

Cover your valued employees

in 4 easy steps with the
FNB Group Funeral Plan.



Funerals can be expensive, many of your employees or the members within your association may not have the funeral cover to pay for these costs, when an employee or a member of your association passes away heartbroken family members may look to you for financial support.

Our Group Funeral Plan is designed to make a difference in the lives of your employees or association members' families while also protecting your business' cash flow.

Apply with ease



Check your details



Choose the
type of funeral
cover



State number
of lives to cover



No need
to print
and scan

Options best suited to your needs:

Cover Amount	Cover Types			1-5 Main	6-10 Main	11-50 Main	51-100 Main	101+ Main
	Main Member Only	Main Member & Spouse	Main Member Spouse & Children					
R20 000	R49	R69	R71	5%	10%	15%	17.5%	20%
R30 000	R65	R91	R94					
R40 000	R85	R119	R123					
R50 000	R105	R147	R152					
R60 000	R125	R175	R181					

*Only one cover type can be selected and one group can be created per cover amount, which will be the same for each employee/member. The spouse's cover will be equivalent to that of the main member. Cover amount for a child is R10 000.

Benefits for your employees and yourself



Pays a lump sum
cover of up to
R60 000



Pays double the cover
amount if Main Member
passes away due
to an accident



Cover your employee,
their spouse and
5 children.



Now available to
Non-South Africans
residing in SA.



You get a **Premium
discount** with the more
people you cover



Earn up to 15%
of your premiums
back in eBucks*

Free telephonic
24/7 counselling

Legal advice

Financial
mentoring

Non-South Africans
residing in SA

Family care
support

Health@Hand

Key Disclosures:

- The plan covers nominated individuals between the ages of 18 and 64.
- Cover starts on the date the application is accepted by FNB Life.
- Claims are paid directly to the beneficiary nominated by the insured individual.
- Claims are paid into a South African bank account nominated by the beneficiary.
- You may cancel the plan within two months and we will refund you your premiums, provided no claim has been made.
- The plan and all cover will end if the premiums are not paid as agreed.
- Claims will be paid out immediately for accidental death, after 3 months for natural death and after 12 months for suicide.
- The plan will not pay out if death occurred as a result of driving under the influence of alcohol or narcotics.
- The plan will pay out only where death of a non-South African insured life occurred within South African borders.

> For more information call us on 087 736 7778

*eBucks is embedded in the Insurance Products, and earn depends on meeting and maintaining qualifying criteria eBucks Rewards for Business terms, conditions and rules apply

Terms and conditions apply.

First National Bank – a division of FirstRand Bank Limited. An authorised Financial Services and Credit Provider (NCRCP20). Insured by FirstRand Life Assured Limited.



FNB Group Funeral Plan

Please complete the application form in order to provide cover for your employees / members.

You or the authorised person must inform FNB Life of any changes to the Insured Persons (for example: new appointments, retrenchments, dismissals, retirement and resignations).

1. Plan Owner Details:

Name & Surname
or Trading Name
(if applicable) or
Company Name

ID Number or
Company Reg
Number.

2. Authorised Person:

First Name(s)

Surname

ID Number

Designation

Contact Number

Email Address

3. Banking Details and Debit Order Authorisation:

I, the undersigned, hereby authorise FNB Life to submit a Debit Order on the _____ day of _____ (month) and every month there after in payment of premiums due on this Plan against the account specified below. I will be able to identify this collection against the account as FNB FUNERAL followed by my plan number. This authority remains in force until terminated in writing. I agree to advise FNB Life of any changes to the account details and understand that if the employment relationship changes with any Insured Person, FNB Life will be notified timeously in order to adjust the debit order accordingly.

Bank

Branch Code

Account Number

We will debit the above bank account with the monthly premium on the date selected. If we fail to collect a premium, we will collect a double premium on your next scheduled collection date and should this remain unpaid, we reserve the right to continue attempting to collect the double premium for up to another month. If the double premium collection fails the Plan will lapse and cover will end immediately.

