HLALANATHI FUNERALS

Contact:
Tell: 016 341 6054

Email:
admin@hlalanathifunerals.co.za

Address:
41 Schoeman Street
Industrial
Heidelberg
Gauteng
1441

ECONO GROUP

administered by
Econo Group Schemes
Econo Group Schemes, Postnet Suite 245, P/Bag 20009
Garsfontein, 0042 Reg no. 2005/019760/23 FSP no: 13413

Underwritten By Safrican Insurance

Acceptance Form

Pol no.

I the undersigned hereby accept the membership and benefits, as indicated, on the Econo Group Scheme

Mark with "X" Is this a NEW POLICY? ☐ or an ALTERATION on your existing policy? ☐

1 Personal details of Main Member

Title:
Surname:
Full First names:
Identity Number:
Date of Birth:
Cell no:
Residential Address:

2 Personal details of Spouse

Title:
Surname:
Full First names:
Identity Number:
Date of Birth:
Cover: R
Premium: R

3 Biological Children and Legal Guardianship

	Surname and Full Names:	Identity number:	
1			
2			
3			
4			
5			

4 Extended Members

	Full Names & Surname:	Identity number:	Cover:	Premiums:
1				
2				

Nominated benficiary:

6 Months Waiting Period

5 Declaration

I the undersigned, hereby declare and warrant all information supplied herein, to be true and correct. I am aware that any non-disclosure or misrepresentation of information, which is material to the determination of the risk by The Underwriter, may lead to the policy being declared null and void in which case all premiums paid will be forfeited. I am certain that the product which I am applying for meets my needs and feel that I have all the necessary information in order to make an informed decision in respect of the purchase thereof. The Terms and Conditions and the Intermediary Disclosure Document were made available and explained to me. Acceptance of this policy is subject to verification done by Safrican in terms of the Financial Intelligence Centre Act (Act 38 of 2001).

Do you have an existing funeral policy with Econo Group Schemes ? State "Yes" or "No"

Have you cancelled or do you intend to cancel an existing policy in order to take out this one? State "Yes or No"

Signature of Main Member:

Date:

The Terms and Conditions applicable to this policy, are explained in your policy document. Subject to the terms of the Insurance Act, you have 30 days after receipt of the summery of the policy contract (as intended in Article 48 of the Act), to cancel your policy should there be any non-compliance with the laws governing your policy.

Enquiries or complaints, which are not resolved to your satisfaction, may be referred to:

Ombudsman for Long-term insurance, PO BOx 45007, CLAREMONT, 7735

Registrar of Long-term insurance, Financial Services Board, P O Box 35655, MENLO PARK, 0102

6. PROTECTION OF PERSONAL INFORMATION ACT 4 OF 2013 (POPIA)

We collect, hold, use and disclose your personal information mainly to provide you with access to the services and products that we provide.
We will only process your information for a purpose you would reasonably expect, including:

- ☐ Providing you with products and services that suit your needs as requested
- ☐ To issue, administer and manage your insurance policies
- ☐ To process insurance claims and to take recovery action
- ☐ To notify you of new products or developments that may be of interest to you
- ☐ To confirm, verify and update your details
- ☐ To comply with any legal and regulatory requirements

Some of your information that we hold may include, your first and last name, email address, a home, postal or other physical address, other contact information, your title, birth date, gender, occupation, insurance history, family history, and your banking details.

Consent to Disclose and Share your Information

We may need to share your information to provide advice, reports, analyses, products or services that you have requested.
Where we share your information, we will take all precautions to ensure that the third party will treat your information with the same level of protection as required by us. Your information may be hosted on servers managed by a third-party service provider.

You have the right

- To remotely access or request a copy of your personal information as processed by us and
- Ask for an update and/or correction of your personal information

You have the right to:

- Opt-out of any marketing campaigns
- Object to us sharing your information with other business units
- Opt-out at any time

Please read the clause below and tick the applicable box.

