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South Africa

Home insurance & Sasria guide

4 chapters · every source listed



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Home insurance & Sasria guide 2026

For homeowners and tenants in South Africa: buildings and contents cover, what your bond requires, Sasria riot and strike cover, and your rights when a claim is rejected.

This guide puts together 4 pages of Tulinde South Africa (tulinde.co.za), word for word. Each chapter states the date it was last reviewed; the 21 sources are listed at the end. Compiled on 28 October 2026. Laws, prices and rules change: check the online version of each chapter (its address is under its title) before you rely on it.

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Chapter 1

Home insurance in South Africa: buildings, household contents and your bond

Reviewed 28 October 2026 · online: https://tulinde.co.za/home-insurance/

Short answer Checked 28 October 2026

Home insurance in South Africa comes in two parts: **buildings (homeowners') insurance** for the structure, and **household contents insurance** for what is inside. If you have a home loan, the **National Credit Act (section 106)** lets the bank require buildings cover up to the property's full value — but you have the **right to choose your own insurer**. Riot and unrest damage is excluded from normal policies and covered by a **Sasria** add-on.

Buildings insurance vs household insurance

The Insurance Act 18 of 2017 puts both covers in the **property class** of non-life insurance: cover for damage to or loss of property you own, use or possess. In practice insurers sell it in two sections, and the National Financial Ombud Scheme (NFO) also reports complaints in two separate categories, **homeowners'** and **household contents**.

	Buildings (homeowners') insurance	Household contents insurance
What it covers	The structure: walls, roof, fixtures, built-in items as defined in your policy	Movable possessions: furniture, appliances, clothing, as defined in your policy
Who needs it	The owner of the property; usually required by the bank if there is a bond	Owners and tenants alike
Required by law?	No, but a lender may require it under section 106 of the National Credit Act	No
Ombud monetary limit (NFO)	Complaints up to **R10 million**	Complaints up to **R5 million**

The R10 million and R5 million limits come from Schedule A of the NFO Rules; they can be exceeded if the insurer agrees.

Your bond: what the law allows the bank to ask

Section 106 of the National Credit Act 34 of 2005 sets the rules when a lender asks you to insure:

- **Section 106(1)(b)(i)**: under a mortgage agreement, the credit provider may require insurance on the property that is subject to the mortgage, **not exceeding its full asset value**.
- **Section 106(2)**: the lender must not demand insurance that is unreasonable or at an unreasonable cost, given the actual risk.
- **Section 106(4)(a)**: if the lender proposes a particular policy, you must be told of your **right to waive it and substitute a policy of your own choice**. The National Credit Regulator restated this right in its June 2024 guideline.
- **Section 106(5)**: for a policy the lender arranges, it may not add a surcharge above the actual cost, must disclose the cost and its commission, must explain the terms and give you a copy, and is a loss payee only up to the settlement value — the rest is paid to you.
- **Section 106(6)**: if you use your own policy, the lender may ask for written directions naming it as loss payee up to the settlement value.

> In short: the bank can insist that the house is insured, but it cannot force you to use its insurer. Shopping around is your legal right.

Credit life insurance on the loan itself is a separate product: see credit life insurance.

Under-insurance and the average clause

If the value you declare (the **sum insured**) is lower than what the property is really worth, an insurer can apply **average**. Sasria's own Material Damage Policy 2026 gives an official definition: average is a condition under which the insurer is entitled to **proportionally reduce the amount of a claim** where the value at risk exceeds the sum insured, because you are underinsured. Under clause 14 of that wording, you are treated as **your own insurer for the difference**.

A simple illustration of the proportion (not a quote): if a home worth R2,000,000 is insured for R1,500,000, it is insured for 75% of its value, so a R100,000 claim may be paid at 75%, before any excess. Each insurer's own wording decides whether and how average applies — check your policy schedule.

1. Insure buildings for the cost of **rebuilding**, not the market price of the house.
2. Update the sum insured after renovations or extensions.
3. List high-value contents separately if your policy asks for it.

Why home claims end up at the ombud

The NFO's 2025 annual report gives the real pattern of disputes in its non-life division:

Category (2025)	Share or main causes
Homeowners' complaints	**27.5%** of all non-life complaints finalised
Household contents complaints	**5.1%** of all non-life complaints finalised
Homeowners' — type of claim	Acts of nature 42%, bursting of water apparatus 15%, theft and burglary 5%
Homeowners' — main reason	Rejection for **gradual deterioration, lack of maintenance or wear and tear** (up 17.5% on 2024), then no insured peril, defective design or workmanship, quantum
Household contents — type of claim	Theft and burglary 24%, power surge 17%, accidental damage 12.5%, acts of nature 7%
Household contents — main reason	Gradual deterioration / wear and tear, then no insured event, then quantum disputes

The lesson: keep the house maintained (roof, gutters, pipes, geysers) and keep proof of it, because **wear and tear is the most common reason home claims are rejected**.

Sasria: the add-on for riots and unrest

Ordinary home policies exclude damage from riots, strikes, public disorder and terrorism. That risk is covered by **Sasria SOC Ltd**, which sells **Domestic Cover** for homes, household contents and personal items through your insurer (Sasria).

Sasria's rates schedule effective 1 October 2025 sets the domestic fire-section rate at **0.003630% of the sum insured per year (minimum R30)** or 0.000363% per month (minimum R3). Your insurer collects it with your premium. Details: Sasria explained.

If your claim is rejected

1. Complain to the insurer first, in writing, using its internal complaints process — the NFO requires this (NFO).
2. If you are still unhappy, take it to the **National Financial Ombud Scheme**. It is **free** for complainants (Rule 1.4 of the NFO Rules).

3. Do it within **three years** of when you became aware of the cause to complain (Rule 4.2.2(e)). Lodging the complaint suspends prescription while the NFO handles it (Rule 6.1).

More on the steps: insurance complaints in South Africa and your rights as a policyholder.

Frequently asked questions

Is home insurance compulsory in South Africa?

No law forces a homeowner to insure. But if you have a bond, section 106 of the National Credit Act lets the lender require insurance on the property, up to its full asset value.

Can my bank force me to use its home insurance?

No. Section 106(4)(a) of the National Credit Act gives you the right to waive the policy the lender proposes and use a policy of your own choice. The lender may ask to be named as loss payee up to the settlement value.

What is the difference between household insurance and building insurance?

Building (homeowners') insurance covers the structure of the house; household insurance covers the contents. The NFO treats them as two separate complaint categories.

What is the average clause in home insurance?

If you are underinsured, the insurer can reduce a claim in proportion to the under-insurance. Sasria's 2026 policy wording defines it as a proportional reduction where the value at risk exceeds the sum insured.

Why do home insurance claims get rejected?

In the NFO's 2025 report, the most common reason in homeowners' disputes was the exclusion for gradual deterioration, lack of maintenance or wear and tear.

Does home insurance cover riot damage?

Not the standard policy. Riot, strike, public disorder and terrorism damage is covered by Sasria, added to your policy by your insurer.

Chapter 2

Sasria: riot, strike and terrorism cover in South Africa

Reviewed 28 October 2026 · online: https://tulinde.co.za/sasria/

Short answer Checked 28 October 2026

Sasria is South Africa's state-owned special-risk insurer: it covers **damage caused by riots, strikes, public disorder, civil commotion and terrorism**, which ordinary policies exclude. You **cannot buy it directly** — it is added to your home, car or business policy by your insurer or broker. Under its 2026 policy wording, you must **notify the claim within 30 calendar days** and report to the police within 48 hours.

What Sasria is

Sasria SOC Ltd describes itself as born in the aftermath of the **1976 Soweto Uprising** and as the only insurer in the country offering cover for riots, strikes and public disorder (Sasria). It is a **Schedule 3B public entity** under the Public Finance Management Act, **wholly owned by the government**, represented by National Treasury (Integrated Report 2026). Among the laws it operates under, the report lists the **Conversion of Sasria Act 134 of 1998**, the Insurance Act 18 of 2017 and the Short-Term Insurance Act 53 of 1998.

Sasria in figures (year to 31 March 2026)	Figure
Gross written premium	R6.4 billion (+9.2%)
Profit	R5.2 billion
Equity	R23.8 billion
July 2021 unrest	Claims of **R31.3 billion over ten days**
Claims settled within target time	93% (target 85%)

All figures from Sasria's own Integrated Report 2026.

What Sasria covers

Section 02 of the Material Damage Policy 2026 lists the **Defined Events**:

- acts aimed at overthrowing or influencing any government by force, fear, **terrorism** or violence;
- acts meant to cause damage for a political aim, social or economic change, or in **protest** against any government or authority;
- **riot, strike, public disorder** (including **civil commotion**, labour disturbances or lockouts);
- attempts to do any of the above, and action by the authorities to suppress them;
- **looting** committed as part of those acts.

> Looting on its own is not a Sasria peril. Sasria's FAQ says it is a valid claim only when it happens during an active covered event (Sasria FAQs). Business interruption is covered only if it follows material damage.

Products listed by Sasria: Domestic Cover (homes, contents, personal items), Motor, Agricultural, Commercial Property, Business Interruption, Cash, Contract Works, Marine and Transit, municipal and tertiary-institution cover. Commercial **Primary Cover protects assets up to R500 million**; Wrap Excess of Loss adds cover for a total of up to R1 billion.

How you buy Sasria cover

Sasria works **business-to-business-to-client**: all business goes through **agent companies** — South Africa's non-life insurers — and brokers, with no direct sales to the public (Integrated Report 2026).

1. Ask your insurer or broker to add Sasria to your home, motor or business policy.
2. There must be an **underlying policy** for Sasria to attach to. If you want Sasria only, the agent issues a pro forma underlying policy (policy wording).
3. Check that the Sasria section appears on your **policy schedule** with its premium — Sasria asks for proof of premium at claim stage (FAQs).

Sasria's Circular 457 (2012) states that its cover is **non-refusable**, can be taken at any time — even during unrest — with **no waiting period**, and that the full annual premium is charged.

What Sasria costs

Sasria publishes its rates. From the rates schedule effective 1 October 2025:

Cover	Annual rate (minimum)	Monthly rate (minimum)
Fire — domestic (homes, contents)	0.003630% of sum insured (R30)	0.000363% (R3)
Fire — commercial	0.039228% (R500)	0.003923% (R50)
Fire — SME, limit R10,000 to R500,000	R50	R5
Motor — private cars	R26.23 per vehicle	R2.62 per vehicle
Light commercial vehicles (≤ 3,500 kg)	0.070621% (R45.39)	0.007062% (R4.54)

Applying the domestic rate to a house insured for R1,500,000 gives about **R54 a year** (R1,500,000 × 0.003630%). Your insurer's schedule shows the amount actually charged.

How to claim, and the deadlines

Start with your **insurer or broker**, not Sasria: they confirm that a Sasria event applies, then the claim is registered (Claims Hub). Deadlines in the Material Damage Policy 2026, clauses 5 and 6:

Step	Deadline
Report to the police	As soon as practicable, **not later than 48 hours**
Written notice to the Sasria agent (your insurer)	Within **30 calendar days** of the event
Full claim details (documents, quotes, assessments)	Within **60 calendar days**, unless Sasria agrees otherwise
No claim payable after	**24 months** from the event (non-motor), unless legal proceedings are pending
Suing after a rejection	Within **6 months** of receiving the rejection

Sasria's FAQs add that motor claims prescribe after **12 months**, that its claims forum communicates a decision within **five working days** once documents are in, that fast-track claims

up to **R500,000** are usually finalised within 25 days, and complex non-motor claims above R500,000 may take up to 50 days. To follow up: 011 214 0800 or claimsmanagementsystem@sasria.co.za, with your claim number.

If you disagree with the outcome, see insurance complaints.

Frequently asked questions

What does Sasria cover?

Damage from riots, strikes, public disorder (including civil commotion and labour disturbances), terrorism and politically motivated acts, and looting committed as part of them, as listed in Sasria's 2026 policy wording.

Can I buy Sasria directly?

No. Sasria sells only through agent companies (South Africa's non-life insurers) and brokers. Ask your insurer to add it to your home, car or business policy.

How much is Sasria on a car?

Sasria's rates schedule effective 1 October 2025 sets R26.23 a year or R2.62 a month for a private car.

How long do I have to claim from Sasria?

The 2026 policy wording requires written notice to your insurer within 30 calendar days and full details within 60 days; no claim is payable after 24 months (12 months for motor, per Sasria's FAQ).

Who owns Sasria?

The government of South Africa, represented by National Treasury. Sasria is a Schedule 3B public entity under the Public Finance Management Act.

How much did the July 2021 unrest cost Sasria?

Sasria's 2026 Integrated Report says the July 2021 events caused claims of R31.3 billion over ten days.

Chapter 3

Sasria calculator: the riot and strike premium on your home and car

Reviewed 28 October 2026 · online: https://tulinde.co.za/sasria-calculator/

Short answer Checked 28 October 2026

Sasria publishes its rates. Since **1 October 2025** the domestic fire rate (homes and contents) is **0.003630% of the sum insured a year, minimum R30** (0.000363% a month, minimum R3), a **private car costs R26.23 a year or R2.62 a month**, and a light commercial vehicle up to 3,500 kg is **0.070621% of its value a year, minimum R45.39**. A R1.5 million house, R400,000 of contents and one car come to about **R110.68 a year**. Your insurer adds Sasria to your policy; you cannot buy it directly.

The rates the calculator uses

From Sasria's Updated Rates Schedule effective 1 October 2025:

Rate code and cover	Annual rate (minimum)	Monthly rate (minimum)
F1 — Fire, domestic (buildings, contents)	0.003630% (R30)	0.000363% (R3)
M1 — Cars, private use	R26.23 per vehicle	R2.62 per vehicle
M2 — Light commercial vehicles (3,500 kg GVM or less)	0.070621% (R45.39)	0.007062% (R4.54)
M3 — Taxis	0.035353% (R45.39)	0.003535% (R4.54)
F4 — Fire, SME, policy limit R10,000 – R500,000	R50	R5
F2 — Fire, commercial	0.039228% (R500)	0.003923% (R50)

The rate is applied to the sum insured on your policy; when the result is below the minimum, the minimum is charged. Monthly rates are a tenth of the annual ones, so twelve monthly payments cost more than one annual premium.

Worked example

Item (annual policy)	Calculation	Sasria premium
House insured for R1,500,000	R1,500,000 × 0.003630% = R54.45	R54.45
Contents insured for R400,000	R400,000 × 0.003630% = R14.52, below the minimum	R30.00
One private car	Flat rate	R26.23
Total		**R110.68 a year**

On a monthly policy the same items cost R5.45 + R3.00 (minimum) + R2.62 = **R11.07 a month**. Our arithmetic from the published schedule; your insurer's schedule shows what it actually charges.

How Sasria is charged

Sasria SOC Ltd is the state-owned insurer for riot, strike, public disorder and terrorism damage. It works only through insurers and brokers, who add its cover and premium to your home, car or business policy (Sasria). The full guide — what it covers, the 30-day claim notice, and how to claim — is on Sasria explained.

Frequently asked questions

How is Sasria calculated?

Sasria applies a published rate to the sum insured: 0.003630% a year for homes and contents (minimum R30), a flat R26.23 a year per private car, 0.070621% for light commercial vehicles (minimum R45.39) — rates effective 1 October 2025.

How much is Sasria on a car per month?

R2.62 a month for a private car, or R26.23 a year, under Sasria's rates schedule effective 1 October 2025.

How much is Sasria on a house?

0.003630% of the building's sum insured a year, minimum R30 — about R54 on a house insured for R1.5 million. On a monthly policy it is 0.000363% a month, minimum R3.

Can I buy Sasria directly?

No. Sasria sells through South Africa's non-life insurers and brokers, who add it to your policy.

Chapter 4

Insurance claim rejected? Your rights under the Policyholder Protection Rules

Reviewed 28 October 2026 · online: https://tulinde.co.za/policyholder-rights/

Short answer Checked 28 October 2026

If your insurance claim is rejected in South Africa, the insurer must tell you **in writing within 10 days** of its decision, give **reasons detailed enough to dispute them**, and allow you **at least 90 days** to make representations (Policyholder Protection Rules, rule 17.6). A policy time-bar must then leave you **at least 6 more months** to go to court. You also have a **cooling-off period** — 14 days for short-term policies, 31 days for life policies — and grace periods for late premiums.

The Policyholder Protection Rules in one paragraph

There are two sets of **Policyholder Protection Rules (PPRs)**: one for **short-term** insurance (car, home, travel, business — GN 1433 of 15 December 2017, made under the Short-term Insurance Act 53 of 1998) and one for **long-term** insurance (life, funeral, disability, credit life — GN 1407 of 15 December 2017, under the Long-term Insurance Act 52 of 1998). Both came into force on **1 January 2018** and were amended with effect from **1 October 2018** (GN 996 and GN 997 of 28 September 2018). Rule numbers below are the same in both sets unless stated.

> These are rules the insurer must follow whatever your policy wording says. A clause that contradicts them can be void.

When your claim is rejected: the 10-day, 90-day, 45-day and 6-month rules

Under rule 17.6 of both PPRs ("repudiate" means rejecting all or part of a claim, for any reason):

Step	What the rules require	Rule
Decision	The insurer must accept, reject or dispute your claim within a reasonable period	17.6.1
Notice	Written notice of the decision **within 10 days** of taking it	17.6.2
Reasons	In plain language, reasons **detailed enough for you to dispute them**	17.6.3(a)
Your window	**At least 90 days** after receiving the notice to make representations to the insurer	17.6.3(b)
Information	Its internal escalation process, your right to go to the ombud with contact details, and any time-bar in the policy or the prescription period that applies	17.6.3(c)–(f)
Review	The insurer must answer your representations **within 45 days**, again with reasons and the facts behind the decision	17.6.5–17.6.6
Going to court	A policy time-bar may not count the 90 days, and must allow **at least 6 months after the 90 days end** to start legal action (policies from 1 January 2011)	17.6.7–17.6.8
Late but fair	Even after a time-bar expires, you can ask a court to condone the delay if there is good cause and the clause is unfair to you	17.6.9

Sources: Short-term PPRs and Long-term PPRs. If a third party (an administrator or broker) rejects the claim for the insurer, it must also name the insurer and tell you to direct recourse to it (rule 17.6.4).

The short-term rules also forbid an insurer to **deny a claim without a reasonable investigation**, to rely **solely on a polygraph or lie-detector test**, or to dissuade you from using an attorney or an assessor (rule 17.11). A policy clause forcing you to take such a test, or to settle any dispute **only by arbitration**, is void (rule 7.1).

How to challenge a rejected claim

1. Read the rejection letter: note the date you received it, the reasons given, and the policy clause relied on.

2. Within the 90 days, write to the insurer's complaints or claims-review address. Answer each reason with facts and documents (quotes, photos, reports, police case number, medical records).
3. Ask for anything missing: you are entitled to a copy of your policy at any time on request.
4. Wait for the written answer (45 days). If the rejection stands, take the case to the National Financial Ombud Scheme — it is free, and receiving your complaint suspends prescription and policy time-bars (Financial Sector Regulation Act, section 216).
5. If the problem is the advice you were given when buying, complain to the FAIS Ombud instead; for a medical scheme, to the Council for Medical Schemes.

Cooling-off period: cancelling a new policy

	Short-term policy	Long-term (life) policy
How long	**14 days** after you receive the policy contract	**31 days** after you receive the policy information (rule 11.5)
Conditions	Policy term longer than 31 days; no claim made or paid and no insured event yet	No claim made or paid and no insured event yet; policies of 31 days or less excluded
Refund	All premiums, minus the cost of risk cover actually enjoyed	All premiums, minus the cost of cover enjoyed and any market loss on investments
Insurer's deadline	Cancel within 31 days of your notice	Cancel within 31 days of your notice
Rule	4.2 to 4.4	4.2 (as substituted in 2018) to 4.4

Cooling-off applies to new policies and to changes you asked for — not to changes the insurer makes (short-term, long-term amendment).

Late premiums: grace periods and warnings

- **Short-term**: every policy must give a grace period of **at least 15 days** after the due date; for a monthly policy, from the **second month** (rule 15.1). The insurer must tell you in writing **within 15 days** of becoming aware that a premium was not received (rule 11.6.7). It may not reject a claim because a premium was late if you paid within the grace period (rule 7.1(e)).

- **Long-term**: the insurer must notify you **within 15 days** after an unpaid premium was due, and the cover stays in force for **15 days** after the due date for monthly (or more frequent) premiums, or **one month** for longer intervals (rule 15A.1, inserted in 2018).
- If you claim for an event that happened during the grace period, the insurer may deduct the unpaid premium from the payout (short-term rule 17.12, long-term rule 17.11).

Funeral and credit life policies are long-term policies: see funeral cover and credit life insurance.

When the insurer wants to cancel or change your policy

- **31 days' written notice** before an insurer ends your policy, unless the reason is non-payment (handled by the grace-period rules), a material change in risk that the policy says ends it, or a legal requirement for immediate termination (short-term rule 19.2.1, long-term rule 20.2.1).
- **31 days before a change** the insurer makes to terms and conditions, it must give you the details and explain your rights (short-term rule 11.6.4).
- **31 days before renewal**, a short-term insurer must tell you in writing the new premium, last premium paid, and any change to the terms, so you can compare (rule 11.6.5).
- Your premium on a life policy may only be **reviewed if the policy provides for it**, at the stated frequency, and never mainly to recoup past losses (long-term rule 15).

Treating Customers Fairly: the six outcomes

Rule 1.4 of both PPRs makes insurers deliver the **Treating Customers Fairly (TCF)** outcomes, also set out by the FSCA:

1. You can be confident that fair treatment is central to the insurer's culture.
2. Products are designed for the needs of identified customer groups and sold to them.
3. You get clear information and are kept informed before, during and after the sale.
4. Advice, where given, is suitable and takes account of your circumstances.
5. Products perform as you were led to expect, and service is of an acceptable standard.
6. You face no unreasonable barriers after the sale to change or replace a policy, **submit a claim or make a complaint**.

Breaches of the rules as a pattern (not your individual claim) can be reported to the FSCA.

Frequently asked questions

What can I do if my insurance claim is rejected?

Ask for the written reasons (the insurer must send them within 10 days of its decision), then make representations to the insurer within at least 90 days (PPR rule 17.6.3). If it confirms the rejection, complain free of charge to the National Financial Ombud Scheme.

How long is the cooling-off period for insurance in South Africa?

14 days after receiving the policy for short-term insurance (term over 31 days), and 31 days after receiving the policy information for life insurance, provided no claim has been made. You get your premiums back minus the cost of cover enjoyed.

How long do I have to sue my insurer after a rejected claim?

It depends on your policy's time-bar clause, but for policies from 1 January 2011 the clause must allow at least 6 months after the 90-day representation period ends (rule 17.6.8). A complaint to the ombud suspends the time-bar while it is open.

Can my insurer cancel my policy without telling me?

Not for most reasons: it must give at least 31 days' written notice, except for non-payment after the grace period, a material change in risk that ends the policy under its terms, or where the law requires immediate termination.

Is there a grace period for late premiums?

Yes. Short-term policies must give at least 15 days after the due date (from the second month for monthly policies). Life policies stay in force 15 days after a missed monthly premium, or one month for longer intervals.

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Chapter 4: Insurance claim rejected? Your rights under the Policyholder Protection Rules

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