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PREAMBLE

1. This Manual on the operations of the Yellow Card Scheme and Reinsurance Pool was produced in accordance with the decision of the 12th Council of Bureaux Meeting, which was held in Harare, Zimbabwe from 17th to 18th September 1998. The Manual combines the Procedures Manual on the Use of Yellow Card revised in 2006 and 2010 together with other Technical Instruments governing the Operations of the Yellow Card Scheme with a view to make it more users friendly and operationally effective in addressing the current challenges the Yellow Card administrators may face.

2. This Revised Yellow Card Operation Manual incorporate changes and developments in the Yellow Card Scheme which include, among others; the implementation of the enhanced security feature Yellow Card Books, the revised franchise excess of loss limit and Pool’s Reinsurance commission on the premium returns, and various Council of Bureaux decision on inter-bureaux claims reimbursement, increase on the additional property damage cover, and the issuance of Yellow Card covers to non-resident motorists.

3. The objective of issuing a revised manual is to provide a comprehensive and an up to date guideline to be used by National Bureaux and their member insurance companies in their day-to-day activities of Yellow Card operations, specifically in issuing Yellow Cards, handling and settlement of claims and the management of the operations of the Reinsurance Pool.


5. The Manual contains the following Sections: the Preamble, the General Underwriting Directives, Underwriting Procedures, the Claims General Directives, Claims Procedures, Reinsurance Pool Registers and Accounting, Obligations and Security. It also includes specimen document formats on underwriting, claims handling and settlement, Re-insurance Pool, and Accounting Registers/Forms for use by National Bureaux and the Pool Managers.
6. This Manual is produced in loose-leaf and bounded form for ease of substitution of amended pages in the event changes, corrections and additions are made on the directives and procedures of the operations of the Scheme.
SECTION I

1. UNDERWRITING-GENERAL DIRECTIVE

1.1 The Yellow Card Scheme

1.1.1 The third party motor vehicle insurance scheme, commonly known as the Yellow Card, is a regional Third Party insurance card system recognised by participating states party to the Yellow Card Scheme as evidence of guarantee in compliance with the national laws or regulations governing third party liability in respect of motor vehicle accidents.

1.1.2 The scheme provides the following covers:

(a) The minimum compulsory third party motor vehicle insurance cover as required by the laws in force in the territories of each of the participating states party to the Yellow Card Scheme;

(b) Third party property damage, in those states who are party to the Yellow Card Scheme where such cover may not be included in the minimum compulsory cover, subject to the limit of indemnity; and

(c) Extra benefit for Emergency Medical Treatment Expenses cover to travelling motorists and passengers a limited sum of indemnity.

1.2 The Yellow Card

1.2.1 The Yellow Card is an equivalent of a policy of insurance recognised as a valid certificate of motor insurance and evidence of a guarantee to provide the compulsory minimum insurance cover required by the laws of the participating states party to the Scheme, in which accidents would have occurred and caused by vehicles from other member participating countries.

1.2.2 The Card is standard and uniform in appearance throughout the Yellow Card Scheme region so that it can be readily identified and accepted as a certificate of insurance within the participating countries.

1.3 Participation in the Scheme
1.3.1 The Scheme operates between the participating states that would have fulfilled the requirements for implementation of the Scheme and have signed the Inter-Bureaux Agreement and the Constitution on the Establishment of the Yellow Card Reinsurance Pool.

1.3.2 The current participating states of the Scheme are BURUNDI, DJIBOUTI, DEMOCRATIC REPUBLIC OF CONGO (DRC), ERITREA, ETHIOPIA, KENYA, MALAWI, RWANDA, SUDAN, TANZANIA, UGANDA, ZAMBIA, and ZIMBABWE.

1.4 Eligibility

Any legal or natural person is eligible to be issued with a Yellow Card if the vehicle to be covered by the Yellow Card is insured under a current primary policy. A member insurer of a National Bureau shall have issued the primary policy. Where this requirement cannot be met, a Yellow Card shall not be issued.

1.5 Operations of the Scheme

1.5.1 The practical day-to-day operation of the Scheme is the responsibility of the National Bureau in each participating state. The National Bureau has the following functions:

(a) It acts as the Issuing Agency: it is responsible for obtaining/supplies of Yellow Card Books/Pads from the printers and making them available to member insurance companies for issuing;

(b) It acts as the Handling Agency: It deals with claims under the Yellow Card Scheme which occur inside its own country, as well as coordinating the claims which occur outside its own country;

(c) It handles activities for the Reinsurance Pool of the Yellow Card Scheme; and

(d) It serves as an Information Bureau.

1.5.2 Each National Bureau is automatically a member of the Council of Bureaux, which is charged with the overall function of the Yellow Card Scheme.

1.6 Yellow Card Unit
A National Bureau and its member insurers shall establish a section or unit clearly marked and conspicuously displayed with “YELLOW CARD SCHEME” to specifically administer and control the operations and activities of the Scheme.

1.7 Information Bureau

1.7.1 The National Bureau shall serve as an Information Bureau in their respective countries to assist accident victims who suffer injury/death and/or damage to their property in motor accidents caused by visiting or transiting vehicles not covered under the Scheme.

1.7.2 The National Bureau may charge a reasonable fee, for services rendered as an Information Bureau, to be fixed by the National Bureau, in consultation with its members.

1.8 Communications

1.8.1 All communications between the Handling and Issuing Bureau shall be made in the language (French or English) of the addressee to facilitate quick action.

1.8.2 A National Bureau receiving documents prepared in any language other than French or English shall return to the sender such documents for them to be prepared in the COMESA official language of French or English.

1.8.3 A National Bureau shall make use of the e-mail services where available in corresponding among them and with the Secretariat and the Reinsurance Pool.

1.9 The Yellow Card Scheme Reinsurance Pool

The Yellow Card Scheme Reinsurance Pool is an arrangement established by the Council of Bureaux and their members to enhance the efficacy and profitability of the Yellow Scheme. The Pool and National Bureaux/primary insurance companies shall carry out the following:

Reinsurance Cover

1.9.1 The Pool shall provide reinsurance cover for loss and/or damage over and above the claims settlement authority limit
of the National Bureau/primary insurance companies on
Yellow Cards issued.

**Premium Cession**

1.9.2 Issuing/primary insurance companies shall cede 30 per cent
of the premium earned on each and every Yellow Card
issued to the Reinsurance Pool.

**Outstanding Premium**

1.9.3 The Pool Manager shall deduct from the claims payable to a
Handling Bureau, premium outstanding for more than ninety
days from the date of issue of the Yellow Cards.

**Clearing Facility**

1.9.4 The Pool shall provide a clearing facility for reimbursement
of claims between the Handling and Issuing bureaux, for
claim payments below or equal to the claims authority
settlement limits of the National Bureau/primary insurance
companies issuing Cards.

**Premium Cession Commission**

1.9.5 The Pool shall pay the issuing/primary insurance company
commission of 5% on the premiums ceded to the
Reinsurance Pool.

