

## 1Lifefuneral Plan Policy Document

### Your policy document

What you need to know about your funeral plan, through 1Lifefuneral, a division of 1Lifedirect

Congratulations on the purchase of your 1Lifefuneral Plan brought to you by 1Lifedirect.

We welcome you as a valued client. We've included valuable information regarding your policy below. Please read your policy document carefully so that you understand what you are paying for. Check that the information on your policy schedule is correct. To make corrections or general enquiries, kindly refer to the client services contact details under contact us.

The contract between you and your product supplier consists of:

- the policy document;
- the application for cover by telephone, through the website or mobi site;
- their acceptance of your risk;
- all policy schedules sent to you; and
- the master policy.

### Definitions

**Principal Member:** The principal member is the main member on the policy and is referred to as the policyholder or owner. Your policy documents refer to the principal member as you/ your.

**Financial Services Provider:** The financial services provider (FSP) is the company through which you purchased the product, hence the name product provider. Sometimes the FSP is a different company from the product supplier, for example, it may be a broker. Your policy documents refer to the product provider as your FSP.

**Product Supplier:** The product supplier is the company that supplies the product to the financial services provider who sells it on their behalf. If the product supplier sells their own product, they will also be the FSP. Your policy documents refer to the product supplier as the underwriter or insurer.

The conditions of this policy are consistent with the provisions of the Long-term Insurance Act (Act No. 52 of 1998) and with the terms of the master policy, which is available on request.

### Your funeral plan

This product covers the principal member, spouse and/ or extended family members for funeral expenses, should any one of the members pass away.

### Product features and benefits

- Up to R45 000 funeral cover for the principal member or policyholder
- Level sum assured, so the amount you are covered for will not decrease while your policy is active
- Covers you and/ or the additional members for the whole of your life
- Covers you immediately for accidental death, after payment of your first premium
- 1 (One) spouse can be added at an additional premium
- 5 (Five) dependent children (up to 21 years of age; or 25 if registered as a full-time student) can be added at an additional premium \*
- 10 (Ten) extended family members including 4 (four) parents or parents-in-law and domestic employees can be added at an additional premium
- A Repatriation Benefit for transportation of a member's body from place of death to place of burial after approval of a claim \*\*
- A Grocery Benefit of R1 000, paid to the beneficiary once a month for a period of 6 (six) months after approval of a valid claim on the principal member's life only
- A Headstone Benefit of R5 000, paid out 12 (twelve) months after approval of a valid claim \*\*
- A Premium Waiver to keep the policy paid in full for 24 (twenty-four) months after approval of a valid claim on the principal member's life
- A 48-hour turnaround time for settling claims, after receipt of all valid claim documentation

\* The principal member must notify us of their child's continuation of study past the age of 21, as this benefit will automatically cancel otherwise.

\*\* This benefit applies to members who are older than 14 years of age.

## General terms and conditions

### Contract of insurance

In return for your payment and the receipt and acceptance of your premium, your product supplier will provide funeral cover according to the terms of your policy during the period shown in your policy schedule. Your policy schedule highlights the specifics of your insurance cover and the terms and details therein are very important.

Should a member die before the contract begins, i.e. the commencement date of the policy, as reflected in your policy schedule, no benefits will be payable.

### Contract duration

Cover under this contract begins on the commencement date, as reflected in your policy schedule, provided the policyholder/ owner has paid the first premium. The contract will remain in force until such time that the product supplier or policyholder cancels the policy (see Cancellations below).

### Payment of premiums

Premiums are payable monthly, in advance via a convenient debit order, from the date stated on your policy schedule. For premium payment details, please refer to the payment details section of your policy schedule.

### Deduction over a weekend or on a public holiday

If the debit order date falls on a weekend or public holiday, the deduction will take place either, on the last working day prior, or the first working day after the weekend or public holiday.

If your product supplier does not receive payment within 30 (thirty) days after the due date, they reserve the right to cancel the policy immediately. They will however, endeavour to keep you covered by attempting to collect arrear premiums. Failing this, they will cancel the policy. There are no refunds on premiums already paid to date.

### Once-off administration fee

Your initial debit order will be your first premium plus a once-off administration fee of 50% (fifty percent) of the initial premium, applicable to all new members as stated on your policy schedule. This fee will not apply when reinstating a policy. Thereafter, your premium deduction will take place on the same date every month.

### Premium guarantee period

For the first 12 (twelve) months, your premiums are guaranteed not to escalate. Thereafter, your product supplier reserves the right to reassess the premium with its actuary in order to keep the product actuarially sound in terms of the Long Term Act.

### Reinstatement

Should your contract no longer be in force, your product supplier may reinstate your contract at your request. Your product supplier reserves the right to review the

policy terms and conditions on reinstatement and assess whether to reinstate the cover. The new terms and conditions will be set out in your policy document and policy schedule.

### Governing law and currency

All benefit amounts specified in your contract are in the currency of the Republic of South Africa. All amounts payable to or by your product supplier will be in South African Rands. South African law will govern this contract.

