts due from related persons	31			
Other amounts due	32			
Future income tax benefit	33			
Goodwill	34			
Establishment costs	35			
Other (attach details)	36			
Sub-total (other assets) [sum 31:36]	37			
<b>TOTAL ASSETS</b> [sum 9+15+24+30+37]	38			
<b>LIABILITIES</b>				
Borrowings:				
- borrowings from related persons	39			
- other borrowings	40			
Overdraft	41			
Other (attach details)	42			
Sub-total (loans) [sum 39:42]	43			
<b>PROVISIONS</b>				
Taxation	44			
Dividends/ proprietor withdrawals	45			
Doubtful debts	46			
Other (attach details)	47			
Sub-total (provisions) [sum 44:47]	48			

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
<b>OTHER LIABILITIES</b>				
Amounts due:				
- to insurers	49			
- to reinsurers	50			
- to related persons	51			
Sundry creditors	52			
Other (attach details)	53			
Sub-total (other liabilities) [sum 49:53]	54			
<b>TOTAL LIABILITIES</b> [sum 43+48+54]	55			
<b>NET ASSETS</b> [38-55]	56			
CONTINGENT LIABILITIES	57			
<b>OWNERS' FUND</b>				
Authorised capital	58			
Paid-up capital	59			
Retained profits (loss)	60			
Balanced of head office account	61			
Other (attach details)	62			
<b>TOTAL OWNERS' FUNDS</b> [sum 58:62]	63			

Signature .....  
(Principal Officer/Proprietor)

Signature .....  
(Auditor)

Date ...../...../.....

Date ...../...../.....

## INSURANCE ACT 1998

[INS 10,350]

## FORM 12C

## INSURANCE BROKING ACCOUNT

NAME OF BROKER \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

PARTICULARS	Row No	GENERAL INSURANCE BUSINESS \$	LIFE INSURANCE BUSINESS \$	TOTAL INSURANCE BUSINESS \$
<b>BROUGHT FORWARD FROM LAST YEAR</b>	1	_____	_____	_____
<b>MONEY RECEIVED DURING THE YEAR</b>				
Premiums from or on behalf of insureds or intending insureds for or on account of licensed insurers	2	_____	_____	_____
Premiums from or on behalf of insureds or intending insureds for or on account of unlicensed insurers	3	_____	_____	_____
Claims moneys from or on behalf of licensed insurers for or on account insureds	4	_____	_____	_____
Claims moneys from or on behalf of unlicensed insurers for or on account of insureds	5	_____	_____	_____
Interest	6	_____	_____	_____
Other (attach details)	7	_____	_____	_____
<b>TOTAL MONEYS RECEIVED</b> [sum 2:7]	8	_____	_____	_____
<b>MONEY WITHDRAWN DURING THE YEAR</b>				
For payments to or on behalf of licensed insurers	9	_____	_____	_____
For payments to or on behalf of unlicensed insurers	10	_____	_____	_____
For payments to or on behalf of an insured or intending insured	11	_____	_____	_____
For payments to self (attach details)	12	_____	_____	_____
For repayments of moneys paid into the account in error	13	_____	_____	_____
Payments approved by the Reserve Bank under section 65(4)	14	_____	_____	_____
<b>TOTAL MONEYS WITHDRAWN</b> [sum 9:14]	15	_____	_____	_____
<b>BALANCE OF ACCOUNT AT YEAR END</b> [1+8-15]	16	_____	_____	_____
[NOTE THAT ROW 16 MUST EQUAL FORM 12B, Row 2]				

Signature .....

(Principal Officer/Proprietor)

Date: ..... / ..... / .....

Signature .....

(Auditor)

Date: ..... / ..... / .....

