

**DETAILS OF THE INSURER:**

Centriq Insurance Company Limited, is a registered short-term insurer and an authorised financial services provider (FSP No 3417) insurer and the entity that will pay the policy benefits subject to the terms and conditions of the policy being met.

This endorsement to your Policy gives you additional Cover. It should be read together with the terms of your Policy.

**TABLE OF POLICY BENEFITS ("Cover")**

The premium for the Cover for main member and spouse is R15.80(Excl.VAT).

If you include up to 5 of your children on this Policy the additional premium for the Cover will be an amount of R10.51 (Excl.VAT).

<b>DEATH CASH BENEFIT</b>		
<b>Who is covered</b>	<b>What is covered</b>	<b>Benefit limits</b>
An insured person (whose names and date of birth you have given us) and for whom the applicable premium has been paid. You can also choose to cover*:  • Your Children, under the age of 21.  *the applicable Premium will apply	The death of You or your spouse from any cause not excluded in this policy.	R20,000.00 (Twenty Thousand Rand)
	The death of your children from any cause not excluded in this policy.	Up to R8,000.00 (Eight Thousand Rand)
	Child 0 – 11 months	R2,000.00 (Two Thousand Rand)
	Child 1 – 5 years	R4,000.00 (Four Thousand Rand)
	Child 6 – 13 years	R6,000.00 (Six Thousand Rand)
	Child 14 – 21 years	R8,000.00 (Eight Thousand Rand)

**IMPORTANT NOTICE**

This Short-term Insurance Policy is underwritten by Centriq Insurance Company Limited (Reg. No. 1998/007558/06). Centriq agrees to provide the cover under this Policy during any period of insurance for which You have paid a Premium (i.e. the Fee) and subject to the terms and conditions of this Policy being met. We will accept any proposal or declaration that You have made to Us as true, and Centriq shall use that information as the basis for the cover provided under this Policy. If Centriq makes any changes to Your Policy those changes will then form part of the Policy. **PLEASE NOTE THAT THIS IS NOT A FUNERAL POLICY.**

**1. WHEN CAN YOU CLAIM?**

- 1.1. This endorsement increases the Cover you already have subject to your payment of the additional premium.
- 1.2. All terms (and exclusions) applicable to your insurance Policy and Cover are the same for the Cover you receive under this endorsement so you must read this endorsement with your Policy. If you need another copy of your Policy, please call us on 0861 990 000.
- 1.3. If this Policy (including this endorsement to your Policy) lapses, the Policy and waiting periods will start again on your next successful payment.
- 1.4. Claims for natural death have the following waiting periods for the event giving rise to a claim:
  - i. 6 (six) months from the Start Date in the event of natural death – **6 consecutive premium payments;**
  - ii. 12 (twelve) months from the Start Date in the event that natural death is directly or indirectly caused by venereal disease, acquired immune deficiency syndrome ("AIDS"), HIV or AIDS-related complications, irrespective of how the disease is contracted or whether it has led and/or contributed to further complications/illness including, but not limited to, tuberculosis, gastroenteritis, multiple organ failure, hepatitis or pneumonia – **12 consecutive premium payments.**
- 1.5. Any waiting periods that apply on your Policy will apply to this endorsement. For example, there is a 6 month waiting period for natural death, if you have already paid your third monthly premium from the Start Date of your Policy and then you accept this endorsement on the Policy to increase your Cover, you will only need to finish the initial waiting period (a further 3 months) to be able to claim on your Cover.
- 1.6. The insured event must have happened in South Africa and after the Start Date.
- 1.7. From time to time we may in our sole and absolute discretion offer to increase your Cover at no additional cost to you. We will notify you of any increases by SMS to the number you have on record with us. Any increase in Cover is dependent on your monthly fee being paid.