**Statistical Data**

1.9.6 The Pool Managers shall maintain detailed statistical data on
Yellow Card underwriting and claims from the regular reports
submitted to the Pool by National Bureaux.
SECTION II

2. UNDERWRITING - PROCEDURES

2.1 Policies Applicable

The types of motor insurance policies applicable for the Yellow Card cover shall be:

(a) Private car,
(b) Motorcycle, and
(c) Commercial vehicle insurance policies.

2.2 Scope of Cover

2.2.1 The Minimum Compulsory Cover

(a) The Yellow Card shall provide the minimum compulsory third party motor vehicle liability insurance cover, as required by the law in force in the territories of the participating states in the Scheme, when the vehicles insured are transiting or visiting such other territories.

(b) In participating states where motor third party liability is not compulsory by law, the Yellow Card Scheme shall correspond to the Motor Liability Insurance Cover on the Motorist in accordance with the laws and regulations in force in the country where the accident occurred.

(c) The primary policy should be endorsed to reflect that a Yellow Card cover has been issued under the concerned primary policy.

2.2.2 Third Party Property Damage Cover - “Additional Cover”

The Scheme shall provide for additional cover to include liability for motor third party property damage, when the vehicles insured are transiting or visiting the territories of other participating states where liability for third property damage is not compulsory subject to the following maximum limits of liability payable:

(i) Private Car/Motor Cycle - US$50,000 any one claim or series of claims arising from any one event; and
(ii) Commercial Vehicle - US$100,000 any one claim or series of claims arising from any one event.

2.2.3 Emergency Medical Expenses Benefit

The insurer shall, subject to the limit of indemnity, pay to the insured reasonable emergency medical expenses incurred in connection with any bodily injury by accidental, violent, external and visible means sustained by the insured or his driver or any occupants of the vehicle (as specified in the primary policy and Yellow Card) as a direct and immediate result of an accident to the insured motor vehicle while transiting and/or visiting the territories of other participating states which are parties to the Yellow Card Scheme.

(a) Persons covered for Medical Expenses

(i) Under Private Car Motor Policy:

The insured, the insured's driver, and any occupant are covered but not exceeding the maximum seating capacity limited by law.

(ii) Under Commercial Vehicle Policy:

The driver, the driver's assistant and up to two any other persons employed by the insured, and whose jobs are directly connected to the operations of the insured vehicle.

(iii) Motorcycle:

The motor cyclist, the pillion passenger and any other passenger carried in the side car, subject to all passengers covered wearing crash helmets and provided the number of passengers does not exceed the maximum seating capacity limited by law.

(b) Limit of Sum Insured

(i) The standard sum insured for emergency medical expenses cover shall be US$150 per any one person anyone accident and provided free of additional premium.
(ii) Based on the insured request the limit can be increased up to US$1000 subject to payment of additional premium to be determined by the Issuing National Bureau.

(c) **Application of Limit of Indemnity**

In the event of any accident involving more than the number of persons insured (covered) payment under the terms of the policy and Yellow Card cover shall be restricted to the aggregate amount of indemnity applicable to all persons indemnifiable and such indemnity shall apply in priority to the persons insured.

(d) **Premium Rating**

In case one needs additional emergency medical cover each National Bureau in consultation with its member insurance companies shall determine the additional premium for the Emergency Medical Expenses cover.

(e) **Conditions**

(i) No excess is applicable in respect of a claim payable under Emergency Medical Expenses Cover.

(iii) Emergency Medical Expenses Cover Extension is part and parcel of the Scheme and is compulsory for a Yellow Card holder to buy the cover.

(iv) Emergency Medical Expenses Cover Extension is subject to the terms, exceptions, and conditions of the primary policy, and Yellow Card Instruments including:

(a) The Protocol on the Establishment of a Third Party Motor Vehicle Insurance Scheme;
(b) The Inter-Bureaux Agreement for the Implementation of the Third Party Motor Vehicle Insurance Scheme;

(c) Operations Manual of the Yellow Card Scheme and Reinsurance Pool; and

(d) The Reinsurance Pool instruments.

2.3 Territorial Limits

2.3.1 The Yellow Card shall operate in the participating states that are party to the Scheme. Currently these are: Burundi, Djibouti, Democratic Republic of Congo, Eritrea, Ethiopia, Kenya, Malawi, Rwanda, Sudan, Tanzania, Uganda, Zambia, and Zimbabwe.

2.3.2 The Council of Bureaux shall advise of the new participating countries, as they become party to Scheme.

2.4 Premium Applicable

2.4.1 Each National Bureau in consultation with its member insurance companies shall determine the premium rate of the Yellow Card risks.

2.4.2 All member insurance companies of a National Bureau issuing Yellow Cards shall use the same premium rate as determined by the National Bureau.

2.4.3 Each National Bureau in consultation with its member insurance companies shall review its premium rates annually to ensure that the Yellow Card continues to be competitive and available to the motoring public and provide the Secretariat with the revised new premium rates for record keeping.

2.5 Premium Payment

2.5.1 100 per cent premium shall be collected at the inception of the risk.

2.5.2 The minimum premium for the Yellow card shall be between US$5 to US$10 for a minimum period of one to seven (1-7) days.
2.5.3 Yellow Card risks shall attach only on receipt of 100% premium for the period and countries chosen as the transit route.

2.6 Period of Insurance

2.6.1 The period of insurance for the Yellow Card cover shall not exceed a maximum period of twelve months.

2.6.2 A Yellow Card may be issued for a maximum period of twelve months or to the expiry date of the Primary Policy whichever period is lesser or any shorter period within the period of the primary policy.

2.6.3 The Yellow Card cover shall be subject to the minimum period of insurance of one to seven (1-7) days.

2.7 Issuing of Yellow Card

2.7.1 Each National Bureau shall issue Yellow Cards to its members and the members shall issue such cards to their respective insured’s. The following conditions shall be strictly observed when issuing Yellow Cards:

(a) All information and data required should be clearly and properly entered on the Yellow Card. No deletion, alteration, or omission shall be accepted;

(b) A Yellow Card shall be issued for one vehicle only. A full-articulated rig, for example, shall require a Yellow Card for the horse, a Yellow Card for the semi-trailer, and a further Yellow Card for an independent trailer;

(c) A Yellow Card shall not be transferable to any other vehicle;

(d) Only the insurer that issued the primary policy shall issue a Yellow Card in respect of a vehicle insured there-under; and

(e) Only insurance companies, that are members of the National Bureau, shall issue Yellow Cards and only to their primary insurance policyholders.

2.7.2 Yellow Cards should not be issued to non-resident motorists except under the following exceptional cases:
(a) Tourists and visitors coming to the COMESA Region;
(b) Imported vehicles with temporary registration number and transiting three or more countries including country of departure; and
(c) Yellow Cards issued under a) and b) above should have an underlying Primary Policy.

2.7.3 (a) The Yellow Card shall have two copies; namely the Yellow Card, the white copy;
(b) The issuing insurance companies shall issue the Yellow Cards to their insureds;
(c) The white copy is a book copy and shall be for the use of the issuing insurance company.

