



OUTSURANCE MOTOR BODY REPAIR SELF-ASSESSMENT (JULY 2021)

This document serves as a check-list against the Outsurance Motor Body Repair Technical Requirements (July 2021). Please complete this form and submit along with your company profile to serviceproviders@out.co.za.

1. Reception / Facilities Requirements

1.1 Does the MBR have a dedicated, staffed, clean, usable reception area	Yes <input type="checkbox"/>	No <input type="checkbox"/>		Photo Supplied <input type="checkbox"/>
Notes: _____				
1.2 Does the MBR have clearly marked and safe client parking	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Quantity: _____				
1.3 Are all health and safety criteria in place	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Notes: _____				
1.4 Are all fire extinguishers installed, demarcated and serviced according to the health and safety standards	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Notes: _____				
1.5 Are there clearly visible emergency exit signs displayed	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Notes: _____				
1.6 Is all necessary PPE equipment available and in working order	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Notes: _____				

2. Corporate Governance Requirements

2.1 Does the MBR have the following valid documents (Please attach all required documents)

2.1.1 BBBEE Certificate	Yes <input type="checkbox"/>	No <input type="checkbox"/>		Document Supplied <input type="checkbox"/>
Notes: _____				
2.1.2 VAT Registration Certificate	Yes <input type="checkbox"/>	No <input type="checkbox"/>		Document Supplied <input type="checkbox"/>
Notes: _____				
2.1.3 CIPC certificate	Yes <input type="checkbox"/>	No <input type="checkbox"/>		Document Supplied <input type="checkbox"/>
Notes: _____				
2.1.4 Tax Clearance certificate / deferred payment agreement with SARS	Yes <input type="checkbox"/>	No <input type="checkbox"/>		Document Supplied <input type="checkbox"/>
Notes: _____				

2.2 Does the MBR have the following with regards to MIBCO: (Please attach all required documents)

- 2.2.1 Letter of good standing Yes No Document Supplied
Notes: _____
- 2.2.2 Letter of intent Yes No Document Supplied
Notes: _____
- 2.2.3 Letter of exemption or proof of confirmation of application Yes No Document Supplied
Notes: _____
- 2.2.4 MIBCO Registration number Yes No Document Supplied
Notes: _____

2.3 Does the MBR have the following motor trader's insurance policies in place: (Please supply reference for policy below)

- 2.3.1 Motor trader's internal insurance policy Yes No
Notes: _____
- 2.3.2 Motor trader's external insurance policy Yes No
Notes: _____
- 2.3.3 Motor trader's 3rd party insurance policy Yes No
Notes: _____

- 2.4 Does the MBR have a Workman's Compensation / RMA (Rand Mutual Assurance) number** Yes No
Notes: _____

2.5 Does the MBR have the following liability insurance policies in place: (Please supply reference for policy below)

- 2.5.1 Product liability insurance policy Yes No
Notes: _____
- 2.5.2 Public liability insurance policy Yes No
Notes: _____

- 2.6 Does the MBR carry a minimum 3 year warranty on workmanship, paint and a manufactures warranty on parts (Please attach document)** Yes No
Notes: _____ Document Supplied

3. Work Shop Requirements

3.1 Does the MBR have the following dedicated well lit areas:

- | | | |
|---|-----------------|--|
| 3.1.1 Panel beating bay
Quantity: _____ | minimum 300 Lux | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 3.1.2 Stripping and assembly bay
Quantity: _____ | minimum 300 Lux | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 3.1.3 Paint preparation bay
Quantity: _____ | minimum 300 Lux | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 3.1.4 Polishing bay
Quantity: _____ | minimum 500 Lux | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 3.1.5 InMBRection bay
Quantity: _____ | minimum 500 Lux | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 3.1.6 Delivery bay
Quantity: _____ | minimum 300 Lux | Yes <input type="checkbox"/> No <input type="checkbox"/> |