## 2. HOW DO YOU CLAIM YOUR INSURANCE BENEFITS?

- 2.1. It's simple, **CALL US on 0861 990 000**. Our agents will guide you through the process if you want to claim or you just have a query.
- 2.2. We will need certain documents from you which helps us decide your claim or to provide the service, for example a hospital admission form, death certificate or a police report. We may also need you to give us other documents. **If you don't give us the documents, within 30 days of the insured event; we cannot properly assess or pay your claim or provide the service.**
- 2.3. If the person we have to pay ("**the beneficiary**") does not live in South Africa, the insurer may make payment into a foreign bank account and:
  - i. the beneficiary will need to meet any requirements of the insurer; and
  - ii. the claim will be paid to the value of the Rand amount and subject to any requirements made on the insurer both by South African law and the laws of the country where the bank account is held.
- 2.4. Neither we nor the insurer will be responsible for meeting any legal requirements the beneficiary must meet to receive payment of a claim in South Africa or another country.
- 2.5. If we decline your claim, we will give you 90 days from the date of our decision to challenge our / the insurer's decision on a claim by writing to us with reasons. If we still decline your claim, and you want to start a legal process, you have an additional 180 days to do so or your claim will lapse.
- 2.6. Failure to submit a fully completed Claim Form and all requested documentation may result in Your claim being regarded as rejected.
- 2.7. All costs incurred in submitting a claim are for Your account.
- 2.8. **There are some more important details on how to claim in the FAIS DISCLOSURE NOTICE attached to this policy.**

## 3. WHO WILL WE PAY?

- 3.1. You, into your South African Bank Account. If you have died, we can pay your spouse or the executor of your estate or Beneficiary **BUT** they will need to give us proof of their status (for example identity details or letters of executorship).

## 4. WHEN WILL WE NOT PAY A CLAIM (Exclusions)

We will NOT pay a claim:

- 4.1. For the death benefit, if you or an insured person has a pre-existing health condition that relates to a claim. This is a condition you had or have before the Start Date and includes any pre-existing illness, injury, infirmity or congenital disorder (whether mental or physical).
- 4.2. We will not pay if your claim is because of you willingly involving yourself in an unlawful act, dangerous conduct, self-inflicted harm, riot, civil unrest, terrorist attack and/or substance abuse (for example drugs and alcohol).
- 4.3. We will only provide Cover for people whose names and birth dates you have given us. They must be South African citizens or have residential rights in South Africa.
- 4.4. If we can't deduct the premium from your bank account (for example if you don't have funds) you will not be covered. To allow us to restore your Cover you agree that if we cannot collect the premium from your bank account in any given month, we can try and collect from your account for the next three months. If we successfully debit your bank account again the date of that collection will be the new policy Start Date. Any bank charges incurred as a result of the above will be for your own account.
- 4.5. There is a 15-day grace period from the date your premium was due within which you can make payment to ensure you have Cover. Please note that the 15-days' grace period is only effective from your second month of insurance following your initial Start Date.
- 4.6. If you have committed fraud, or you have not told us the truth or you have not given us all your correct details including about your health (now or when you claim).

## 5. FOR COMPLAINTS AND COMPLIANCE

- 5.1. It is important to us that you are happy with your Cover. If you are unhappy with us or your Policy, please contact us and give us a chance to see if we can set things right – **0861 990 000**.
- 5.2. If you are still not happy and it is about your **COVER**, then:
  - i. the insurer would like to hear from you. Their details are in the attached **FAIS DISCLOSURE NOTICE**;
  - ii. and if this still hasn't helped, this policy is regulated by the **FAIS OMBUD** and the **INSURANCE OMBUD**. Their details are also in the **FAIS DISCLOSURE NOTICE**.

## 6. WHAT DO THESE WORDS MEAN?

- 6.1. "**accident**" means an unexpected but insured event caused only by violent and/or accidental, external, physical and visible means, which occurs at a time and place that can be identified. For example a motor vehicle accident, an assault or burns.
- 6.2. "**accidental death**" means the death of an insured person as a direct result of an accident. In cases of accidental death, a post mortem and an inquest are held.
- 6.3. "**acquired immune deficiency syndrome/AIDS**" has the meanings assigned to them by the World Health Organisation and includes, without limitation, Opportunistic Infection, Malignant Neoplasm, Human Immune Deficiency Virus ("**HIV**"), Encephalopathy (Dementia), HIV Wasting Syndrome or any disease or illness in the presence of a sero-positive test for HIV.
- 6.4. "**children/child**" means your biological children, stepchildren and/or adopted children normally living with you in South Africa, who are financially dependent upon you and who are under the age of 21.

- 6.5. **"death benefit"** means the Cover payable by the insurer in the event of your or any other insured person's death (natural or accidental) from any cause not excluded in the policy.
- 6.6. **"insured event"** means an insured person's death from any cause not excluded in this policy.
- 6.7. **"insured person"** means you, your spouse and/or your children who are covered under the insurance policy.
- 6.8. **"natural death"** means the death, from any cause not excluded, of an insured person as a direct result of a medical condition / illness (e.g. cancer, stroke or heart attack). In cases of natural death an inquest is not held.
- 6.9. **"premium"** means the monthly amount payable to the insurer for the Cover.
- 6.10. **"spouse"** means a person to whom you are married by civil law, tribal custom or in terms of any religion. A spouse also includes your life partner who normally lives with you in South Africa.
- 6.11. **"waiting period"** means the period specified in this endorsement during which we need to collect a specified number of successful fees from you before you are entitled to claim under the endorsement (see clause 1.4 and 1.5 above).
- 6.12. **"we"** means The Unlimited Group (Pty) Limited. We provide intermediary services in respect of this policy.
- 6.13. **"you"** means the policyholder under this policy.

#### FAIS DISCLOSURE NOTICE

#### DISCLOSURES REQUIRED IN TERMS OF THE FINANCIAL ADVISORY AND INTERMEDIARY SERVICES ACT ("FAIS")

**As a short-term insurance policyholder, or prospective policyholder, you have the right to the following information:**

#### **Financial Advisory & Intermediary Services Act No. 37 2002 "FAIS Act"**

The FAIS Act requires compliance by Product Suppliers (insurers) and Financial Services Providers (intermediaries or brokers) with a General Code of Conduct that was introduced to assist you in making informed decisions about the insurance products that you purchase. It also aims to ensure that your Product Supplier and Financial Services Provider render financial services honestly, fairly, with due skill and diligence and in your interests and the integrity of the financial services industry.

You will receive a FAIS Disclosure Notice at the inception of your policy and at each subsequent Renewal (or Anniversary) date. The FAIS Disclosure Notice contains certain information about your Product Supplier and Financial Services Provider that you are entitled to together with information about the Ombud and the Registrar. Should you experience any difficulties in obtaining required details, please contact your Financial Services Provider for further assistance.

#### **1. DETAILS OF THE INTERMEDIARY, BINDER HOLDER AND THE INSURER**

DETAILS	BINDER HOLDER	INTERMEDIARY and FINANCIAL SERVICES PROVIDER (FSP)	INSURER
<b>Name &amp; Company Reg. No.</b>	The Unlimited Group (Pty) Ltd (The Unlimited)  Reg. No. 2002/002773/07	The Unlimited Group (Pty) Ltd (The Unlimited)  Reg. No. 2002/002773/07 VAT No. 4360161139	Centriq Insurance Company Limited (Centriq)  Reg. No. 1998/007558/06 VAT No. 4230187124
<b>Legal Status</b>	The Unlimited Group (Pty) Limited is an authorized financial services provider (FSP No 21473) and mandated to act as a binder holder on behalf of Centriq.	The Unlimited is an authorized financial services provider (FSP No 21473). The Unlimited is licensed to provide intermediary services in respect of category 1.1, 1.2, 1.3, 1.6 and 1.20. The Unlimited accepts responsibility for all financial intermediary services provided by its agents and representatives and confirm that services are rendered under supervision.	Centriq is a registered short-term insurer and an authorized financial services provider (FSP No 3417).

<b>Compliance Department</b>	031 716 9600	031 716 9600	011 268 6490
<b>FAIS Compliance Officer</b>	Moonstone Compliance: Cathy Ingle, Tel: 021 883 8000, Fax: 021 883 8005, Postal Address: PO Box 12662, Die Boord, Stellenbosch, 7613	Moonstone Compliance: Cathy Ingle, Tel: 021 883 8000, Fax: 021 883 8005, Postal Address: PO Box 12662, Die Boord, Stellenbosch, 7613	The Internal Compliance Officer is assisted by Compli-Serve (Pty) Limited and is contactable on (011) 268 6490
<b>Physical Address</b>	1 Lucas Drive, Hillcrest, 3650	1 Lucas Drive, Hillcrest, 3650	The Oval, 2nd Floor, West Wing, Wanderers Office Park, 52 Corlett Drive, Illovo, 2196
<b>Postal Address</b>	Private Bag X7028, Hillcrest, 3650	Private Bag X7028, Hillcrest, 3650	PO Box 55674, Northlands, 2116
<b>Telephone No.</b>	0861 990 000	0861 990 000	011 268 6490
<b>Facsimile</b>	021 883 8005	0865 009 307	011 268 6495
<b>Email Address</b>	<a href="mailto:cingle@moonstonecompliance.co.za">cingle@moonstonecompliance.co.za</a>	<a href="mailto:info@theunlimited.co.za">info@theunlimited.co.za</a>	<a href="mailto:info@centriq.co.za">info@centriq.co.za</a>
<b>Website</b>	<a href="http://www.theunlimited.co.za">www.theunlimited.co.za</a>	<a href="http://www.theunlimited.co.za">www.theunlimited.co.za</a>	<a href="http://www.centriq.co.za">www.centriq.co.za</a>

## 2. The intermediary and Binder holder

(a) Legal status and any interest in the insurer	The Unlimited is a private company and has no interest in the Insurer.
(b) Conflicts of interest	The Unlimited has not identified any conflicts of interest as defined in the FAIS act. The conflict of interest policy is available on our website at <a href="http://www.theunlimited.co.za">www.theunlimited.co.za</a>
(c) Insurance cover	The Unlimited holds Professional Indemnity Insurance, IGF Insurance and Fidelity cover.
(d) Rand amount of commission payable	The Unlimited acts as a non-mandated intermediary in terms of a Binder Agreement with the insurer. The Unlimited earns a binder fee of 32.5% in respect of motor business and 25% in respect of non-motor business on behalf of the insurer. The Unlimited also earns commission of 12.5% in respect of motor business on the gross premium in respect of the binder functions and incidental activities undertaken business and 20% in respect of non-motor business on the gross premium.
(e) Consequences of non-payment of premium	Your payment should be made on or before the due date to avoid the cancellation of the policy. Should you fail to make payment on or before the due date, you have a period of grace for the payment of premiums. This provision will apply with effect from the second month of the currency of the policy. <b>The consequences of non-payment of the Premium will be that cover will lapse (i.e. you will not be covered).</b> You will be notified of the non-payment and given a grace period of 15 days to pay the outstanding premium. Your policy will remain in force for a period of 15 days after that due date / payment date.
(f) Whether more than 10% of the insurer's shares are held or whether more than 30% of total remuneration was received from the insurer.	The Unlimited does not hold more than 10% of the insurer's shares and has not received more than 30% of the total remuneration from one insurer in the preceding calendar year. The Unlimited is not an associate company of the insurer.
(g) Rand amount of monthly premium, of binder fees and of commissions earned	Please refer to the Insurance Policy for the monthly premium amount.
(h) Extent of premium obligations you assume as policy holder.	The premium payable to the insurer for main member and spouse is R15.80 Excluding VAT. If you include your children on this Policy the additional premium for the Cover will be an amount of R10.51 Excluding VAT.
(i) Manner of payment and due date of premiums	See Insurance Policy and Master Agreement. Due Date is as agreed by customer at time of acceptance (on your call log or Application form)

### 3. Name, Class or Type of Policy

Full details about the name, class and type of policy involved are reflected on your policy schedule and are also contained in the policy wording. Policy schedules should always be read in conjunction with the policy wording. Should you require any explanation about the terms, conditions, exclusions, provisions, premiums, excesses (or deductibles) or any other information, please contact your Financial Services Provider for assistance.

### 4. Claims Procedures

Should you wish to claim, please call The Unlimited on 0861 990 000. You must notify The Unlimited within 30 days of your claim arising and provide all the documentation and information requested for your claims to be accurately assessed. If your claim is not approved you need to make representation to the Insurer within 90 days or lodge a legal process within 180 days. You may also contact a claims specialist at [claims@centriq.co.za](mailto:claims@centriq.co.za). In the event that you are dissatisfied with all these mechanisms, please contact the Short-Term Insurance Ombud on the details provided below.

### 5. Complaints Procedures

If you have a complaint about this policy, you can write to The Unlimited at [info@theunlimited.co.za](mailto:info@theunlimited.co.za) or call the Customer Care line on 0861 990 000, or fax us on 0865 009 307. If you still are not satisfied, then you can call the Centriq Complaints Department at any of the addresses above, or email them on [faiscomplaints@centriq.co.za](mailto:faiscomplaints@centriq.co.za).

#### FAIS Ombud

If you have a problem with the way the product was sold to you or the disclosures that were made to you, please contact The Unlimited for assistance. If you are not satisfied with the reply, you may submit your complaint in writing to the FAIS Ombud at PO Box 74571, Lynwood Ridge, 0040. The FAIS Ombud can also be contacted on Telephone: 012 470 9080, or Fax: 012 348 3447 and email: [info@faisombud.co.za](mailto:info@faisombud.co.za).

#### Short-term Insurance Ombud

If the matter is still not resolved to your satisfaction, please submit your complaint to the Ombudsman for Short-Term Insurance at: PO Box 32334, Braamfontein, 2017.

Telephone: 0860 726 890 or 011 726 8900, Fax: 011 726 5501, email: [info@osti.co.za](mailto:info@osti.co.za).

Alternatively, you can submit a complaint in writing to the Registrar of Short-Term Insurance at: PO Box 35655, Menlo Park, 0102. Telephone: 012 428 8000, Fax: 012 347 0221.

### 6. Important Matters

- You must be informed of any material changes to the information referred to herein. If the information herein was given orally, it must be confirmed in writing within 30 days.
- If any complaint to the Financial Services Provider or the insurer is not resolved to your satisfaction, you may submit the complaint to the Short-Term Insurance Ombudsman or the FAIS Ombud.
- If your premium is paid by means of debit order:
  - It may only be in favour of one legal entity or person and may not be transferred without your approval; and
  - The insurer must inform you at least 30 days before the cancellation thereof, in writing, of its intention to cancel cover.
- Your insurer must give reasons for rejecting your claim.
- Your insurer may not cancel your insurance merely by informing your Financial Services Provider. There is an obligation to make sure that the notice has been sent to you. You are entitled to a copy of the policy free of charge.
- You are entitled to a copy of the voice log of the sale.
- Polygraphs or similar tests are not obligatory and claims may not be rejected solely on the basis of a failure of such test.
- Should you have any complaints about the availability or adequacy of information required to be provided herein, please bring this to the attention on 0861 990 000.
- Your policy document contains the name, class and type of policy as well as details of procedures to follow in the event of a claim. Should anything not be clear, please contact The Unlimited on the numbers provided above.

### 7. Warning

- Do not sign any blank or partially completed application form.
- Complete all forms in ink.
- Keep all documents you receive.
- Make a note of what was said to you.
- Don't be pressurised to buy the product.
- Incorrect or non-disclosure by you of material facts may have a negative impact on the assessment of a claim arising from your contract of insurance.

## 8. Waiver of Rights

The General Code of Conduct stipulates that no financial services provider may request or induce in any manner a client to waive any right or benefit conferred on the client by or in terms of any provisions of the said Code, or recognise, accept or act on any such waiver by a client. Any such waiver is null and void.

## 9. Sharing of Information

Insurers share information with each other regarding policies and claims. This is done in the public interest and in the interest of all current and potential policyholders. The sharing of information includes, but is not limited to information sharing via the Information Data Sharing System operated by TransUnion ITC on behalf of the South African Insurance Association. By the insurer accepting or renewing this insurance, you or any other person that is represented herein, gives consent to the said information being disclosed to any other insurance company or its agent. You also similarly give consent to the sharing of information in regard to past insurance policies and claims that you have made. You also acknowledge that information provided by yourself or your representative may be verified against any legally recognised sources or databases. By insuring or renewing your insurance you hereby not only consent to such information sharing, but also waive any rights of confidentiality with regards to underwriting or claims information that you have provided or that has been provided by another person on your behalf. In the event of a claim, the information you have supplied with your application together with the information you supply in relation to the claim, will be included on the system and made available to other insurers participating in the Information Data Sharing System.

## 10. Use of Your Personal Information

When you enter into this policy you will be giving us your personal information that may be protected by data protection legislation, including but not only, the Protection of Personal Information Act, 2013 ("POPI"). We will take all reasonable steps to protect your personal information.

You authorise us to:

- (a) Process your personal information to
  - (i) Communicate information to you that you ask us for.
  - (ii) Provide you with insurance services.
  - (iii) Verify the information you have given us against any source or database.
- (iv) Compile non-personal statistical information about you.
- (b) Transmit your personal information to any affiliate, subsidiary or re-insurer so that we can provide insurance services to you and to enable us to further our legitimate interests including statistical analysis, re-insurance and credit control.
- (c) Transmit your personal information to any third-party service provider that we may appoint to perform functions relating to your policy on our behalf.

You acknowledge that this consent clause will remain in force even if your policy is cancelled or lapsed.