Authorised Person's Name and Surname

Date

4. Cover details

Select a cover type applicable to the total persons you intended to cover

Select a cover amount applicable to the total persons you intended to cover **R**

Total employees / members in your business / association

Total employees / members you want covered

A policy will be created on your behalf based on your above selection. You can provide the employee details upfront or you may opt to send the information to FNB Life Business (fnblifebusiness@fnb.co.za) within 90 days from when you receive your policy details. Should you opt for the latter, please refer to clause 2 in your terms and conditions.

5. Declaration

The Employer /Authorised Person hereby declares / agrees to the following:

- The information provided in this application form, including its' annexure, is correct and accurate.
- The FirstRand Group may collect, use, store, share or otherwise deal with this information and that of your employee/s covered under this plan, as shared by you.
- That to the best of my knowledge the insured persons listed below are in good health and meet the qualifying criteria under this plan.
- The application for this FNB Group Funeral Plan is subject to the Insurer's approval.
- The FNB Group Funeral Plan Terms and Conditions forms part of the agreement.
- Only the Employer/Authorised Person may request amendments to the FNB Group Funeral Plan, which includes the removal or addition of Insured Persons.
- The Authorised Person may be changed by the Plan Owner provided this instruction is in writing.
- By signing this application, the Authorised Person warrants that he/she has full authority to represent the Employer or Association and to take-up the FNB Group Funeral Plan.
- The majority of the individuals I intend to insure are South African citizens or permanent residents with a valid South African ID.
- The non-South African employees I intend to insure hold a valid work-permit and are residing in South Africa.

Authorised Person's Name and Surname

Date

6.1. Insured South African employee(s) Details:

We will contact listed employees to source beneficiary details, failing which the beneficiary will default to the employee’s estate. Only individuals may be listed as beneficiaries, not organisations, the employer or relatives of the employer.

You can choose to provide the information below now or submit this detail later:
(please refer to clause 2 of your Ts & Cs should you opt to provide the details later)

****Note for Foreign National employees beneficiary details are required before inception of policy.**

(please complete all fields)

Name	Surname	13-digit RSA ID Number	Mobile Number
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6.2. Insured Non-South African(s) Details:

Only individuals may be listed as beneficiaries, not organisations, the employer or relatives of the employer.

****Note for Non-South African members, beneficiary details are required before inception of policy.**

(please complete all fields)

Non-SA members:

	Full Name	Country of Origin	ID Number	Mobile Number
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Beneficiary:

	Main Member Name	Full Name	ID Number / Date of Birth	Mobile Number
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

7. Terms and Conditions: FNB Group Funeral Plan

The FNB Group Funeral Plan (this “Plan”), which is a Group insurance policy entered into with an employer or an association, is subject to terms, conditions and exclusions set out in this document and the information provided and agreed to by the Plan Holder. This document together with the Plan Schedule and Customer Agreement (where relevant) form the basis of the agreement.

The Plan Holder must keep these documents in a safe place and make its contents available to Insured Persons who are covered on the Plan.

1. Who offers the insurance?

FirstRand Life Assurance Limited (also referred to as “FSR Life”) is the insurer. Any reference to “we, us, our, ourselves” in this document shall mean FSR Life or FNB, as the case may be.

2. Who is insured under the Plan?

The Customer Agreement specifies the persons insured and the amount which they are insured for under the Plan. A valid Employer/Employee or Association/Member relationship must exist between the Plan Owner / Holder (Premium Payer) and Insured Person/s as defined below:

- **Plan Holder:** The Plan Holder will be referred to as “you, your, yourself”, and is defined as the premium payer and employer of the Insured Person/s or the Association to which an Insured Person/s is a Member.
- **Non-South African Insured Person:** An Insured Person in possession of a valid passport, residing in South Africa without a permanent residence permit in terms of the Immigration Act 13 of 2002.
- **Insured Person/s:** The employee, younger than 65, who is Actively Employed by the Plan Holder or a Member of an Association from the Start Date of this Plan.
 - o The majority of Insured Persons must be South African citizens or permanent residents and must be:
 - In possession of a green bar-coded RSA ID book or a Smart ID Card;
 - Over 16 years of age; and
 - Active at Work at his/her Entry Date to the Plan
 - o In the case of a non-South African Insured Person(s), the Policyholder will ensure that we have the correct details of these Insured Persons including:
 - Declaration of Insured Persons that are non-South African, along with their country of origin; and
 - Valid passport information, including but not limited to, passport number, in-country identity number, date of birth and gender.
- **Actively Employed** means a person who is an employee as described in the Basic Conditions of Employment Act 75 of 1997 and who carries out normal and regular duties of the job for which he/she is employed throughout the period he/she is covered. It is your responsibility to ensure that we have the correct personal details of all Insured Persons under the Plan and that all your non-South African employees have a valid work permit.
- **Association:** A voluntary and independent group of persons formed and organised for a joint purpose (such as to meet the group’s social or economic needs). For example, a Stokvel, professional association or a taxi association.