I understand that Safrican(Insurer) shall process my personal information for the purposes of underwriting and administration of my policy. Safrican shall ensure that all processing of my personal information is done in a responsible manner and in compliance with all regulatory requirements. I understand that if I do not give such consent Safrican cannot accept my application. I understand that Safrican can process my personal information for purposes of possible marketing of its products to me. I understand that I do not have to consent to the processing of my personal information for these purposes.

- I consent for Safrican processing my personal information for underwriting and administration of my policy.
- I consent for Safrican to market its products to me.

I have read and understand the section on Protection of Personal Information and Consent, where no other legal basis exists, to the processing of my personal information for the purposes set out therein.

Signature ____________________ Date ____________________

SUMMARY TERMS AND CONDITIONS AS STATED IN THE POLICY DOCUMENT

FUNERAL BENEFITS:

The funeral plan provides for a cash payment of a death claim of a Principal Member, his/her Spouse, Children, Extended Family Members where applicable.

FUNERAL PACKAGE:

The funeral package consists of the following benefits:

- Full family
- Optional Extended family Benefit. ***(On applicable groups only)***

INSURED PERSONS DEFINITIONS:

Principal Member: any individual, between ages 18-84 years, who can participate in the policy, in terms of the eligibility conditions as stated in the Policy Document. The maximum entry age is 84 years. A Principal member must live in South Africa.

Spouse: a person married to the Principal Member by law or tribal custom or under the tenets of any Asian religion, which shall include a Common Law Spouse of the Principal Member.

Common Law Spouse: a person who is deemed by Safrican, at its sole discretion, to be a Spouse, considering the circumstances of each case, and shall include, where applicable, customary marriages or a relationship between two people who have lived together for at least six consecutive months prior to the date of death of the Spouse.

Child: an unmarried child of the Principal Member, younger than 21 years, including a stepchild, posthumous child, an illegitimate child, a legally adopted or a stillborn child (must be stillborn from the 26th week of pregnancy). Only 2 stillbirth claims will be accepted per family during the term of the Policy. Cover for Children is extended to under age 25 years if the Child is a full-time student at a recognised educational institution. This does not include part-time or correspondence students. Children who are mentally disabled or totally and permanently disabled before age 21 years, who are unable to care for themselves, are covered until cover for the Principal Member ends. Details of any Children of a Common Law Spouse, illegitimate child and stepchild must be supplied to Safrican at the time that the Principal Member joins the scheme, or within 1 month of the child becoming eligible for cover. Failing this, Safrican will require satisfactory proof to support any claim.

Optional Extended Family *(On applicable groups only)*: Family members, who are dependent on the Principal Member for financial assistance in the event of their death, may be covered. These include parents, parents-in-law, uncles, aunts, brothers, sisters, nephews, nieces, grandparents and children of the Principal Member who are age 21 years and older.

Please Note:

- Extended Family may not be older than the maximum entry age of 84.

TERMS AND CONDITIONS:

- Each Principal Member must complete an application form choosing his/her Spouse, Children, Extended Family Members, where applicable.
- Benefits end on the date of non-payment of premiums (subject to the Grace Period), or withdrawal from the Plan by the Principal Member, which ever event may occur first.
- Premiums are paid up to death
- The policyholder is entitled to be provided, upon request, with a copy of the Policy Document.

GRACE PERIOD:

A one-month grace period is allowed to pay any premium **once the policy is in force**. If the premium is not paid within (2) months, the cover will end without further notice.