2.8 Countries to be Visited/Transited

2.8.1 The policyholder or motorist shall inform the Issuing Insurance Company, at the time of applying for the Yellow Card, which country or countries listed on the Yellow Card are to be visited or transited.

2.8.2 All other countries must be deleted from the Yellow Card by prominently ruling a line through them.

2.9 Amendments

2.9.1 Where an issuing officer has made an error in the completion of a Yellow Card, or when the policyholder requests a change of entered particulars; a fresh Card must be issued.

2.9.2 Any Card to which an amendment or alteration has been made shall be rejected as invalid by road traffic authorities and all stakeholders.

2.9.3 When a mistake occurs during the completion of a Yellow Card, the issuing officer shall rule two lines prominently across the concerned Yellow Card and the words “Cancelled” shall be written in between the two ruled lines.

2.9.4 The cancelled Yellow Card shall be submitted along with the other copy to the National Bureau.
2.10 Cancellation of the Yellow Card

2.10.1 Yellow Cards issued for short periods of less than 30 days and not used by a motorist, may be cancelled on request subject to a charge of minimum premium, provided there is sufficient evidence to show that the Cards were not used.

2.10.2 Yellow Cards issued for longer periods (30 days and above), and presented for cancellation due to sale or total loss of the insured vehicle, may be cancelled and premium refunded on short-term basis to the insured. In case a claim is lodged on the Yellow Card there shall be no premium refund.

2.11 Advice to Policy Holders

2.11.1 The Policyholder or motorist should be advised to always carry the Yellow Card and produce it whenever required to do so. No copy or photocopy of the Yellow Card shall be valid proof of cover.

2.11.2 The policyholders or motorists attention shall be drawn to the following two important points:

(a) Accident

In the event, the policyholder or motorist is involved in an accident:

(i) The policyholder or motorist must report the accident as quickly as possible to the national Bureau and the Police authorities of the country in which the accident occurred. The names of National Bureaux are indicated on the Yellow Card;

(ii) If the policyholder or motorist has been injured to the extent that the policyholder or motorist cannot report the accident, the Police or other authorities or any other person related to the motorist must report to the Handling Bureau.

(b) Expiry of Yellow Card
Should the period of validity of the Yellow Card expire whilst in a country other than the policyholder or motorist’s own, the policyholder or motorist must contact the National Bureau of the country that is being visited at that time to effect a local third party insurance cover for a maximum period of 30 days except for countries where there are no short term Third Party Liability Covers/Policies.

2.12 Reinsurance Pool

Submission of Returns

2.12.1 The Issuing/Primary Insurance Companies through the National Bureau shall send to the Reinsurance Pool on a monthly basis a duly completed Summary of Monthly Yellow Cards issued Form, Annex I, The National Bureau will in turn submit to the Pool a monthly summary of the information provided by its members on a monthly basis.

2.12.2 Member insurance companies should forward to the Pool, through the National Bureau, settlement of premium returns within two (2) months.

2.12.3 The National Bureau shall submit returns as they are received from member issuing/primary insurance companies without waiting for returns from other members.

Remittance of Premium

2.12.4 The National Bureau shall ensure that the premium ceded to the Reinsurance Pool is 30 per cent less reinsurance commission of the total original premium collected by the primary insurer from the insured.

2.12.5 The National Bureau shall follow-up and take necessary action to collect unpaid Yellow Cards returns from those insurance companies under receivership/suspension and report the position to the Pool Managers.

2.12.6 The National Bureau shall decline to issue Yellow Cards to Primary Insurance Companies who fail to settle Yellow Card returns for more than two (2) months.
SECTION III

3. CLAIMS- GENERAL DIRECTIVES

3.1 Claims Handling

3.1.1 When an accident occurs in a country which is party to the Protocol, in which a holder of a Yellow Card is involved and which may give rise to a claim against the policy holder, the National Bureau of the country in which the accident occurred (Handling Bureau) shall handle the claims irrespective of whether the claim has been notified or not by the insured motorist to the Issuing Bureau.

3.1.2 The Handling Bureau shall handle Yellow Card claims in line with the normal claims handling practices, thus;
   (a) Receive notification,
   (b) Carry out an underwriting verification of the claim,
   (c) Conduct necessary investigations,
   (d) Carry out an assessment and evaluation of loss,
   (e) Conduct negotiations for the claim to be expeditiously resolved.

3.1.3 The Handling Bureau shall settle claims only after all necessary documents have been obtained, claims settled otherwise may not be accepted for reimbursement.

3.2 Notification

The Handling Bureau shall as soon as is possible notify the Issuing Bureau of the claim reported and give a detailed report of the accident.

3.3 Verification

3.3.1 The Handling Bureau shall verify the underwriting details before handling claims.

3.3.2 The Handling Bureau shall handle claims in line with the normal claims handling practices.

3.4 Litigation

The Handling Bureau shall accept services of legal process.

3.5 Authorised Claims Settlement Limits
(a) The Handling Bureau shall handle and settle claims which do not exceed US $15,000 without prior authorisation from the Issuing Bureau.

(b) The Handling Bureau shall settle claims which exceed US$15,000, after obtaining prior authorisation from the Issuing Bureau.

3.6 **Reinsurance Pool Settlement Limit**

The Reinsurance Pool shall settle in full the total amount of the claim where the claim settlement amount exceeds US$15,000.

3.7 **Common Excess of Loss Reinsurance Settlement Limit**

The Reinsurance Pool Manager shall arrange an appropriate Reinsurance Cover on behalf of National Bureaux and their members for losses in excess of the Reinsurance Pool’s limit of US$50,000 on each claim up to an unlimited liability for third party death/bodily injury, and a limit of liability of US$1,000,000 for property damage. National Bureaux should buy a written share of at least 2% of the retrocession cover for the Pool.

3.8 **Emergency Medical Expenses**

3.8.1 Emergency medical expenses settlements are separate from the Handling Bureau claims settlement authority of US$15,000;

3.8.2 Payment of Emergency medical expenses claims shall not be added to third party liability claims for determining the settlement amount of US$15,000;

3.8.3 Benefits for Emergency medical expenses claims settlement shall follow the fortune of the claims settlement authority limit.

3.9 **Handling Fee**

3.9.1 The Handling Bureau shall be entitled to:

(a) A claims handling fee of 5% of each claim settlement amount including Medical expenses, subject to a minimum of US$150 and a maximum of US$1000, and
3.10 Reimbursement from the Issuing Bureau (Inter-Bureaux Claims)

The Handling Bureau shall seek reimbursement from the Issuing Bureau through the Reinsurance Pool clearing house facility for claims settled within the authorised claims settlement limit of US$15,000.

3.11 Reinsurance Pool Claims

Claims from the Reinsurance Pool

3.11.1 The Handling Bureau shall claim in full the total amount of claims from the Reinsurance Pool, where each claim settlement amount exceeds US$15,000 up to a limit of US$50,000.

Claims from the Common Excess of Loss Reinsurance

3.11.2 The Handling Bureau shall also claim in full the total amount of the claim from the Reinsurance Pool through the Common Excess of Loss Reinsurance, where the total claims settlement amount of each claim exceeds US$50,000 up to an unlimited liability for third party death/bodily injury, and up to a limit of liability of US$1,000,000 for property damage.

Cash Call

3.11.3 The cash call limit on the Reinsurance Pool cover shall be US$20,000 or currency equivalent.

Clearing Service

3.11.4 The Reinsurance Pool shall clear reimbursement of claim settlements not exceeding US$15,000 between the Handling and Issuing Bureau.

Costs Incurred to Expedite Reimbursements

3.11.5 The Pool Manager shall travel to negotiate for delayed reimbursement from Issuing Bureau, if all other means of
recovery fail. The Pool shall seek travel authorisation from the Chairperson of the MC through the Secretariat.

3.11.6 Travel costs incurred by the Pool Managers to negotiate for delayed reimbursements shall be recovered from the concerned Issuing Bureau on cost recovery basis.

3.12 Interest Charge

3.12.1 The Handling Bureau shall charge 5% annual simple interest rate on claims settled but not reimbursed by the Issuing Bureau within three months from the closure of the quarter or after the due date of an immediate payment.

3.12.2 The interest shall be loaded by 1% percentage point every six months on claims, payment not reimbursed after the first six months from the due date.

3.13 Fines

The Handling Bureau shall on no account make any payments for fines incurred by motorists.

3.14 Claims Settlement Currency

The claims settlement amounts shall be effected in the currency of the Handling Bureau.
SECTION IV

4. CLAIMS - PROCEDURES

4.1 Notification of Claims

4.1.1 The Handling Bureau shall receive all claim notifications on behalf of the insurer and the National Bureau, which issued the Yellow Card (Issuing Bureau).

4.1.2 As soon as any accident is notified, the Handling Bureau, without waiting for a formal claim against the holder of the Yellow Card, shall proceed with the normal claims handling practices of investigations, and evaluation of the loss.

4.1.3 The Handling Bureau shall also notify the Issuing Bureau of the accident for further transmission to its members who issued the Yellow Card to the policy holder.

4.1.4 Nothing in this agreement relieves the policy holder from the duty to give notice to his insurer regarding the accident in which the insured vehicle was involved.

4.2 Verification

The Handling Bureau shall quickly verify the underwriting details before processing the claim as follows:

4.2.1 Check whether the Yellow Card is original and has been correctly issued, signed and duly stamped.

4.2.2 Verify underwriting details through the Yellow Card Management Information System, e-mail, fax, telefax, or telephone from the Issuing Bureaux.

4.3 Immediate Action

4.3.1 As quickly as possible the Handling Bureau shall:

(a) Obtain the completion of an Accident Report Form (attached as Annex (ii)) from the Yellow Card holder or complete on his behalf if the holder is incapacitated, so that all available relevant facts are recorded. All questions on the Accident Report Form must be answered,
(b) Enter the details of the claim in the Yellow Card Claims Register,

(c) Proceed with normal and usual investigations of the accident and the evaluation of any possible claims, obtaining the relevant documents in the process,

(d) In carrying out the claims handling and settlement process and depending on the claim, the Handling Bureau shall solicit for the relevant information and documents to assist in establishing liability, proving loss, assessing and evaluating of the injuries, losses or damages. The list of documents shall include, but not limited to, the following:

(i) Accident Report Form
(ii) Copy of Yellow Card
(iii) Copy of Drivers Licence
(iv) Copy of Registration Book of the vehicle
(v) Medical Report
(iii) Police Report, Statements, and Sketch Plans
(iv) Documents to prove loss of earnings e.g. Pay Slip
(v) Documents to prove Medical Expenses
(vi) Repair or Replacement Quotation
(vii) Discharge form

If accident victim is deceased, the following shall be solicited for:

(viii) Death Certificate or Post Mortem Report,
(ix) Marriage Certificate (if claim by spouse),
(x) Birth certificate (if claim by children),
(xi) Proof of Earnings etc

4.3.2 The Handling Bureau shall also notify the Issuing Bureau the details of the accident for onward transmission to the primary insurance company that issued the Yellow Card to the policyholder.

4.4 Subsequent Action

4.4.1 The Handling Bureau shall proceed with investigations and negotiate with any third parties with a view to settling claims,
4.4.2 The Handling Bureau shall, subject to supporting evidence, settle emergency medical expenses incurred by any occupant of a vehicle covered by the Yellow Card Scheme to the specified limit of indemnity.

4.4.3 The Handling Bureau, giving details of the nature of the accident, shall send full written reports to the Issuing Bureau. Further, the reports shall indicate the nature and extent of loss, material damage, bodily injuries and/or death, medical expenses and details of proposed settlement terms.

4.4.4 The total amount of the claim shall include compensation to be paid for material damage, bodily injuries, or death, cost of emergency medical expenses, legal expenses, including other incidental costs reasonably incurred or the agreed amount where settlement is made amicably except the handling fees due to the Handling Bureau.

4.5 Litigation

The Handling Bureau is empowered to accept service of legal process against the insured. The Handling Bureau shall arrange legal defence of the suit. The legal fees and expenses incurred shall be charged to the insurers through the accounts of the Issuing Bureau. The Handling Bureau shall not be responsible for handling of claims and payment of legal fees when the insured and/or the Issuing Bureaux employ legal defence without the written consent of the Handling bureau.

4.6 Claims Settlement Limits

4.6.1 Where the settlement of a claim is equal to or below US$15,000 per claim, the Handling Bureau shall effect payment without prior authorisation from the Issuing Bureau, and advise the Issuing Bureau who shall reimburse the Handling Bureau.

4.6.2 The Handling Bureau shall claim for reimbursements through the Reinsurance Pool Clearing Facility, from the Issuing Bureau for settled claims below or equal to US$15,000.

4.7 Reimbursements through the Pool Clearing House (Inter-Bureau Claims)

4.7.1 The Handling Bureau shall advise the Reinsurance Pool, with a copy to the Issuing Bureau and the Secretariat, claims
settled which are below or equal to US$15,000 in respect of each and every claim.

4.7.2 The Handling Bureau shall issue an Advice for Reimbursement of Paid Claims (attached as Annex (iii)) to the Reinsurance Pool showing the claims reimbursements to be made with all required supporting documents and a copy of the notice and the supporting documents shall be sent to the Issuing Bureau.

4.7.3 The Reinsurance Pool shall confirm the validity of the paid claims submitted for reimbursement from the Issuing Bureau within thirty (30) days from the date of receipt of the request before reimbursement is effected;

4.7.4 The Reinsurance Pool shall reimburse the Handling Bureau within thirty (30) days from the date of advice and effect the necessary recoveries from the Issuing Bureau and advise the Secretariat;

4.7.5 The Issuing Bureau shall refund the Reinsurance Pool, claims reimbursement payments effected on its behalf to Handling Bureau within three month from the date of advice of reimbursement;

4.7.6 Reimbursements not refunded within three months shall attract a 5% annual simple interest charge:

4.7.7 The Reinsurance Pool shall not effect further reimbursement payments to those National Bureaux that have not fully refunded the Pool for reimbursements made on their behalf: and

4.7.8 The Reinsurance Pool shall prepare quarterly statements of reimbursements made between the National Bureaux for claims paid on a Reinsurance Pool Statement of Accounts Form (attached as Annex (iv)).