- **Member/s:** A valid participant, who is younger than age 65, in the Association appointed in terms of the rules of the Association.
- **Spouse:**
 - o The person who the Insured Person is married to or who they have entered into a Civil Union in terms of South African law. If the Insured Person is married in terms of the Recognition of Customary Marriages Act to more than one spouse, only one of them can be covered as a Spouse.
 - o The Insured Person’s life partner who the Insured Person is living with for at least 24 months, in a long-term, open and acknowledged relationship, capable of being registered under South African law.

Only one Spouse can be covered during the life of the Plan. The biological parent of the Insured Person’s biological child can also be insured as a Spouse. The Insured Person can either insure his/her Spouse or a biological parent but cannot insure both a Spouse and a biological parent at the same time.

In the case of a non-South African Insured Person(s), only a Spouse or a child residing in South Africa at the time of death will be covered.

- **Child(ren):** The Insured Person’s biological, adopted or stepchildren, who must be under the age of 21 years. This does not include grandchildren. The Insured Person can cover up to a maximum of 5 Children on this Plan.
- **90-Day Admin Grace Period:** This is the period where you will have cover from the Start Date for your Insured Persons and/or their Spouse and Children, even though you have not yet provided any Insured Persons (employees) or Member details.
 - o At the Start Date of this Plan you will need to provide us with the total number of Actively Employed staff or Members who you intend to cover. You will also need to provide us with the total number of Actively Employed staff, who your business employs, or Members to your Association.
 - o It is during this time that you will need to provide us with the Insured Persons names, ID numbers, cellphone numbers.
 - o Once the 90 days are up, we will only cover the Insured Persons whose full details are provided and their Spouse and Children where this option was selected.
 - o If a claim is submitted during this 90-day period for an unnamed Insured Person or a Spouse or a Child to an unnamed Insured Person, we will:
 - Need proof of employment or membership of the Insured Person at the Start Date of the Plan and relevant documents, as stated in Clause 10;

- Pay that claim based on the total number of unnamed Insured Persons against the total number of Actively Employed staff. For example:

$$\text{Claim Amount} = \frac{\text{Total number of unnamed Insured Persons "X" cover amount}}{\text{Total number of unnamed Actively Employed Staff Or Members}}$$

- Incorrect personal details could be considered a material misrepresentation which will result in us disputing or rejecting claims on the Plan. You must be authorised to provide any personal information of third parties to FSR Life. In doing so, you indemnify FSR Life against any and all losses by or claims made against it as a result of you not having the required authorisation.
- All Insured Persons will remain insured for as long as the Plan remains in force, they are listed on the plan and qualify to be Insured Persons, and they remain in the employment of the business that is the Plan Holder or remain a Member of an Association.

3. What does the Plan cover?

This Plan pays out the specified cash benefit in the event of death of an Insured Person/s. **Accidental Death Benefit:** In the event of an Accidental Death of the insured person, this Plan pays out the specified cash benefit as selected by you and stated in the Customer Agreement. The Accidental Death Benefit does not apply to a Spouse and Children.

Accidental Death means a death caused solely by injury sustained during an Accident, which is independent of all other causes, within 90 days after the Accident. Accident means an unexpected event resulting in injury caused by direct, external, violent or physical means.

ICAS: Employee Health and Wellness Programme

The ICAS service is offered to all Insured Persons and their family members free of charge. Use of this service is entirely optional. Choosing to not use this service will not impact your existing profile with FNB or the performance of your FNB Group Funeral Plan. We reserve the right to remove this service at any time and we will notify you of this change 31 days in advance.

We will not accept any liability for any damages because of the advice or service received from ICAS or any third party.

Benefit Description: ICAS provides the Insured Person and their family members with unlimited telephonic access to qualified professionals who offer counselling, family care support and advice on health, legal and financial well-being in any of the 11 official South African languages. The service is limited to telephonic advice, during business hours, and counselling, which is available 24 hours a day.

Family Care Support means telephonic assistance by a team of professionals, including social workers, psychologists and medical and legal practitioners with expertise and experience in childcare, eldercare, adoptions, education and social benefits, and disability.

The service is supplied by ICAS and is not intended to be a substitute for, or to replace, professional legal or medical advice, diagnosis, or treatment, of existing or underlying health conditions. The use of any information provided through this service is solely at the Insured Persons' own risk, and we cannot be held responsible for any injuries, loss or damages the Insured Persons or others may incur because of the use of the service.

Please contact ICAS on 0800 110 717, or request to be called back by dialling *134*905#.

4. When does the cover and Plan start?

Once we accept your Plan, the contract (which includes the Plan Schedule, Customer Agreement (where applicable) and Terms and Conditions,) will take effect. You and the insured person will be notified once cover is accepted.

5. What and when must you pay?

Premium Collection: You must pay the premium amount stated in the Customer Agreement. Premiums are payable monthly in advance. Partial premium will not be accepted. We will collect premiums each month by debit order on your chosen premium collection date, and premiums must be collected from your nominated FNB/RMB bank account. If you do not have enough money in your account for us to collect the premium/s, our electronic tracking service may continue to check your account. The unpaid premium/s could be collected should there be enough money in your account.

If the premium collection date falls on a Sunday or a South African public holiday, we will collect your premium on either the business day before or after your chosen date. You can ask us to change your premium collection date at any time by notifying us in writing or by contacting our call centre. If we agree, the new date will become your premium collection date. We reserve the right to collect your premium on a later date than agreed.

If we fail to collect a premium, we will collect a double premium on your next scheduled collection date and should this remain unpaid, we reserve the right to continue attempting to collect the double premium for up to another month. No money in your account may result in us electronically tracking your account, submitting the debit order until we collect. If the double premium collection fails, the Plan will lapse, and cover will end immediately. If successful, your plan will continue as per the agreement.

Premium Adjustment: Premiums may be reviewed every year and may or may not be adjusted. Premium adjustments will only be done if it is not viable for us to provide cover under this product under this pricing anymore. The increase or, decrease of premiums, or the termination of the Plan, will be done for everyone who has this Plan and not only you. In such cases, we will tell you 31 days ahead of time of any changes or termination being made.

Upgrade and downgrade: The Plan Holder can choose to either upgrade or downgrade the cover type or the cover amount. This may change the premium amount and waiting periods. Waiting periods will remain unchanged if you downgrade the cover option or the cover amount. If you choose to upgrade the cover option or the amount, then waiting periods for Spouse and/or Child cover will take effect depending from when the main Insured Person is added to the Plan, as well as from the date the cover option was upgraded.

6. eBucks Rewards:

This Plan allows you to earn eBucks back on your premiums, provided you have met the qualifying criteria (eBucks Rewards Terms and Conditions apply). For more details on the eBucks Rewards Programme, and how to become a qualifying eBucks member, please visit www.eBucks.com. If you have any queries regarding eBucks Rewards, please contact the eBucks Contact Centre on 087 320 3200, or email info@eBucks.com.

7. When does the Plan or cover end?

The plan and all cover ends:	Cover for Insured Person ends if:
When the Plan is cancelled.	The Plan ends or the insured person is removed from the plan.
If we do not have full details of at least one Insured Person at the end of the Admin Grace Period.	We do not have complete details at the end of the Admin Grace Period.
If you do not pay the premiums as agreed.	An Insured Person reaches the age of 65.
On the death of all Insured Persons.	The Child reaches the age of 21 years.
	The employment relationship ends, e.g. retrenchment, dismissal, retirement or resignation.
	The Member no longer participates in the Association.

You can cancel the Plan at any time. We will refund any premiums paid if the cancellation is within the 2 months from the Plan's Start Date (this is known as the "cooling-off period") and if you haven't claimed, otherwise no refund of premium will be made. We may immediately cancel this Plan or place it on hold, refuse any transaction or instructions, or any other action that we consider necessary in order to comply with laws and prevent or stop undesirable or criminal activity.

We may refund you the premiums paid for the period during which the Insured Person did not have cover due to the end of the employment relationship, provided that you notify us within 90 days from the date when the employment relationship ended. We may ask you for proof regarding the termination of the employment.

Waiving of Waiting Periods: We will waive any waiting periods that you or the Insured Person(s) on your Plan have already served on another registered insurer's policy, for the same type of benefits, if you give us a copy of the policy schedule and proof of cancellation of this policy. The following conditions apply:

- Your previous policy with that insurer was active at least 31 days before the start date of this plan;
- If the waiting period of the insured person under the previous policy had not expired, a waiting period equal to the unexpired part of the waiting period under a previous policy will apply.

8. Waiting Periods and Exclusions (when will you not be covered?)

Cause of death:	Waiting period end date:
Accidental Death*	None
Natural causes	3 months after the Insured Person is added to the Plan
Suicide	12 months after the Insured Person is added to the Plan

We will not pay any amount, including benefits / refund of premiums, in the case where:

- Death arises from active participation in war, invasion, act of foreign enemy, criminal acts, hostilities or war-like operations

(whether war has been declared or not), civil war, military uprising, military or usurped power, martial law, insurrection, rebellion or revolution;

- Death occurs while a non-South African insured life is outside South African borders;
- The Insured Person dies while driving a vehicle and their blood alcohol level is over the legal limit or they are under the influence of alcohol or narcotic drugs; and
- The terms and conditions of this Plan are not met.

9. How and when to make a claim?

The claimant (you, the beneficiary or executor / representative of the Insured Person's estate), must notify us of a claim as soon as possible after the event, within 12 months of the claim event occurring. If this is not done, the claim will prescribe, and we shall not be liable to pay any benefits under this Plan for such claim. Claims can be made at the nearest FNB Branch, with FNB Life on 087 736 7778 or at fnbclifeclaims@fnb.co.za or write to the Claims Department, P.O Box 1153, Johannesburg, 2000.

10. What documentation is required to claim?

The following documents are required to process the claim:

- Certified copy of the fully completed BI1663 form (notice of death);
- We may require proof that the Insured Person is registered as an Employee of the Plan Holder at the Unemployment Insurance Fund (UIF) of South Africa;
- If a claim is made for a spouse, proof of marriage is needed;
- If the claim is made for a Child(ren), an unabridged birth certificate of the Child is needed, and it must reflect:
 - Completed claim form;
 - We reserve the right to request any additional information, including medical and hospital records, in order to verify or process the claim, which must be provided at the claimant's cost; and
 - The claimant must, where applicable:
- Completed claim form;
- We reserve the right to request any additional information, including medical and hospital records, in order to verify or process the claim, which must be provided at the claimant's cost; and
- The claimant must, where applicable:
 - Work with us by giving us all evidence and information we may need to decide on a claim;
 - Work with us by giving us any extra evidence or information we may need at any time, such as documents, history, records, reports, examinations, opinions, certificates, test results and other information, from any Specialist, medical practitioner, hospital, medical institution, employer or any other person who may be in possession of such evidence, concerning the claim of an Insured Person;
 - Pay for the costs of getting this evidence and information.

11. Who we will pay in the event of the death of an insured life?

If the Spouse or Child(ren) pass away within the South African borders, the benefit will be paid to the Insured Person (the employee).

If the Insured Person passes away, the benefit will be paid to his/her nominated beneficiary who must be within the South African borders. A non-South African Insured Person must always specify a beneficiary.

It is important for an Insured Person with a valid South African identity number to choose a beneficiary. If they don't, then their Cover Amount will be paid out to their estate and it may take longer for their loved ones to receive this pay-out from their estate. The following rules apply to nominating a beneficiary:

- The Insured Person must inform us if his/her beneficiary changes. A beneficiary may be specified at any time prior to death of the Insured Person by the Insured Person. For the change to be effective it must have been received and noted by us prior to the death of the Insured Person;
- The beneficiary must be a natural person within the South African borders, 18 years or older and cannot be a company, business, charity or trust;
- It is the Insured Person's responsibility to ensure that we have the correct personal details and contact number of the beneficiary as nominated by the Insured Person to avoid any claim delays.