WAITING PERIODS:

- From date of inception, there is a six-month waiting period for claims, due to natural causes, for all persons insured under the Policy.
- Only accidental death claims will be paid immediately, provided the policy for the Principal Member and/or dependants (where applicable) is in force.
- In the event of the Principal Member choosing a higher benefit for any person under the policy, from the start date of the increased cover, six months waiting period will apply only to the amount by which the benefit increased.
- Where any premium payment is missed and thereafter paid, the part of the waiting period not completed at the point when the premium was not paid, will apply from the date the premium is paid.
- Where a policy is reinstated, a new waiting period will start from the restarted date of cover.
- Suicide 12 months from inception

EXCLUSIONS:

No benefit will be paid if death is directly or indirectly caused by or attributable to:

- Terrorism or war (whether declared or not).
- Radioactive contamination, whether directly or indirectly.
- Divorced spouses at the start of the policy are not covered as Spouses and cover for divorced spouses as Spouses who divorce during the term of the policy will end immediately on divorce. Divorced spouses may be covered as Extended Family, on Schemes or Policies which offer Extended Family Cover.

COOLING OFF PERIOD:

The Principal Member has a 31-day cooling off period from receipt of this document to examine the policy. Provided that no death or claim has taken place in this period, he/she must inform Safrican in writing if he/she chooses not to take up the policy. All premiums already paid will be refunded, less the cost of any risk cover.

SURRENDER VALUES/CESSION/LOANS:

This policy has no surrender value and may not be ceded or pledged in any way. No loans will be granted against this policy.

FRAUDULENT CLAIMS:

Safrican will not pay any fraudulent claim that is made against this policy.

Safrican will, at its own discretion, be entitled to cancel this policy, and any other policy held by the Principal Member or claimant, with immediate effect, should any fraudulent claim be made with the knowledge or intent of the Principal Member or claimant to Safrican's detriment.

SUMMARY CLAIMS PROCEDURE:

In the event of a death, a Claim Notification Form must be requested from a Safrican Office and submitted together with the relevant supporting documents within six (6) months of the date of death. Failure to do so within six (6) months from date of death will result in the benefit being forfeited.

DOCUMENTS TO BE SUBMITTED INCLUDE, BUT ARE NOT LIMITED TO:

Fully completed Claim Notification Form.

Proof of death:

- Original computer produced or faxed certified Death Certificate; or
- Original or faxed certified copy of unabridged Death Certificate; or
- Original or faxed certified copy of Abridged Death Certificate in respect of stillborn, together with supporting medical documents.
- A copy of the Notification of death
- Certified copy of Principal Member's Identity Document
- Certified copy of deceased's Identity document
- Current bank statement of the claimant
- See the Claim Notification Form for further required documents.

SAFRICAN RESERVES THE RIGHT TO REQUEST FURTHER DOCUMENTATION OR INFORMATION AS IT MAY DEEM NECESSARY TO ACCURATELY ASSESS A CLAIM

- Safrican will endeavor to settle the claim within 48 hours, provided all the claim criteria have been met.
- Faxed copies must be clearly certified by the Police or a Commissioner of Oaths. The relevant details of the Police or the Commissioner of Oaths must be clear. Documentation submitted other than those listed, will not be accepted. Affidavits are not accepted.

FOR COMPLAINTS ABOUT HOW THE POLICY WAS SOLD TO YOU:

ECONO GROUP (FSP 13413)
Physical Address: Boardwalk Office Park, Block A Suites, Phase 5, Pretoria, Faerie Glen
Tel: (012) 991 0131

Safrican Compliance Officer
Postal Address: P.O. Box 616, Johannesburg, 2000
Fax: (011) 778 8130
Email: compliance@safrican.co.za

Should a complaint not be resolved to your satisfaction, you may escalate the complaint to the Ombudsman at:

FAIS Ombudsman
Postal Address: P.O. Box 74571, Lynwood Ridge, 0040
Tel: (012) 762 5000, (086) 066 3247

The Ombudsman for Long-Term Insurance:
Postal Address: Private Bag x45, Claremont, 7735
Tel: (021) 657 5000
Fax: (021) 674 0951

ACCEPTANCE OF TERMS AND CONDITIONS

I declare that I have read the terms and conditions attached to the Policy and understand their meaning and effect and undertake to abide and to be bound by the terms and conditions of the Policy.

SIGNATURE OF PRINCIPAL MEMBER

DATE	Y	Y	Y	Y	M	M	D	D