404,065

Service 0

## INSURANCE ACT 1998

[INS 10,355]

## FORM 12D

## INSURANCE BROKING ACCOUNT

NAME OF BROKER \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

AGE ANALYSIS OF INSURANCE BROKING ACCOUNT	Row No	GENERAL INSURANCE BUSINESS \$	LIFE INSURANCE BUSINESS \$	TOTAL INSURANCE BUSINESS \$
<b>BALANCE OF ACCOUNT AT END OF YEAR (FROM FORM 12C)</b>	1	_____	_____	_____
<b>MADE UP OF:</b>				
Amounts due to <u>licensed</u> insurers:				
(a) 30 days or less	2	_____	_____	_____
(b) over 30 days but not more than 3 months	3	_____	_____	_____
(c) 3 months and over	4	_____	_____	_____
from date of receipt				
Amounts due to <u>unlicensed</u> insurers:				
(a) 30 days or less	5	_____	_____	_____
(b) over 30 days but not more than 3 months	6	_____	_____	_____
(c) 3 months and over	7	_____	_____	_____
from date of receipt				
Amounts due to insureds or intending insureds:				
(a) 7 days or less	8	_____	_____	_____
(b) over 7 days	9	_____	_____	_____
from date of receipt				
Amounts held where the risk has not been accepted	10	_____	_____	_____
Amounts standing to the credit of the broker	11	_____	_____	_____
Other (attach details)	12	_____	_____	_____
<b>TOTAL</b> [sum 2:12]	13	_____	_____	_____
[NOTE THAT ROW 1 MUST EQUAL ROW 13]				

Signature .....

(Principal Officer/Proprietor)

Signature .....

(Auditor)

Date: ..... / ..... / .....

Date: ..... / ..... / .....

[The next page is 404,081]

## INSURANCE ACT 1998

[INS 10,360]

## FORM 12E

## STATEMENT OF PREMIUMS

NAME OF BROKER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

PARTICULAR	Row No	LOCATION OF INSURERS		TOTAL \$
		INSIDE FIJI \$	OUTSIDE FIJI \$	
<b>PREMIUMS HANDLED DURING YEAR</b>				
<u>General Insurance Business</u>				
Fire	1	_____	_____	_____
Householders	2	_____	_____	_____
Motor vehicle	3	_____	_____	_____
Marine Hull	4	_____	_____	_____
Marine Cargo	5	_____	_____	_____
CIT and Burglary	6	_____	_____	_____
Motor - CTP	7	_____	_____	_____
Personal Accident	8	_____	_____	_____
Professional Indemnity	9	_____	_____	_____
Public Liability	10	_____	_____	_____
Workers Compensation	11	_____	_____	_____
Medical	12	_____	_____	_____
Term Life	13	_____	_____	_____
Other	14	_____	_____	_____
Sub-Total [sum 1:14]	15	_____	_____	_____
<u>Life Insurance Business</u>				
Whole of Life	16	_____	_____	_____
Endowment	17	_____	_____	_____
Term Life	18	_____	_____	_____
Other	19	_____	_____	_____
Sub-total [sum 16:19]	20	_____	_____	_____
<b>TOTAL PREMIUMS HANDLED</b> [15+20]	21	_____	_____	_____
Brokerage received or receivable on premiums handled	22	_____	_____	_____

404,081

Service 0



Signature .....	Signature .....
(Principal Officer/Proprietor)	(Auditor)
Date: ..... / ..... / .....	Date: ..... / ..... / .....

## INSURANCE ACT 1998

[INS 10,365]

## FORM 13A

## PROFIT AND LOSS STATEMENT

NAME OF BROKER \_\_\_\_\_

QUARTER ENDING: \_\_\_\_\_

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
<b>REVENUE</b>				
Brokerage earned:				
- as commission	1			
- as fees	2			
- in any other form	3			
Total brokerage [sum 1:3]	4			
Interest income earned	5			
Other investment income	6			
Consultancy fees or commissions	7			
Other revenue (attach details)	8			
TOTAL REVENUE FOR THE QUARTER [sum 4:8]	9			
<b>EXPENSES</b>				
Salaries and wages	10			
Directors' fees	11			
PI and Fidelity guarantee insurance	12			
Rent	13			
Travel	14			
Audit fees	15			
Training	16			
Other expenses (attach details)	17			
TOTAL EXPENSES FOR THE QUARTER [sum 10:17]	18			
Abnormal/extraordinary items (attach details)	19			
PROFIT (LOSS) BEFORE TAX [9-18+19]	20			
Taxation expense	21			
NET PROFIT (LOSS) FOR THE QUARTER [20-21]	22			
<b>DISTRIBUTION</b>				
RETAINED PROFIT (LOSS) brought	23			