12. Reinstatement

If a Plan is cancelled (or lapsed) after we have received at least one premium, it can be reinstated (with no additional waiting periods) within 3 months if all unpaid or missed premiums are paid.

13. Conversion

Only an Insured Person with a South African identity number may choose to continue cover as a plan holder under a standalone FNB Funeral Plan when this Plan ends or when his/her cover ends. In this event, all waiting periods already served by the Insured Person under the Plan will be transferred to the converted plan, provided that it is done within 90 days after the cover has ended. Cover under the converted FNB Funeral Plan will only start from the date when it is converted.

14. General terms and conditions

IMPORTANT NOTICE: We strongly recommend that each Plan Holder get their own tax advice on the tax treatment which will apply to them and the Insured Persons. We cannot be held responsible for any damages, claims and/or fines made against the Plan Holder or Insured Person which are the result of any tax liability on the Plan and the payment of premiums for Insured Persons.

Taxation: The Income Tax Act governs the taxation of the premiums and benefit pay-out for standalone group risk benefits. It is important that you take note of the following:

- Premiums paid on behalf of an employee should be taxed as a fringe benefit; and
- The Plan Holder (i.e. Employer) may then claim a deduction for these premiums.

Role Player:	Responsibility:	Impact:
Plan Holder	Fringe benefit deduction for Premiums Paid	Include Fringe Benefit for PAYE on IRP5/IT3(a)
Insured Person		Lump Sum Benefit is tax-free (exemption applies)

This contract is based on the written, digital and/or telephonic disclosures and information that you have provided to us. At times, we may be lenient in enforcing the Terms and Conditions of the contract or the rights that we have in terms of it, if it is to your benefit. Such leniency will not prevent us from being able to enforce any existing or future right we have under the Plan.

Borrowing or security: You cannot borrow money under this Plan or use it as security for a loan. No money will be paid out if this Plan ends and this Plan does not have any surrender or paid-up value.

Reviews: We have the right to change or cancel the Plan or any part of the Plan such as a change in premiums, for any reason including changes in legislation or other rules applicable to this Plan and will notify you via post, SMS, email or any other means within 30 days of any such change being implemented. We will communicate with Insured Persons via SMS.

Legal issues: Any legal issues will be decided according to South African Law.

Changes to cover or Insured Persons: The Plan Holder may increase or decrease cover amounts, applicable to all Insured Persons, as well as add or remove Insured Persons on the Plan. Increases in cover or cover on new Insured Persons will be subject to the same eligibility criteria as for a new Plan and will be subject to the waiting periods as stated in clause in 8.

Example of changes that the Plan Holder can make to the Plan are (but not limited to):

- Increase or decrease cover levels
- Add or remove benefits
- Change contact person(s)
- Change contact information
- Update banking details debit order

Example of changes that the Insured Person(s) can make to the Plan are (but not limited to):

- Change contact information
- Change the beneficiary
- Change the details of the beneficiary

The Start Date of the increased cover or the new Insured Persons will be the date we load it. You can cancel a change to your Plan within 2 months of making it. We will refund any additional premium paid as a result of this change.

We may collect information from you directly or from any third parties (including but not limited to ASISA, Astute, Home Affairs and credit bureaus etc.) for underwriting, issuing of policies, assessment of claims and all other insurance related purposes.

Unclaimed Benefits: The Plan Holder/Beneficiary will be contacted if a claim was approved and remains unpaid. If we are unable to make contact, the benefit will be deemed unclaimed. Costs incurred in tracing a Beneficiary may be recovered from the Plan. We will follow the ASISA standard on unclaimed benefits.

Information provided: You or the claimant (in event of claim) have an obligation to accurately and properly disclose all material facts. You or the claimant (in event of claim) remains responsible for the accuracy and completeness of all answers, statements or other information provided. Misrepresentation, non-disclosure of a material fact or an incorrect or inaccurate statement or information may lead to the rejection of a claim or the cancellation of this Plan and keeping the premiums you have paid. It is your obligation to accurately and properly disclose all material facts. If any of the information or statements that you give us is materially incorrect, fraudulent, misrepresented or omitted, or if you did not give us the relevant information when starting, or changing your plan, or submitting a claim, we have the right to:

- Change the Terms and Conditions of your Plan;
- Cancel your Plan from any date that we choose and to keep your premiums for the cover you had until the date of cancellation;
- Treat your Plan as if it had never started and refund your premiums, less any costs we have incurred (for example, administration costs);
- Not pay out any claims;
- Recover any amount paid on a claim, which later transpires to have been a fraudulent claim; and
- Recover from you any amounts that we have paid for previous claims.
- You are entitled to a copy

Product Supplier and Underwriter: FSR Life is a registered life insurer, Licence No. 00102/001, Registration No. 2014/264879/06. 3rd Floor 5 First Place, BankCity, 9 Kerk Street, Johannesburg, 2001. PO Box 1153, Johannesburg, 2000. Tel. 087 736 7778. Email: fnblife@fnb.co.za FAIS class and type of product: Category 1, Category 1.3 (Long-term Insurance – subcategory B1).

Financial Service Provider: First National Bank (“FNB”), a division of FirstRand Bank Limited, an authorised Financial Services and Credited Provider (NCRCP20); Reg. No. 1929/001225/06; 3rd floor, 5 First Place, 9 Kerk Street, BankCity, Johannesburg, 2001; PO Box 1153, Johannesburg, 2000; www.fnb.co.za. Tel: 0860 11 22 44 / +27 11 369 1088 (international). Email: fnblife@fnb.co.za. FNB is a registered financial services provider for this class and type of product.

The Plan is provided under a contractual agreement between FSR Life and FNB. FNB takes responsibility for the actions of its authorised representatives insofar as they are providing financial services in respect of this Plan. Some representatives may be rendering services under supervision and will inform you accordingly. There is a contract between FNB and FSR Life for which it collects a fee for services rendered for this Plan. FSR Life and FNB hold professional indemnity insurance cover.

FNB and FSR Life are associates in terms of the FAIS Act.

15. Complaints Procedures & Regulatory Disclosures

If we reject the claim or any portion thereof, you have 90 days to ask us in writing for a review of the decision. We will review the claim decision when we receive that request and tell you of our reviewed decision in writing. If you do not start with legal action within 180 days from the day when we tell you of the reviewed decision, your claim will fall away, and you will not be able to take legal action against us.

Plan or Claim Complaints: If you have any complaint about this Plan or a claim, please contact the Complaints Call Centre at phone number 087 575 9408, or email: care@fnb.co.za. You can contact the compliance officer on phone number 087 736 7776 or email: lifecompliance@fnb.co.za.

Unresolved Complaints: If we still dispute or reject your claim and you are not satisfied with the reasons provided for such rejection or if you have any unresolved dispute about this Plan, you may refer the matter to the Long-term Insurance Ombudsman: Private Bag X45, Claremont, 7735. Tel: (021) 657 5000 Fax: (021) 674 0951, www.ombud.co.za. Third Floor, Sunclare Building, 21 Dreyer Street, Claremont, Cape Town, 7700.

If after you have contacted FNB and you have any unresolved dispute about the financial service provided to you, you can contact the FAIS Ombudsman: Kasteelpark Office Park, 2nd Floor, Orange Building, Cnr Nossob & Jochemus Streets, Erasmuskloof, Pretoria or PO Box 74751, Lynnwood Ridge, 0040. Tel: 012 470 9080 / 012 762 5000, Email: info@faisombud.co.za, www.faisombud.co.za.

Financial Services Provider Complaints: If you have any complaint about the financial services provider, FNB, you can contact the Complaints Call Centre at phone number 0860 11 22 44; or fax 011 632 2317; or email care@fnb.co.za. You can contact the compliance officer on 011 371 7953 or fax 011 371 2192.