3.2 Does the MBR have a dedicated parts store room

Yes No

Quantity: _____

4. Paint Shop Requirements

4.1 Does the MBR have a fully functional Spray booth:

Yes No

Quantity: _____

- | | |
|---|---|
| 4.1.1 Intake and exhaust system operational:
Notes: _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 4.1.2 Air filters in place and functional
Notes: _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 4.1.3 Heating system operational
Notes: _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 4.1.4 Control system, lighting switch, timer switch, temperature gauge and pressure gauge operational
Notes: _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 4.1.5 Does the spray booth have approved compliance certificate (Please attach document)
Notes: _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> Document Supplied <input type="checkbox"/> |

4.2 Paint Mixing room:

- | | |
|---|--|
| 4.2.1 Mixing room mixer fully functional
Notes: _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 4.2.2 Mixing room scale calibrated and functional
Notes: _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 4.2.3 Mixing room computer functional
Notes: _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> |

4.3 Spray painting equipment:

- 4.3.1 Compressor fully functional, with inline liquid and particle filter attached Yes No
Notes: _____
- 4.3.2 Is the compressor in a designated area Yes No
Notes: _____
- 4.3.3 Spray guns in fully functional and correct type for vehicle paint Yes No
Notes: _____
- 4.3.4 Air lines in good condition Yes No
Notes: _____
- 4.3.5 Cleaning Station for paint equipment functional Yes No
Notes: _____
- 4.3.6 Are there suitable and adequate paint stands Yes No
Notes: _____
- 4.3.7 Are there separate guns for : Primer, Colour, Polyester and Rubberizing Yes No
Notes: _____
- 4.3.8 Is there under floor/side extraction in the paint preparation bay or a primer bay with extraction and filtration Yes No
Notes: _____
- 4.3.9 Are there Spray painters suits available that ensures protection from clothes damage and chemical contact Yes No
Notes: _____
- 4.3.10 Are there disposable reMBRiratory masks available for every new job Yes No
Notes: _____

5. Panelbeating Bay Requirements

- 5.1 Does the MBR have a fully functional chassis pulling machine Yes No
Quantity: _____

5.2 Does the MBR comply to the following chassis machine requirements:

- 5.2.1 Hydraulic equipment operational Yes No
Notes: _____
- 5.2.2 Measuring system operational Yes No
Quantity: _____
- 5.2.3 Variety of pulling clamps available minimum 5 Yes No
Quantity: _____
- 5.2.4 Variety of pulling chains available minimum 5 Yes No
Quantity: _____
- 5.2.5 Vehicle holding clamps functional minimum 4 Yes No
Quantity: _____

6. Staff Requirements

6.1 Does the MBR have following staff on their payroll:

- 6.1.1 Qualified Panelbeater Yes No
Quantity: _____
- 6.1.2 Qualified Spray Painter Yes No
Quantity: _____
- 6.1.3 Dedicated Quality Controller Yes No
Quantity: _____
- 6.1.4 Polishing Technician Yes No
Quantity: _____
- 6.1.5 Strip and Assembling Technician Yes No
Quantity: _____
- 6.1.6 Paintshop Prep Technician Yes No
Quantity: _____
- 6.1.7 Dedicated Cleaner Yes No
Quantity: _____
- 6.1.8 Vehicle Estimator Yes No
Quantity: _____
- 6.1.9 Customer Liaison officer Yes No
Quantity: _____
- 6.1.10 Receptionist Yes No
Quantity: _____

Declaration

I hereby declare that I am duly authorised to sign this declaration.

I warrant that all information contained in this document and any supporting documentation is accurate, true, complete and in no manner misleading.

I acknowledge that any fraudulent information, misrepresentation or non-disclosure of material information will result in my application to be included in the OUTsurance network of service providers being dismissed.

MBR Name:

CK Reg Number:

Name:

Designation:

Date:

Signature: