



TURKS & CAICOS ISLANDS FINANCIAL SERVICES COMMISSION

**THE INSURANCE ORDINANCE 1989 (CAP. 16.06)
THE INSURANCE REGULATIONS 1990 (CAP. 16.06)**

FORM SAS 2/99: SOLVENCY ASSESSMENT SCHEDULE A NON-DOMESTIC INSURER¹ GENERAL BUSINESS ONLY

PLEASE COMPLETE ALL SECTIONS OF THIS FORM AS FULLY AS POSSIBLE.

Insurance Company Name	
Financial Year End	

A Calculation of Actual Solvency Margin (ASM)

- | | | |
|----------|--|-------|
| 1 | Aggregate value of Permitted Assets at Balance Sheet date | \$ |
| 2 | Aggregate value of Liabilities at Balance Sheet date (minus) | \$ |
| 3 | Actual Solvency Margin A. (1) – A. (2) | \$ |
| | (N.B. See Insurance Regulations for Prohibited/Permitted Assets) | _____ |

B Calculation of Minimum Solvency Margin (MSM)

- | | | |
|----------|--|-------|
| 1 | 20% of Net Annual Premium (N.A.P.) up to \$5M | \$ |
| 2 | Where N.A.P. over \$5M: \$1M plus 10% of NAP in excess of \$5M | \$ |
| | Total B. (1) + B. (2) (MSM) | \$ |
| | | _____ |

- | | | |
|----------|---|---------|
| C | A. (3) (ASM) above as a percentage of B. (MSM) | _____ % |
|----------|---|---------|

¹ Includes Captives & International insurers



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Calculation Sheet for:

Consolidated Business

Domestic Business

Independent Auditor (SIGNATURE)

Date



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