4.8 Reimbursement of old claims through the Clearing House

4.8.1 Claims not exceeding US$10,000 paid by a Handling Bureau on Yellow Cards issued before 1st July 1998 shall be reimbursed through the Clearinghouse Services. However, the above shall not apply to the following:

i) Claims exceeding US$10,000 and/or
ii) Controversial cases/claims

4.8.2 The Handling Bureau shall submit paid claims (on Cards issued before 1st July 1998, thus before the establishment of the reinsurance Pool) for reimbursement to the Reinsurance Pool and advise by copy the concerned Issuing Bureau and the Secretariat of the same.

4.9 Interest Charge

The Handling Bureaux shall charge 5% annual simple interest rate on claims settled but not reimbursed by the Issuing Bureaux as indicated in item 3.12.

4.10 Clearing Services

The Pool Managers shall through the clearing house facility pay for claims below US$15,000, handled by one National Bureau on behalf of the other and get reimbursement from the Issuing Bureau.

4.11 Costs Incurred to expedite Reimbursements

4.11.1 The travel cost incurred by the Pool Manager under item (3.11.5(a)) shall be recovered from the concerned Issuing Bureau on actual cost recovery basis.

4.11.2 The Issuing Bureau shall also pay to the Pool Manager communications expenses.

4.12 Claims exceeding US$15,000:
(Claims covered by Reinsurance Pool)

4.12.1 Where the settlement of a claim exceeds US$15,000 per claim the Handling Bureau shall seek prior authorisation from the Issuing Bureau before the effective settlement and subsequent submission of the claim to the Reinsurance Pool,

4.12.2 The Handling Bureau shall immediately advise the Reinsurance Pool all claims reported with estimated loss amounts exceeding US$15,000 on a Claims Intimation Register (attached as Annex (v)) with a copy to the Secretariat. If the issuing national bureau does not respond within the period of 30 days, the Reinsurance Pool should promptly establish the reasons for not giving authority by the Issuing national bureau and immediately
settle the claim to the handling bureau if no justification is given;

4.12.3 Where the settlement amount of a claim exceeds US$15,000 the Reinsurance Pool shall reimburse in full the total amount of the claim settlement directly to the claims Handling Bureau on behalf of the Issuing Bureau,

4.13 Monthly Statements, Reports, and Bordereaux

4.13.1 The Handling Bureau shall at the end of every month declare to the Reinsurance Pool, all claims reported settled, outstanding, and repudiated during the month on the Monthly Claims Bordereaux (attached as Annexes (vi) and (vii)) for outstanding, paid, and repudiated claims. The amounts stated on the Bordereaux shall be in the currency of the Handling Bureau.

4.13.2 The Handling Bureaux shall submit Monthly Claims Bordereaux, to the Reinsurance Pool even if there were no claims reported.

4.13.3 The Monthly reported settled, outstanding, and repudiated claims Bordereaux shall be submitted to the Reinsurance Pool within 30 days from the end of the month.

4.13.4 At the end of every quarter, the Handling Bureau shall submit to the Secretariat Quarterly Statements of Outstanding Claims, on the Quarterly Statement of Outstanding Claims Form (attached as Annex (viii)).

4.13.5 National Bureau shall revise quarterly estimate amounts of outstanding claims.

4.14 Emergency Medical Expenses Claims

4.14.1 No prior authority from the Issuing Bureaux shall be required for settlement of Emergency Medical Expenses claims not exceeding the minimum limit of US$150 per any one person.

4.14.2 Payment for Emergency Medical Expenses claims shall not be added to the third party liability claim settlement for determining the settlement authority of US$15,000.
4.14.3 Benefits for the Emergency Medical Expenses claim settlement shall follow the fortune of the claims settlement authority limit.

4.15 Cash Calls

4.15.1 The Handling Bureau shall report to the Reinsurance Pool immediately all claims exceeding US$20,000 on a Cash Loss Register (attached as Annex (ix)).

4.15.2 The Reinsurance Pool shall pay to the handling national bureau the loss within 30 days.

4.15.3 Payment and recoveries involving cash calls will be handled through Debit and Credit Notes (attached as Annex (x) and (xi)).
SECTION V

5. ACCOUNTING

5.1 National Bureau Current Accounts

5.1.1 The Current Accounts between a Handling Bureau and the Issuing Bureau, in respect of claims settlements, shall be closed quarterly and rendered on the Quarterly Statement of Claims Account (attached as Annex (xiii)) within thirty (30) days by the Handling Bureau. A copy of the Quarterly Statement of Claims Account shall be submitted to the Secretariat.

5.1.2 The Issuing Bureau shall confirm the current accounts referred to in item 5.1.1 above no later than one month after the handling bureau renders them, through the Reinsurance Pool clearing facility by Express mail, fax, or e-mail and any balance shall be settled within thirty days.

5.2 Reinsurance Pool Registers/Accounts

5.2.1 Premium Register

(a) The Reinsurance Pool shall maintain a Premium Register (attached as Annex (xiii)) where all risks ceded by members to the Reinsurance Pool shall be reflected and apportioned.

(b) The Reinsurance Pool shall apportion the risk ceded according to the participation of individual members for the period to be determined by the Management Committee.

(c) At the end of every quarter, the Reinsurance Pool shall declare to each national bureau their premium share of the total reinsurance cession on a Reinsurance Pool Statement of Accounts Form.

5.2.2 Claim Cession Register

(a) Claims reported to the Reinsurance Pool through the Monthly Summaries shall be apportioned according to the existing retrocession programme.
(b) The Reinsurance Pool shall maintain a Claims Settlement Register (attached as Annex (xiv)) on the basis of which recoveries of claims from the retrocessionaries will be effected.

(c) Claims will be recovered on a quarterly basis from the retrocessionaries through the Reinsurance Pool Statements of Accounts.

5.2.3 Quarterly Statements of Accounts

(a) The Reinsurance Pool will issue Quarterly Statements of accounts to each national bureau using the Statement of Accounts Form (attached as Annex (xii)). The statement will contain the following:

(i) A summary of the Yellow Card Reinsurance Pool;
(ii) Member’s share of the Reinsurance Pool premium; and
(iii) Member’s share of the claims falling on the Reinsurance Pool.

