



GL Broking Enterprises c.c.
(CK 93/07502/23)
T/As

GARY LEECH

Insurance Brokers

A Member of the
G.L Group of Companies

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GARY LEECH INSURANCE BROKERS MANDATE FOR (Client Name) _____

I hereby confirm the appointment of Gary Leech Insurance Brokers to conduct:

Type of Financial Needs Analysis Required (please indicate which service you require)		
Comprehensive Advice	This is where reasonable steps are taken to obtain appropriate and available information from you about your financial situation, financial product experience and objectives An analysis based on this information will be done and financial products appropriate to your risk profile and needs will be identified and recommended to you.	
Limited/Focused Advice	At your request a specific analysis for some of your requirements/needs is performed based on information received from you. You accept there may be limitations of the appropriateness of the advice as other needs have not been taken into account. You have to therefore consider this advice based on your own objectives, financial situation and particular needs.	Please initial here:
	Please indicate which needs/objectives the FSP is required to review or advise on: <u>I IDENTIFIED MY OWN INSURANCE NEEDS AND ADVISED GARY LEECH INSURANCE BROKERS OF SUCH</u>	
No Advice	I confirm that the FSP has alerted me to the risks of not taking advice on the appropriateness of products I have requested. The products recommended are appropriate to my needs, objectives and circumstances.	

Appointment of Financial Advisor

I hereby authorise the FSP to obtain all information in respect of my policies held at various financial institutions. I understand that this will entitle the FSP to any future review fees/commission that may be payable under our various policies.

Confirmation of Disclosures

I confirm that I have received the Intermediary Disclosure document and a copy of the Statutory Notice and that the product recommended has been explained to me as well as any costs/fees/commissions and contractual obligations associated with the product.

Access to Information and Confidentiality

Gary Leech Insurance Brokers, acknowledges that in the course of rendering services in terms of this Mandate, shall come into possession of information of a confidential nature. Gary Leech Insurance Brokers, will not disclose any information of a confidential nature to third parties to use unless instructed by me.

Signature of Client:		Date:	
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