



# BROKER APPOINTMENT LETTER

**Insurer:**  
 Lombard Insurance Company Limited  
 (Reg. No. 1990/001253/06) FSP no. 1596

**Risk and Underwriting Managers:**  
 Turnberry Management Risk Solutions (Pty) Ltd  
 (Reg no : 2007/026488/07) FSP no. 36571

Telephone: 011 677 9891  
 Fax: 086 676 0777  
 Physical Address: 4 Osborne Lane, Bedfordview, 2007  
 Postal Address: Private Bag X2, Gardenview, 2047

Policy Number:

Please complete and return by fax to: 086 676 0777 | Email to: admin@turnberry.co.za

I, \_\_\_\_\_ I.D.No.  hereby appoint:

Broker Name:

Broker Code:

Brokerage Name:

Brokerage Address:

Code:

Business Tel Number:

Cell Phone Number:

Email Address:

to represent me in all matters pertaining to Turnberry. I hereby authorise Turnberry to provide my representative with information relating to my Policy/ies held with Turnberry.

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