(b) The Issuing and Handling Bureau and Reinsurance Pool will confirm these accounts, by registered mail, fax, e-mail or any quickest means, not later than 30 days after the Handling Bureau renders them and any balance shall be settled within thirty (30) days.
SECTION VI

6. OBLIGATIONS

6.1 Measures on members failing to meet their obligations

6.1.1 National Bureau shall take measures on member insurance companies that fail to meet their obligations as follows:

(a) Ensure that before supplying new Yellow Card Books to a member, returns and remittance of already issued Yellow Cards have been submitted to the Pool;

(b) Cease with immediate effect, supplying new Yellow Cards for issuing to members who have not submitted and/or remitted returns of Yellow Cards issued to the Pool for three months or more, until they meet their obligations;

(c) Cease with immediate effect supplying new Yellow Cards for issuing to Members who have not settled claims paid on their behalf;

(d) Report the issues to the designating Ministry or Authority and request for intervention to pressurize the issuing company to meet its obligation;

(e) Inform the designating Ministry and Insurance Supervisory Authority of those insurance companies whose supply of Yellow Cards have been discontinued;

(f) Consult members and the Insurance Association on measures to adopt;

(g) Solicit the intervention of concerned government authorities to resolve the issue;

(h) Terminate membership from the National Bureau; and

(i) Take legal action on the concerned insurance companies that fail to meet their obligations and to recover the amount of claims paid on their behalf.
SECTION VII

7. SECURITY OF DOCUMENTS

7.1 Security of Yellow Card Books

7.1.1 The National Bureau and their member insurance companies shall designate a member of staff for the safekeeping and management of the Yellow Card Books;

7.1.2 Yellow Card Books shall be kept in a lockable secure box;

7.1.3 The National Bureau and its Member insurance companies should advise immediately other National Bureaux, through the Secretariat, of any loss, theft, and/or damage of Yellow Card Books;

7.1.4 The issuing insurance companies shall advise the public of the Yellow Cards lost or stolen by advertising in the local press;

7.1.5 The Handling Bureau should not entertain claims lodged on Yellow Card reported as lost or stolen. Handling of such claims shall be at their own peril; and

7.1.6 Member National Bureau that fail to report such loss and/or theft of Yellow Card Book shall be held responsible and liable for Insurance liability claims, which may arise from the issuance of such cards.

7.2 Yellow Card Security Features

7.2.1 The Yellow Card has been redesigned with the enhanced security features of Micro Text, Hologram, Bleed through numbering and thermo chromic ink. These features should be checked and satisfied before a Yellow Card claim can be settled.

7.2.2 In addition to the above, the Yellow card ha the following security features:

(a) The Cards for each National Bureau have a country flag on both the Yellow Card and the counterfoil.
(b) The Cards for each National Bureau have a country code before the serial number. This appears on both the Yellow Card and the counterfoil;

(c) Each Card has a serial number appearing on both the Yellow Card and the counterfoil;

(d) Each Card has a Yellow Card number inserted in series;

(e) The Card carries COMESA logos in the background; and

(f) A unigram is foiled on each Card.

7.2.3 The following are the country codes for the countries that are currently participating in the Scheme:

(a) 11-BUR Burundi
(b) 12-DRC Democratic Republic of Congo
(c) 13-ERI Eritrea
(d) 14-ETH Ethiopia
(e) 15-KEN Kenya
(f) 16-MAL Malawi
(g) 17-RWA Rwanda
(h) 18-TAN Tanzania
(i) 19-UGA Uganda
(j) 20-ZAM Zambia
(k) 21-ZIM Zimbabwe
(l) 22-DJI Djibouti
(m) 23-SUD Sudan

7.2.1 The card also has defined technical features and specifications of size weight, and colour.
Annex I

SUMMARY OF MONTHLY YELLOW CARDS ISSUED
For the Month of ..............................

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Name of Issuing Company</th>
<th>Total no. of Cards Issued</th>
<th>Serial No.</th>
<th>Total Gross Premium Collected</th>
<th>30% Premium Cession to the Pool</th>
<th>Commission</th>
<th>Serial no. of Null/Void Cards</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Original Currency refers to the Currency of the Handling Agency /Bureau

State the Official Exchange Rate used ..................

Yellow Card Co-Ordinator ____________________________
(Signature and Stamp)

cc: COMESA Secretariat
YELLOW CARD SCHEME
CARTE JUANE DU COMESA

THIRD PARTY MOTOR VEHICLE INSURANCE
ASSURANCE AUTOMOBILE RESPONSABILITE CIVILE

Please answer all questions here and overleaf.
Prière de répondre a chaque question au recto et au verso.

ACCIDENT REPORT FORM/ DECLARATION D’ACCIDENT

A. THE YELLOW CARD/ LA CARTE JUANE

1. Yellow Card No. ..........................
   Carte Juane No.

2. Period of Validity. From: ....................... To: .........................
   Durée de validité. De: .........................................

3. Issued by the National Bureau of  ..............................................
   Délivrée par le Bureau National de.

4. Name of Insurer ..........................................................
   Nom de l’assurer

5. Policy No. ..........................................................................
   Police No.

6. Medical Expenses Cover Extension – Limit of Indemnity per anyone person US$.........................
   Extension de la couverture des frais médicaux – Limite d’indemnisation per personne

7. Number of passenger(s) including driver insured for Medical Expenses Cover ..........................................................
   Nombre de passagers y compris le chauffeur assure pour la couverture des frais médicaux
B. **THE INSURED/ L’ASSURE**

1. Name in full  
   Nom et prénom ........................................................................................................

2. Home Country address ...............................................................  
   Adresse au pays de résidence

3. Telephone number  
   Numero de téléphone ............................................................................................

4. Occupation ...........................................................................................................
   Profession

---

C. **THE INSURED VEHICLE/ LE VEHICLE ASSURE**

1. Registration No. ..........................................................  
   No. d’immatriculation.

2. Make ...................... and model ...............................................................  
   Marque et type

3. Type of body .......................................................................................................
   Carrosserie

4. Carrying Capacity ................... and HP/CC ........................................  
   Capacité de chargement et puissance CV/CC

5. Nature of goods and persons carried ............................................................  
   Nature des marchandises et des personnes transportées

6. Were trailer/s attached?  
   If so, give details ...................................................................................................
   Avait – il une ou des Remorque (s) ?  
   si oui, donnez les détails

7. Mass of load  
   on vehicle .............................................................................................................
   on trailer/s ..............................................................................................................

   Poids du chargement du véhicule ........................................................................
   de la (des) remorque (s) .....................................................................................
8. State exact purpose for which vehicle was being used at time of accident
..........................................................................................................................................................................................
..........................................................................................................................................................................................

Précisez l’usage exact qui Etait fait du véhicule au Moment de l’accident
..........................................................................................................................................................................................
..........................................................................................................................................................................................

9. Driving from/Allant de ........................ to ........................ a

10. For motor cycles only: Pillion Sidecar Was a pillion and/or a .......................................................... sidecar passenger being carried?

Pour les motocyclettes Seulement : y avait – il un siege-arrière sidecare passenger sur le siége
..........................................................................................................................
arrière et/ou dans le sidecar ?


D. PERSON DRIVING THE INSURED VEHICLE AT TIME OF ACCIDENT

PERSONNE CONDUISANT LE VEHICULE ASSURE AU MOMENT DE L’ACCIDENT
PESSOA CONDUZINDO O VEICULO NA ALTURA DO ACIDENTE

1. Name in full ................................................................. Nom et prénom

2. Residential address ................................................................. Adresse de domicile

3. Business address ................................................................. Adresse professionnelle

4. Telephone number Private ...................... Business .................... No. de téléphone Privé ........ Professionnel

5. Occupation ........ ................................................................. Profession
6. Driver’s Licence No .................................................................
   Permis de conduire: No

   For official use Inspected by: ....................................................
   Reservé aux services officiels Constaté par

   Place of Issue ...........................................................................
   Lieu de délivrance

   Date of issue ................................................................. Comments ..........................
   Date de délivrance Commentaires

   Full or provisional .................................................................
   Définitif ou provisoire

   Classes covered .................................................................
   Catégories

   Validity from ........................................... to .................................
   Valable de ............................................

