



The Policy is managed and administered by National Risk Managers (Pty) Ltd (Registration Number 2016/109644/07), a registered Financial Services Provider (FSP Number 47132) (NRM). NRM is the Underwriting Manager and Binder Holder of this Product.

Lion of Africa Life Assurance Company Ltd, (Registration Number 1942/015587/06), a registered Life Assurer and an authorised Financial Services Provider (FSP Number 15283), is the Assurer (Lion of Africa).

WELCOME TO AFFINITY LIFE

The customers, and all other stakeholders benefit if customers are treated fairly in all aspects of the business. This is why NRM has allocated the administration and servicing of your Policy to the Affinity Life Team (Affinity) to assist you in all your queries.

Affinity commits to:

- Provide customers with clear information about the products and services that are offered, including fees and charges;
- Be there to provide customers with information and further clarification on anything that they do not understand in relation to products and services;
- Give customers access to a formal complaint procedure should they become unhappy with the service provided;
- Act fairly, reasonably and responsibly in all dealings with customers;
- Act honestly and try to make sure that brokers, and all other suppliers of goods and services that Affinity does business with do the same;
- Treat all the policyholders' personal information as private and confidential, and run secure and reliable systems; and
- Train staff to make sure that the procedures they follow reflect the commitments set out in Affinity's code of conduct.

This Policy Document includes important information about the new Policy purchased. The Owner must please take time to read through this document and keep it in a safe place. Affinity's dedicated team of client services staff are on hand to assist with any questions about the Policy.

Policyholders who are in any way unhappy with the service received, should refer to the Disclosure Notice that was included in the Welcome Pack for guidance on their rights and how best to proceed.

Affinity is dedicated to meet the needs of clients whilst improving business and keeping the community at the heart of all we do. We strive to have a long and mutually beneficial relationship for many years.

The Affinity Team

ABOUT YOUR POLICY

The Affinity Life product provides security for the family of the Policyholder/Owner in the event of their untimely death. This Benefit has been chosen by the Policyholder/Owner and is identified as the Defined Cover. Details of the Affinity Life Plan Benefits will appear on the Policy Schedule.

This contract consists of three parts:

- The application form completed and signed by the Owner and/or by their representative on the Life Assured's behalf (if the Life Assured and Owner are not the same person) through a recorded telephonic conversation;
- The Policy Schedule issued to the Owner electronically; and
- This document, which contains all the terms and conditions of this life assurance contract.

The Disclosure Notice, which provides a summary of all the important details of this contract as well as details of where and how to lodge a complaint, is included in this document. It does not form part of the contract, but contains important information for the attention of the Life Assured and/or Owner.

The Assurer agrees to:

- Maintain the Policy in force for as long as the Owner and/or Life Assured meets all the Policy terms and conditions.
- Manage the Policy in accordance with the instructions provided by the Owner on the application form/application voice file or in any subsequent written or recorded telephonic instruction provided by the Owner in the format required.
- Pay the Policy Benefits to the nominated Beneficiary/s or their estate according to the written instructions received from the Owner.
- Notify the Owner of any exclusions applicable to the Policy, should the Life Assured answer yes to any of the medical questions.

- Timeously provide Affinity with all information requested. Failure to do so may delay or prevent payment of any Policy Benefit to the Life Assured's Beneficiary.
- Pay each and every premium due on the Policy as agreed and on time. Failure to do so may result in the Policy lapsing. Affinity will notify the Life Assured of any impending lapse. The Policy will lapse when the premium remains unpaid for a period of more than 45 (forty-five) calendar days.
- Notify Affinity of any change in postal address, residential address or contact details, or Beneficiary information. Please note that Affinity will always communicate with the Owner using their last known details.

DEFINITIONS

In this Policy, unless the context indicates a contrary intention, the following words and expressions bear the meaning assigned to them and cognate expressions bear corresponding meanings:

Accident - Means an unforeseen event such as a motor vehicle Accident, murder or assault, injuries at home and other tragedies, which could not reasonably have been expected to occur and was not planned, and which result in bodily injury and subsequently in the death of the Assured, caused directly and independently of all other causes, by some external and visible means arising from the said event and excludes Natural Death. Bodily Injury shall be deemed to include death by starvation, thirst and/or exposure to the elements, directly or indirectly resulting through accidental means.

Accidental Death - An unplanned, unfortunate and unexpected death which is caused solely and directly by violent, external, physical and visible means.

Active Cover - Means the cover and Benefits provided in terms of this Policy in force and available to you, subject to the terms and conditions contained in the Policy wording.

Affinity/We/Us/Our - Means Affinity Life, the life Benefit cover underwritten by Lion of Africa Life Assurance Company Limited (FSP Number 15283), and managed and administered by National Risk Managers (Pty) Ltd, a registered Financial Services Provider (FSP Number 47132) under contract from the Assurer.

Age Next Birthday (ANB) - refers to the age a person would achieve on their next birthday.

The Assurer - Lion of Africa Life Assurance Company Limited, the registered Assurer with FSP Number 15283, as may be amended from time to time.

Beneficiary(ies) - The party(ies) nominated to receive any Benefits paid under this Policy.

Benefit - A payment(s) made by The Assurer under the terms and conditions of this Policy.

Benefit Start Date - Means the date on which the Life Assured becomes covered and occurs after the completion of initial waiting periods.

Commencement/Commencement Date - Means the Policy comes into force and effect for the first time as specified in the Policy Schedule. Prior to commencement, the Policy and contractual relationship between The Assurer and the Policyholder does not exist.

Compensation - Means either a lump sum or annuity payment depending on the Benefit being claimed for up to the maximum Benefit amount as per the Policyholders Policy Schedule.

Consecutive Premiums - Monthly premiums received when due, in succession and without interruption or default.

CPI or Consumer Price Index - Measures the average change in prices over time that consumers pay for a basket of goods and services.

Death Event - Means the death of the Life Assured.

Fraudulent Act - Includes you, or any member on the Policy, or any person acting on your behalf or associated with your providing Affinity or the Assurer at any time with inaccurate, incomplete, dishonest, false, fabricated or exaggerated information.

In-Force Cover - Means the cover and Benefits provided in terms of this Policy in-force and available to you, subject to the terms and conditions contained in the Policy wording.

Lapse/Lapsed Cover - Means that the cover and Benefits provided in terms of this Policy have been suspended due to non-payment of premiums due and are no longer available to you.

Life Assured - Means the natural person who has in-force life assurance cover in terms of this Policy.

Life Cover - Means the Benefit payable in the event of the death of the Life Assured.

Natural Death - Death occurring in the course of nature, and from natural courses (like age) as opposed to an Accident or violence.

Owner/Member/Policyholder/You/Your - The Member or Policyholder as named on the Policy Schedule and has been accepted by the Assurer and whose Premium is paid without interruption or default and is up to date.

Policy - An agreement between the Owner and The Assurer as set out in the Policy Schedule.

Policy Schedule - Means the confirmation of Benefits and Life Assurance Amounts payable to the Beneficiary(s) in the event of the death of the Life Assured, issued to the Policyholder in terms of section 48 of the Long-Term Insurance Act, which should be read in conjunction with this document.

Pre-existing Condition - Means any personal illness, injury or health condition for which the Policyholder received or sought medical advice, diagnosis, care, and/or treatment in the 24 (twenty four) months prior to the Commencement Date.

Premium - Amount payable to the Assurer on a monthly basis in terms of this Policy to secure the Benefits.

Premium Payer - Means the person responsible for the payment of the Policy premiums.

Private Guardians Fund Umbrella Trust - Means the Trust established to protect and manage payments to a minor nominated on this Policy, as stated in the Policy Schedule.

Waiting Period - Means the number of days/months you have to wait from the Commencement Date.

- Any reference to the singular includes the plural and vice versa; and
- Any reference to gender includes the other gender.
- The clause headings in this Policy have been inserted for convenience only and shall not be taken into account in its interpretation.
- If any provisions in a definition is substantive provision conferring rights or imposing obligations on any party, effect shall be given to it as if it were a substantive clause in the body of the Policy, notwithstanding that it is only contained in the interpretation clause.
- This Policy shall be governed by, construed and interpreted in accordance with the laws of the Republic of South Africa.

- Premiums are payable monthly in advance by, or on behalf of, the Owner. If the premium is not received in time, the Policy Benefit will be suspended.
- Premiums are paid via debit order from either the Post bank gold card, commercial bank account, or the nominated bank account as selected by the Owner, unless otherwise agreed to in writing.
- In the event of the premium not being paid within 30 (thirty) calendar days of the payment date, the benefits of the Policy will be suspended. The Policy will lapse when the premium remains unpaid for a period of more than 45 (forty-five) calendar days.
- Premiums are subject to an annual increase. The Owner will be notified via SMS, at least 31 (thirty-one) calendar days before the increase takes place.
- All Policies will have a compulsory premium escalation of 10% or CPI, if CPI is greater; annually on the Policy anniversary.
- The sum assured under this Policy will increase 4% annually on the Policy Anniversary.
- 3.25% of the Long-Term Premiums are payable by the Insurer to the Brokerage.

BENEFITS

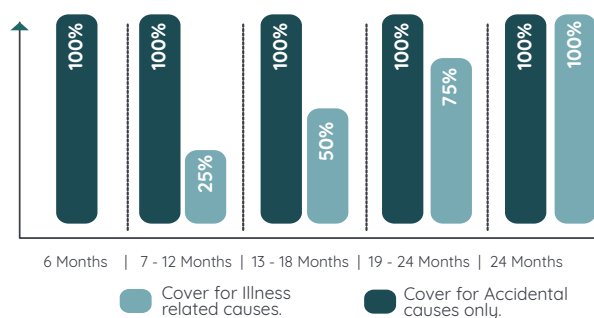
The benefit amount can either be paid out as a lump sum or placed into the Private Guardians Fund Umbrella Trust that will provide regular payments according to the needs of the nominated Beneficiaries.

- The Life Assured may select up to 14 (fourteen) beneficiaries by contacting Affinity Life on 086 111 1136 or sending a please call me/ whatsapp to 061 922 3941.
- The Life Assured has the option to determine the percentage of the benefit amount that each nominated beneficiary/person will receive at claims stage
- In order to provide you with a cost effective benefit, the benefit amount and protection will increase over the first 2 (two) years to the full benefit amount provided the premiums continue to be paid.
- Increasing protection to full in the first 2 years:

- This policy has a 6 (six) month waiting period.
- Accidental Death cover has no waiting period and Active Cover is provided from the Commencement Date to the end of the initial waiting period.
- Death resulting from suicide or intentional exposure to injury has a 24 (twenty-four) month waiting period.
- Death resulting from a pre-existing condition has a 24 (twenty-four) month waiting period.
- The waiting period will start from the date we successfully receive the first premium applicable to the Life Assure person and active in-force cover will begin when NRM has received the required minimum premium payments.

COMMENCEMENT

- This Policy shall commence on the first day of the month following the month in which NRM received and allocated the first premium.
- The Life Assured must be 18 (eighteen) years old to apply for this Policy.
- The Life Assured must be under the age of 60 (sixty) at next birthday Policy Commencement failing which the policy shall be deemed invalid.
- The Policy ceases when the Policyholder reaches the age of 70 (seventy) years on their next birthday



GENERAL PROVISIONS AND LIMITATIONS

- This Policy, as well as the proceeds of this Policy may not be ceded or assigned to a third party.
- This Policy will cease upon the Life Assured reaching the age of 70 (seventy) years old, and cannot be extended.