Your product supplier may change the contractual terms of your policy if any law or legislation affects your cover.

### Cancellation

If you decide to cancel your policy, you must do so in writing. Your product supplier will stop your cover once they have received your cancellation letter. The contract will become invalid and your product supplier will not be liable for any benefits after the cancellation date.

Your product supplier will cancel the contract if:

the benefit term expires; or

you fail to pay your premium within 30 (thirty) days of the normal deduction date. The cover will be suspended and your product supplier will endeavour to reinstate cover by attempting to collect arrear premiums. Failing this, they will cancel the contract and fully discharge all their contractual obligations; or

once 24 (twenty-four) months have lapsed, after the principal member died and the continuation option has not been exercised.

### During the cooling-off period

You may cancel your policy, in writing, during the cooling-off period. This is the 30 (thirty)-day period from the date on which you receive your policy documents. Your product supplier assumes that these would have been delivered to your postal address within 14 (fourteen) days of the dispatch date. Your product supplier will refund the premiums you have paid, after deducting any costs specifically charged to provide cover for the period. The cooling-off period only applies if your product supplier has not paid out any benefits.

### After the cooling-off period

Should you cancel your policy at any time other than during the cooling-off period, your product supplier will not refund the premiums already paid to them, as you would have already enjoyed cover.

### Claims procedure

Call the Claims Department (contact details under Contact us) to inform your product supplier of any deaths that may or may not give rise to a claim. When you call, they will ask you or your beneficiary a series of questions, including details of the full circumstances surrounding the incident.

**Claim documentation required**

The following documentation is required for a valid claim:

- Application for Payment of a Funeral Claim Form, completed and signed by the beneficiary
- Certified copy of death certificate
- Certified copy of deceased member's ID document, no more than 3 (three) months old
- Certified copy of beneficiary(ies) ID document, no more than 3 (three) months old
- Certified copy of marriage certificate, no more than 3 (three) months old, if the principal member's spouse is a beneficiary
- BI1663 form – Notification/ Register of Death
- Three (3) months bank statement of the member prior to death
- Three (3) months bank statement of the claimant.

If the deceased died due to unnatural causes, the following would be required as well:

1. Police report – to be completed by the investigating officer
2. Full post mortem report
3. Body Identification form
4. Road traffic accident report (if applicable).

**Important claims time limits**

Your product supplier must be notified of an event that may result in a claim for a death benefit within 6 (six) months of its occurrence. They may reject a claim if they do not receive notification within the prescribed periods.

Initial claims documentation must reach them within 3 (three) months of the claim event

Any additional documents required for processing the claim must reach them within 3 (three) months of request.

**Disputed claims**

Your product supplier will notify you within a reasonable period after receipt of the claim, whether it is accepted or rejected, or if the claim amount is in dispute, including the reasons for their decision.

You are granted 90 (ninety) days to make representations to your product supplier about their decision on the claim, in writing. Your product supplier will respond to your representations within 10 (ten) days of receipt. Should your product supplier confirm their decision to reject or dispute the claim amount, you can either refer your complaint to the Ombudsman for Long-term Insurance or institute legal proceedings against your product supplier within 6 (six) months from receipt of their confirmation.

True and complete information, material misrepresentation, or non-disclosure

**Material information**

The age and gender of the member is material to the acceptance of this policy. Please note that any incorrect or incomplete information may result in the non-payment of a claim.

**Duty of disclosure**

You must disclose all material facts accurately and completely. All answers, statements and any other information you provide are your own responsibility.

Incorrect information, non-disclosure or misrepresentation of information may influence claims arising from your contract of insurance and the product supplier's decision to provide the benefits in terms of your policy, or to accept or terminate your policy.

It is very important that you tell us as soon as possible if any of the details on your schedule change. Failure to do so could result in the product supplier declining your claim.

They may also not provide benefits, if you fail to carry out your obligations in terms of your contract of insurance

**Exclusions**

During the first 24 (twenty-four) months risk period and 24 (twenty four) premiums, from the commencement date or reinstatement of cover, your product supplier will not pay benefits on claims where the member's death is directly or indirectly as a result of his/ her own act. This exclusion applies even if the suicide attempt occurred due to temporary or permanent insanity, mental illness or the influence of drugs or intoxication of the member.

**Waiting period**

During the first 12 (twelve) months and 12 (twelve) premiums, from the date of commencement of this contract, your product supplier will only pay claims for accidental death. The beneficiary(ies) will not be entitled to claim under this benefit, should any member die from natural causes..

If a new member is added to the policy at a later stage, a new 12 (twelve) months and 12 (twelve) premiums, from the date they were added, will apply for the new member(s).

**Language**

Your product supplier communicates with its clients in English over the telephone and in writing. All explanations and communications conducted in another language are merely for the client's convenience and to aid understanding.

Should any discrepancy arise in interpretation and/ or understanding, the English version of the policy documents will take precedence.