7. Was the driver tested for liquor or drugs after accident? ...........
   If so give details .....................................................................

   Le chauffeur a-t-il suivi un test d’absorption d’alcool ou de drogues après l’accident ?
   Donnez les détails .................................................................

E. OTHER THIRD PARTY VEHICLES AND/OR PROPERTY
   VEHICLES ET/OU BIENS TIERS

1. Name of owner .................................................................
   Nom du propriétaire

2. Residential address .............................................................
   Adresse de domicile

3. Business address .................................................................
   Adresse professionnelle

4. Telephone numbers Private .................. Business........
   Numéro de téléphone Privé Professionnel

5. Occupation ........................................................................
   Profession
6. **Details of vehicles**

<table>
<thead>
<tr>
<th>Details du véhicule</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registration No. ........... Make ......................</td>
</tr>
<tr>
<td>No. d'immatriculation Marque</td>
</tr>
<tr>
<td>Model ................ Type .......................</td>
</tr>
<tr>
<td>Modèle Type</td>
</tr>
</tbody>
</table>

7. **Person driving**

<table>
<thead>
<tr>
<th>Conducteur</th>
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</thead>
<tbody>
<tr>
<td>Name ..................................................</td>
</tr>
<tr>
<td>Nom</td>
</tr>
<tr>
<td>Address .................................................</td>
</tr>
<tr>
<td>Adresse</td>
</tr>
<tr>
<td>Telephone No ...........................................</td>
</tr>
<tr>
<td>No. de téléphone</td>
</tr>
<tr>
<td>Occupation ..................................................</td>
</tr>
<tr>
<td>Profession</td>
</tr>
</tbody>
</table>

8. **Damage to vehicle or other property. Give full detail:**

<table>
<thead>
<tr>
<th>Dégats causés au véhicule ou aux autres biens. Donnez les détails:</th>
</tr>
</thead>
<tbody>
<tr>
<td>.................................................................................</td>
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</tbody>
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**F. INJURIES TO PERSONS**

<table>
<thead>
<tr>
<th>PERSONNES BLESSEES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name Nom</td>
</tr>
</tbody>
</table>

1. **Passengers in insured vehicle**

<table>
<thead>
<tr>
<th>Passagers du véhicule assuré</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name ..........</td>
</tr>
<tr>
<td>Nom ..........</td>
</tr>
</tbody>
</table>

**G. PARTICULARS OF ACCIDENT**

| COORDONNES DE L'ACCIDENT |
1. Date of Accident ……./……./20……. and time …… am/pm
   Date de l’accident et heure …… am/pm

2. Place of Accident………………………………………………………………………………
   Lieu de l’accident

3. In which country? ………………………………………………………………………
   Pays dans lequel

4. Describe the weather condition / Description des conditions: ……………
   ………………………………………………………………………………………………………

5. Please explain fully how the accident happened/ Description détaillée de l’accident:………………………………………………………………………………
   ………………………………………………………………………………………………………

H. WITNESSES
   TEMOINS

1. Passengers on board insured vehicles
   Passagers a’bord des véhicules assurés

2. Independent
   Indépendant

3. Was accident reported to Police? ……………………………
   Y-a-t-il eu constat de police oui ou non

4. If yes, state particulars/ Si oui, donnez
   a) Name ………………………………………………………………………
      Nom de l’agent
   b) Number ………………………………………………………………………
      Numéro
   c) Station to which attached ………………………………………
      Poste d’attache
I. **SKETCH PLAN OF ACCIDENT**
Indicate road names, direction of travel, distances, and all useful features.

**CROQUIS DU LIEU DE L’ACCIDENT**
Indiquez les noms des routes, le sens du voyage, les distances et donner tous les renseignements utiles.

---

J. **DECLARATION**

**DECLARATION**

I/We declare the particulars herein to be true and correct to the best of my/our knowledge and undertake to render the Handling Bureau and/or the Insurers assistance in dealing with the matter.

Je/Nous déclare (déclarons) que less renseignements fournis cidessus sont, au mieux de ma (notre) connaissance vrais et corrects, nécessaire au Bureau compétent ou aux assureurs dans l’examen de ce cas.

**Driver and/or Insured**

**Chauffeur et/ou de l’assuré**

Name (print) …………………………………………. Signature ………………..
Noms (en majuscules) Signature Signatures

Date…………………………………………
Date

**Witness**

**Témoin**

Name (print) …………………………………………. Signature ………………..
Noms (en majuscules) Signature Signatures

Date …………………………………………..
Date
THE COMESA YELLOW CARD SCHEME  
PAID CLAIMS REIMBURSEMENT ADVICE

To: The Reinsurance Pool Manager

From: National Bureau of……………………………………………………………… (Handling Bureau)

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Yellow Card No.</th>
<th>Claim No.</th>
<th>Name of Insured</th>
<th>Date Settled</th>
<th>Use of Vehicle</th>
<th>Nature and Cause of Loss</th>
<th>Amount Paid</th>
<th>Total Amount Paid</th>
<th>Original Currency</th>
<th>Remarks</th>
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Original Currency refers to the currency of the Handling Agency/Bureau

State the Official Exchange rate used..........................

CC: To Issuing National Bureau

For the National Bureau of…………………………………… (Signature & Stamp)
THE COMESA YELLOW CARD SCHEME

Reinsurance Pool Statement of Accounts Form
THE COMESA YELLOW CARD SCHEME
CLAIMS INTIMATION BORDEREAUX

To: The Insurance Pool Manager

From: The National Bureau of …………………………… (Handling Bureau)

<table>
<thead>
<tr>
<th>Ref. (Handling Bureau Claim No.)</th>
<th>Claim No.</th>
<th>Issuing National Bureau</th>
<th>Name of Insured</th>
<th>Yellow Card No.</th>
<th>Use of Vehicle</th>
<th>Handling National Bureau</th>
<th>Date of Loss</th>
<th>Nature &amp; Cause of Loss</th>
<th>Claim Reserve</th>
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Original Currency refers to the currency of the Handling Agency/Bureau
State the Exchange rate used…………………………

For the National Bureau of ………………………………… (Signature & Stamp)
THE COMESA YELLOW CARD SCHEME
MONTHLY OUTSTANDING CLAIMS BORDEREAUX
FOR THE MONTH ENDING …………..

To: The Reinsurance Pool Manager

From: National Bureau of …………………………….. (Handling Bureau)

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Issuing Insurance Company</th>
<th>Issuing National Bureaux</th>
<th>Claim No.</th>
<th>Yellow Card No.</th>
<th>Date of Loss</th>
<th>Name of Insured</th>
<th>Use of Vehicle</th>
<th>Nature and Cause of Loss</th>
<th>Amount Due</th>
<th>Total Amount Outstanding</th>
<th>Remarks</th>
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Original Currency refers to the Currency of the Handling Agency/Bureau

State the Exchange rate used……………………………….