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Service 0

PARTICULARS	Row No	INSIDE FIJI \$	OUTSIDE FIJI \$	IN TOTAL \$
forward from last period				
DIVIDEND/CAPITAL WITHDRAWALS	24			_____
(paid or proposed)				
OTHER TRANSFERS (attach details)	25			_____
RETAINED PROFIT (LOSS) carried	26			_____
forward to next period <small>[22+23-24+25]</small>				_____

Signature ..... Date: ..... / ..... / .....

(Principal Officer/Proprietor)

## INSURANCE ACT 1998

[INS 10,370]

## FORM 13B

## INSURANCE BROKING ACCOUNT

NAME OF BROKER: \_\_\_\_\_

QUARTER ENDING: 31 DECEMBER \_\_\_\_\_

PARTICULARS	Row No	GENERAL INSURANCE BUSINESS \$	LIFE INSURANCE BUSINESS \$	TOTAL INSURANCE BUSINESS \$
<b>BROUGHT FORWARD FROM LAST QUARTER</b>	1	_____	_____	_____
<b>MONEY RECEIVED DURING THE QUARTER</b>				
Premiums from or on behalf of insureds or intending insureds for or on account of licensed insurers	2	_____	_____	_____
Premiums from or on behalf of insureds or intending insureds for or on account of unlicensed insurers	3	_____	_____	_____
Claims moneys from or on behalf of licensed insurers for or on account of insureds	4	_____	_____	_____
Claims moneys from or on behalf of unlicensed insurers for or on account of insureds	5	_____	_____	_____
Interest	6	_____	_____	_____
Other (attach details)	7	_____	_____	_____
<b>TOTAL MONEYS RECEIVED</b> <small>[sum 2:7]</small>	8	_____	_____	_____
<b>MONEYS WITHDRAWN DURING THE QUARTER</b>				
For payments to or on behalf of licensed insurers	9	_____	_____	_____
For payments to or on behalf of unlicensed insurers	10	_____	_____	_____
For payments to or on behalf of an insured or intending insured	11	_____	_____	_____
For payments to self (attach details)	12	_____	_____	_____
For repayments of moneys paid into the account in error	13	_____	_____	_____
Payments approved by the Reserve Bank under section 65(4)	14	_____	_____	_____
<b>TOTAL MONEYS WITHDRAWN</b> <small>[sum 9:14]</small>	15	_____	_____	_____
<b>BALANCE OF ACCOUNT AT QUARTER END</b> <small>[1-8-15]</small>	16	_____	_____	_____

404,085

Service 0

Signature ..... Date: ..... / ..... / .....  
(Principal Officer/Proprietor)

## INSURANCE ACT 1998

[INS 10,375]

## FORM 13C

## INSURANCE BROKING ACCOUNT

NAME OF BROKER \_\_\_\_\_

QUARTER ENDING: \_\_\_\_\_

AGE ANALYSIS OF INSURANCE BROKING ACCOUNT	Row No	GENERAL INSURANCE BUSINESS \$	LIFE INSURANCE BUSINESS \$	TOTAL INSURANCE BUSINESS \$
<b>BALANCE OF ACCOUNT AT END OF QUARTER (FROM FORM 13B)</b>	1	_____	_____	_____
<b>MADE UP OF:</b>				
Amounts due to <u>licensed</u> insurers:				
(a) 30 days or less	2	_____	_____	_____
(b) over 30 days but not more than 3 months	3	_____	_____	_____
(c) 3 months and over from date of receipt	4	_____	_____	_____
Amounts due to <u>unlicensed</u> insurers:				
(a) 30 days or less	5	_____	_____	_____
(b) over 30 days but not more than 3 months	6	_____	_____	_____
(c) 3 months and over from date of receipt	7	_____	_____	_____
Amounts due to insureds or intending insureds:				
(a) 7 days or less	8	_____	_____	_____
(b) over 7 days	9	_____	_____	_____
from date of receipt				
Amounts held where the risk has not been accepted	10	_____	_____	_____
Amounts standing to the credit of the broker	11	_____	_____	_____
Other (attach details)	12	_____	_____	_____
<b>TOTAL</b> [sum 2:12]	13	_____	_____	_____
[NOTE THAT ROW 1 MUST EQUAL ROW 13]				

