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| **NOTIFICATION FORM 017****NOTIFICATION TO DEVIATE FROM PLANNED MANAGEMENT ACTION THAT MAY HAVE A MATERIAL IMPACT ON THE SOLVENCY CAPITAL REQUIREMENT** |

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| **Purpose of this document**This notification form needs to be completed when deviating from planned management action that may have a material impact on the Solvency Capital Requirement (SCR), as required in terms of section 44(1) of the Insurance Act, 2017 (the Act) and:* In respect of an insurer, section 5.9 of Financial Soundness Standard for Insurers Calculation of the SCR Using the Standardised Formula (FSI 4) and section 8.16 of Financial Soundness Standard for Insurers Calculation of the SCR Using a Full or Partial Internal Model (FSI 5); and
* In respect of an insurance group, section 6.1 of Financial Soundness Standards for Insurance Groups Accounting Consolidation Method (FSG 3).
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| **Important information to complete this form**Before completing this form, read the Fact Sheet Application and Notification Forms (Fact Sheet) that is available on the website of the SARB. The Fact Sheet contains important information on consent and declarations required. Please note: this application could include a prescribed fee, in accordance with [Prudential Standard IAF](http://www.resbank.co.za/PrudentialAuthority/Insurers/Post%20Insurance%20Act/Legislation%20and%20Regulatory%20instruments/Prudential%20Standards/Documents/Prudential%20Standard%20IAF.pdf), 2019 with the process for payment found [here](http://www.resbank.co.za/PrudentialAuthority/Insurers/Post%20Insurance%20Act/Legislation%20and%20Regulatory%20instruments/Prudential%20Standards/Documents/Process%20for%20payment%20of%20fees%20prescribed%20in%20terms%20of%20the%20Insurance%20Act.pdf). |

## Reason for notification

* 1. Describe the reason for the notification

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## Specific Information

* 1. Information on planned management action

#### Provide details of the planned management action.

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* 1. Analysis detailing the reasons for and consequences of deviation(s)

#### Which assumed management action was deviated from and why did this occur?

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#### Will the management action plan be updated in light of the deviation?

[ ]  **No** 🡺 Complete question 2.2.3

[ ]  **Yes** 🡺 Continue from question 2.2.4

#### Provide reasons why the existing management action plan is considered relevant despite deviation(s) from the planned management action.

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#### What is the new management action plan and how has it changed since the previous plan?

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#### How has the board of directors satisfied itself that the updated assumed management actions are reasonable?

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#### What is the impact on the SCR if the assumed future management action is changed to be in line with the management action that is referred to in question 2.2.1?

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#### Is there an overall change to the risk exposure of the insurer due to deviating from the management action?

[ ]  **No** 🡺 Continue to question 2.3.1

[ ]  **Yes** 🡺 Complete question 2.2.8

#### Provide details of the change to the overall risk exposure of the insurer.

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* 1. Details of affected stakeholders

#### Are policyholders affected by the change in management action?

[ ]  **No** 🡺 Complete question 2.3.3

[ ]  **Yes** 🡺 Continue from question 2.3.2

#### Provide details on how policyholders are affected by the change in management action.

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#### Are the shareholders affected by the change in management action?

[ ]  **No** 🡺 Complete question 2.4

[ ]  **Yes** 🡺 Continue from question 2.3.4

#### Provide details on how policyholders are affected by the change in management action.

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* 1. Other information

#### Is there any additional information that is not requested elsewhere in this form, that is relevant for the Prudential Authority to assess this form?

[ ]  **No** 🡺 Continue to section 3

[ ]  **Yes** 🡺 Complete question 2.4.2

#### Provide a summary or list of the additional information, including the reasons for providing this additional information and attach to this form.

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## Results

* 1. Results

#### Provide the SCR calculation before and after deviation(s) and assumed changes in management action in the excel template accompanying this form (sheets SCR summary - before dev and SCR summary - after dev).

#### Complete the statement of solvency position in the excel template accompanying this form (sheets solvency position - before dev, SCR summary – before dev and SCR summary – after dev).

## Attachment Checklist

* 1. Compulsory attachments

Complete the following table with details of the attachments provided.

| **Attachment Number** | **Question Number** | **Description** | **Number of pages/sheets** | **Attached** |
| --- | --- | --- | --- | --- |
| A1 | 3.1.13.1.2 | Excel template  |  | [ ]  |
| A2 | 5 | Consent and Declarations |  | [ ]  |

* 1. Other Attachments

Complete the following table with details of the attachments provided, also indicating the number of pages of each attachment. For example, attachments might be required if there was not sufficient space to include the information in the form itself or if your responses in this form refer to external documents. Add additional rows for each attachment included:

| **Attachment Number** | **Question Number** | **Description** | **Number of pages/sheets** | **Attached** |
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| e.g. B1 | 2.2 | Contact details of professional advisors | 8 | [ ]   |

## Consent and Declarations

To assess the application or notification, the Prudential Authority needs to ensure that the information in the application or notification is accurate and complete, and may be verified and shared with other regulatory authorities. Please see the Fact Sheet on the SARB website for the required consent and declarations that must accompany this form.