For the National Bureau of ………………………………….. (Signature & Stamp)
The COMESA Yellow Card Scheme
Monthly Settled Claims Borderaux
For the Month Ending So...

To: The Reinsurance Pool Manager

From: National Bureau of………………………. (Handling Bureau)

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Issuing Insurance Company</th>
<th>Issuing National Bureaux</th>
<th>Claim No.</th>
<th>Yellow Card No.</th>
<th>Date of Loss</th>
<th>Date Settled</th>
<th>Name of Insured</th>
<th>Use of Vehicle</th>
<th>Nature and Cause of Loss</th>
<th>Amount Due</th>
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</tbody>
</table>

State the original currency and the Official Exchange rate to US$.................................,

For the National Bureau of ................................. (Signature & Stamp)
THE COMESA YELLOW CARD SCHEME
QUARTERLY STATEMENT OF OUTSTANDING CLAIMS
FOR QUARTER ENDED ..................

Due to: The National Bureau of (Handling Bureau)

From: The National Bureau of (Issuing Bureau) Date:

<table>
<thead>
<tr>
<th>Item No</th>
<th>Claim No.</th>
<th>Yellow Card No</th>
<th>Date Settled</th>
<th>Name of Insured</th>
<th>Amount Due</th>
<th>Total Estimates</th>
<th>US$</th>
<th>Remarks</th>
</tr>
</thead>
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</tbody>
</table>

AMOUNT DUE

The amounts stated are in the Currency of the Handling Agency

State the Exchange rate used.................................

For the National Bureau of .................................... (Signature & Stamp)
Annex IX

THE COMESA YELLOW CARD SCHEME
CASH LOSS REGISTER

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Issuing National Bureau</th>
<th>Claim No.</th>
<th>Yellow Card No.</th>
<th>Date of Loss</th>
<th>Nature &amp; Cause of Loss</th>
<th>Date Settled</th>
<th>Name of Insured</th>
<th>Use of Vehicle</th>
<th>Amount Paid</th>
<th>Total Amount Paid</th>
<th>O/S Amount</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

The amounts stated are in the Currency of the Handling Agency

State the Exchange rate used……………………………………

For the National Bureau of ………………………………………… (Signature & Stamp)
# THE COMESA YELLOW CARD SCHEME DEBIT NOTE

## COMESA Yellow Card Reinsurance Pool

Le Consortium de Reassurance de la Carte Jaune du COMESA

---

### CREDIT NOTE NO:

### DATE:

### TO:

### OUR REP:

### YOUR REP:

### CURRENCY: USD

<table>
<thead>
<tr>
<th>DOCUMENT DATE NO</th>
<th>DETAILS</th>
<th>AMOUNT (DRHS)</th>
<th>AMOUNT (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ISSUING BUREAU:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HANDLING BUREAU:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total Due To The Handling Bureau**

**Our Finance Department Will Advise You Regarding Settlement.**

---

**Prepared By:**

**Operations Department**
THE COMESA YELLOW CARD SCHEME CREDIT NOTE

COMESA Yellow Card
Reinsurance Pool
Le Consortium de Reassurance de la
Carte Jaune du COMESA

ZEP-RE PLACE
Lougootor Road, Upper Hill
P O Box 42769-00100
Nairobi, Kenya
Pilot Line : (254) 20-2738224
Fax No : (254) 20-2738444
Email : mail@zep-re.com

DEBIT NOTE NO:

DATE:

TO:

OUR REF:

YOUR REF:

CURRENCY:

<table>
<thead>
<tr>
<th>DOCUMENT ON REF. NO.</th>
<th>DETAILS</th>
<th>AMOUNT (DRS)</th>
<th>AMOUNT (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ISSUING BUREAU:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HANDLING BUREAU:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL DUE TO THE COMESA YELLOW CARD REINSURANCE POOL</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

KINDLY ARRANGE TO REMIT YOUR SETTLEMENT CHEQUE TO THE ABOVE ADDRESS

PREPARED BY: OPERATIONS DEPARTMENT
THECOMESA YELLOW CARD SCHEME
PREMIUM REGISTER

To: The Reinsurance Pool Manager

From: National Bureau of .......................................... (Issuing Bureau)

<table>
<thead>
<tr>
<th>Issuing Insurance Company</th>
<th>Yellow Card No.</th>
<th>Period of Insurance From</th>
<th>To</th>
<th>Reg. no. of vehicle</th>
<th>Make of Vehicle and Capacity</th>
<th>Use of Vehicle</th>
<th>Countries to be visited</th>
<th>Premium Rate</th>
<th>Premium Amount</th>
<th>US$</th>
<th>Remark</th>
</tr>
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<tbody>
<tr>
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<td>Goods</td>
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<td>Passengers</td>
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</tr>
</tbody>
</table>

The amounts stated are in the Currency of the Issuing Agency

State the Exchange rate used...........................................

For the National Bureau of .............................................. (Signature & Stamp)
THE COMESA YELLOW CARD SCHEME
CLAIMS SETTLEMENT REGISTER

Date: ..............................................

<table>
<thead>
<tr>
<th>Ref.</th>
<th>Issuing National Bureau</th>
<th>Claim No.</th>
<th>Name of Insured</th>
<th>Yellow Card No.</th>
<th>Use of Vehicle</th>
<th>Date of Loss</th>
<th>Nature &amp; Cause of Loss</th>
<th>Claim Reserve</th>
<th>Date of Settlement</th>
<th>Amount Paid</th>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Amount Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Damages</td>
</tr>
<tr>
<td>Medical Expenses</td>
</tr>
<tr>
<td>Handling Fee</td>
</tr>
<tr>
<td>Interest Earned</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total Amount Paid</th>
<th>USD</th>
<th>O/s Amount</th>
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</table>

The amounts stated are in the currency of the Handling Agency and the US$ equivalent
Annex XIV

**SUMMARY OF CLAIMS REPORTED, PAID AND OUTSTANDING FROM 1\textsuperscript{st} JULY…… TO 30\textsuperscript{th} JUNE ……**

To the Reinsurance Pool Manager

**NATIONAL BUREAU OF ……………**

<table>
<thead>
<tr>
<th>INFORMATION REQUIRED</th>
<th>NO. OF CLAIMS</th>
<th>AMOUNT</th>
<th>CLAIMS HANDLED ON BEHALF OF THE NATIONAL OF</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>NUMBER</td>
</tr>
<tr>
<td>OUTSTANDING CLAIMS AS AT 30.06. ..........</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CLAIMS REPORTED FROM 01.07. ........ TO 30.06. ........</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>CLAIMS PAID IN THE PERIOD 01.07., ....... TO 30.06., .......</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OUTSTANDING CLAIMS AS AT 30.06., .........</td>
<td></td>
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</tr>
</tbody>
</table>

All the claims should be reflected in the currency of the Handling Bureau/Agency with the US$ equivalent in brackets.

CC: COMESA Secretariat