16. How we use your information:

- a. You can refer to our Privacy Policy [www.fnb.co.za] for more information on our privacy practices.
- b. FirstRand Limited (“FSR”) and its affiliates and/or appointed third parties (like its authorised agents, advisors, partners and contractors) collect information from you directly; from your usage of our products and services; from your engagements and interactions with us; from public sources and from third parties.
- c. Your information will be confidential and will only be processed if you consented thereto; it is necessary to conclude or perform in terms of a contract with you; the law requires it or your, our or a third parties lawful interest is being protected or pursued.
- d. FSR may process your information; this includes among others information regarding marital status, national origin, age, sex, language, birth, education, financial history, identifying number, e-mail address, physical address, telephone number, online identifier, social media profile, physical or mental health, disability, pregnancy, sex life, biometric information (like fingerprints, your signature or voice), race or ethnic origin, trade union membership, political persuasion, financial history, criminal history and your name.

- e. The processing of information includes the collection, storage, updating, use, making available or destruction thereof.
- f. FSR may process your information for the following reasons (among others):
 - To comply with legislative, regulatory, risk and compliance requirements (including directives, sanctions and rules), voluntary and involuntary codes of conduct and industry agreements or to fulfil reporting requirements and information requests.
 - To detect, prevent and report theft, fraud, money laundering and other crimes.
 - To enforce and collect on any agreement when you are in default or breach of the agreement terms and conditions, like tracing you or to institute legal proceedings against you.
 - To conduct market and behavioural research, including scoring and analysis to determine if you qualify for products and services.
 - To develop, test and improve products and services for you.
 - For historical, statistical and research purposes.
 - To process payment instruments (like a cheque) and payment instructions (like a debit order).
 - To create, manufacture and print payment instruments (like a cheque) and payment devices (like a debit card).
 - To do affordability assessments, credit assessments and credit scoring.
 - To manage and maintain your accounts or relationship with FSR.
 - To disclose and obtain information from credit bureaux regarding your credit history.
 - To enable you to participate in the debt review process under the National Credit Act, where applicable.
 - For security, identity verification and to check the accuracy of your information.
 - To communicate with you and carry out your instructions and requests.
 - For customer satisfaction surveys, promotional and other competitions.
 - To market to you or provide you with products goods and services.
 - To carry out actions for the conclusion or performance of your Plan.
 - To carry out actions under your Plan, to protect your legitimate interests and to pursue the legitimate interests of FSR or of a third party.
- g. FSR may share your information with the following persons (amongst others) whom has an obligation to keep your information secure and confidential:
 - Attorneys, tracing agents, debt collectors and other persons that assist with the enforcement of agreements.
 - Debt counsellors, payment distribution agents and other persons that assist with the debt review process under the National Credit Act.
 - Payment processing services providers, merchants, banks and other persons that assists with the processing of your payment instructions.
 - Insurers, brokers, other financial institutions that assist with the providing of insurance and assurance.
 - Law enforcement and fraud prevention agencies and other persons tasked with the prevention and prosecution of crime.
 - Regulatory authorities, industry ombudsman, governmental department, local and international tax authorities and other persons that FSR under the law have to share your information with.
 - Credit bureaux.
 - FSR's service providers, agents and sub-contractors like couriers and other persons FSR uses to offer and provide products and services to you.
 - Persons to whom FSR cedes their rights or delegates their obligations to under agreements.
- h. FSR can process your information outside of the borders of South Africa, according to the safeguards and requirements of the law.
- i. FSR may process your information using automated means (without human intervention in the decision-making process) to make a decision about you or your application for any product or service. You may query the decision made about you.
- j. You have the right to access the information FSR has about you by contacting us at FNBCComplianceSupport@fnb.co.za or 011 371 8494.
- k. You have the right to request us to correct or delete the information FSR has about you if it is inaccurate, irrelevant, excessive, out of date, incomplete, misleading, obtained unlawfully or no longer authorised to be kept. You must inform us of your request.
- l. You may object on reasonable grounds to the processing of your information. You may not object to the processing of your information if you have provided consent or legislation requires the processing. You must inform us of your objection at care@fnb.co.za.
- m. You have the right to withdraw your consent which allows us to process your information; however, we will continue to process your information if permitted by law.
- n. You have the right to file a complaint with FSR or the Information Regulator, once established, about an alleged contravention of the protection of your information.
- o. You must be authorised to provide any personal information of third parties to FSR. In doing so, you indemnify FSR against any and all losses by or claims made against it as a result of you not having the required authorisation.