BROKER APPOINTMENT LETTER | 2016





Policy Number:	

Telephone: Fax: Physical Address: Postal Address: 0861 000 509 0861 000 508 4 Osborne Land

4 Osborne Lane, Bedforview, 2007 Private Bag X2, Gardenview, 2047

Please complete and return by fax to: 086 649 0417 | Email to: admin@turnberry.co.za

I,	I.D.No.		hereby appo	oint:		
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:				