Signature ..... Date: ..... / ..... / .....  
(Principal Officer/Proprietor)

[The next page is 404,101]





Date: ..... / ..... / .....

Signature: \_\_\_\_\_  
(Principal Officer, Proprietor)

Service 0

404,102

## INSURANCE ACT 1998

[INS 10,385]

## FORM 14

## STATEMENT OF UNCLAIMED MONEYS

NAME OF INSURER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

POLICY NUMBER	LIFE INSURED SURNAME, GIVEN NAME(S), ADDRESS	POLICY OWNER SURNAME, GIVEN NAME(S), ADDRESS	AMOUNT DUE	DATE AMOUNT BECAME DUE

Signature: \_\_\_\_\_

(Principal Officer)

Date: . . . . . / . . . . . / . . . . .

## INSURANCE ACT 1998

[INS 10,390]

## FORM 15

## STATEMENT OF MONEYS PAID

NAME OF INSURER: \_\_\_\_\_

YEAR ENDING: 31 DECEMBER \_\_\_\_\_

POLICY NUMBER	CLAIMANT: SURNAME, GIVEN NAME(S), ADDRESS	DATE CLAIMED	DATE PAID	AMOUNT PAID

Signature: .....  
(Principal Officer)

Date: ..... / ..... / .....

## INSURANCE ACT 1998

## FORM 16

## MEMORANDUM OF TRANSFER

[INS 10,395]

Date of Transfer	Signature of transferor	Signature of witness of transferor*	TRANSFeree				Signature of witness of transferee*	Date of registration of transfer by insurer	Signature of principal officer of insurer
			Name in full	Address	Occupation	Father's Name			

\* NB If the transferor or transferee is illiterate or unable to read English, he or she must sign the assignment or after his or her thumb impression to this Memorandum in the presence of a Magistrate or Justice of the Peace. In such cases the Magistrate or Justice of the Peace should certify on the Memorandum that the contents of the Memorandum were fully explained in the language understood by the transferor or transferee and that the signature or thumb impression was affixed after the transferor or transferee appeared to the Magistrate or Justice of the Peace to thoroughly understand the contents of the Memorandum.

## INSURANCE ACT 1998

[INS 10,400]

## FORM 17

## APPOINTMENT WHERE NOMINEE IS A MINOR

I, ....., the son/daughter\* of \*

*Name in full*

..... of .....

*Name of father*

..... the holder of

*Address of person making appointment*

ordinary life insurance Policy No .....

appoint ..... of .....

*Name of appointee*

..... son/daughter\* of

*Address of appointee*

....., as the person to receive \*

*Name of father of appointee*

the money secured thereby in the event of my death during the minority of my nominee,

....., of .....

*Name of nominee*

.....

*Address of nominee*

son/daughter\* of .....

*Name of father of nominee*

Signed at ..... this .....

day of .....

.....

*Signature of policy owner**Signature of witness*

.....

*Name of witness*

.....

*Address of witness*

I, ....., the above named appointee hereby signify my consent to be appointed as aforesaid and to hold the moneys payable under the aforesaid Policy No ..... for the benefit of:

.....

*Name of minor nominee*

Signed at ..... this .....

day of ....., .....

.....  
*Address of witness*.....  
*Signature of appointee*.....  
*Signature of Witness*.....  
*Name of Witness*

\* delete whichever not applicable.

[The next page is 430,001]