EXCLUSIONS

The Assurer shall not be liable to pay any claim in respect of any member:

- Whilst the Life Assured is not within the territorial limits of South Africa.
- As a result of suicide of such person or attempt thereat, whether due to mental disorders or not, any other self-injury or intentional exposure to obvious risk of injury (unless in the attempt to save a human life) within 24 (twenty-four) months after the commencement of the policy.
- If caused by, or as a result of, the influence of alcohol, drugs or narcotics of a Life Assured unless administered by, or prescribed by and taken in accordance with the instructions of a member of the medical profession.
- Whilst perpetrating an intentional unlawful act in terms of South African Law.
- Participation in any form of aviation, other than as a passenger travelling on a scheduled flight in an aircraft flown by a duly licensed pilot.
- Participation in mountaineering, pace making or any speed contest and trials.
- The Life Assured failing to disclose required information prior to the commencement of the Benefit.
- The use of nuclear, biological or chemical weapons, or any radioactive contamination.

- Any Fraudulent Actions, misrepresentation, mis-description or non-disclosure of any material fact or circumstances in connection with this Policy, a claim in terms of this Policy or the application for this Policy by the Life Assured or anyone acting on their behalf or anyone claiming under this Policy, may result in this Policy being cancelled, a claim rejected or the Policy voided from inception.

- Attacks on or sabotage of facilities (including, but not limited to, nuclear power plants, processing plants, final repository sites and research reactors) and storage depots, which lead to the release of radioactivity or nuclear, biological or chemical warfare agents, irrespective of whether any of the aforesaid has been performed with the specific use of information technology.
- Loss or expense of whatsoever nature caused by, resulting from, or in connection with any of the following, regardless of any other cause or event contributing concurrently or in any other sequence to the loss:
 - war, hostilities or warlike operations (whether war be declared or not);
 - invasion;
 - act of an enemy foreign to the nationality of the Life Assured or the country in, or over, which the act occurs;
 - civil war;
 - riot;
 - revolution;
 - overthrow of the legally constituted government;
 - civil commotion assuming the proportion of, or amounting to, an uprising; or
 - military or overthrown power.
- A Pandemic or Epidemic.

To make a claim under this Policy, we require:

- A certified copy of the death certificate;
- Notice of death/BI-1663;
- The police accident report if the death was as a result of unnatural causes;
- ID copies of the deceased and Beneficiary/s (if applicable);
- Bank account details of the nominated Beneficiary/s; and
- Any other information we may reasonably require.
- All claims are to be made by contacting us on 0861 11 11 36 or by sending an email to claims@affinitylife.co.za and requesting a claim form.
- At least 6 (six) premiums must be paid during the 6 (six) month period before the claim event.
- Should the last premium prior to death not have been paid, the premium will be recovered from the benefit amount.
- Unless we receive written notification, within 180 (one hundred and eighty) days of the death of the insured, resulting in a claim being made against this policy, the Assurer shall not be liable to pay any benefit. In the case where a claim was made but there was missing documentation or information, the claim will not be further honored after 180 days and the insurer shall not be liable to pay any benefit.

POLICY CANCELLATIONS/AMENDMENTS

- Affinity reserves the right to amend, add or change the premium or terms of reference and conditions of this Policy by giving 31 days written notice to you of our intention to do so. Any variations and/or changes including any premium rate adjustment will be binding on both the Assurer and the Policyholder and can be applied at any time to the existing terms and conditions after written communication of these changes has been sent by us to your last known contact details.
- Affinity reserves the right to cancel or vary your membership by giving written notification if you, or anyone acting on your behalf, provide false information upon application for the policy or commit any other fraudulent act during the period your policy is in effect.
- We can cancel your Policy:
 - By giving you notice in writing of immediate cancellation for the non-payment of premium; or a material change in your risk profile which, in terms of the Policy results in the Policy automatically coming to an end; for fraud or misrepresentation which provides us with the right to end the Policy; or
 - by giving you 31 days' notice in writing (or such other period as may be mutually agreed and/or otherwise prescribed by this Policy).
- The Owner may cancel this policy within 31 (thirty-one) calendar days from the Commencement Date should they not be happy with the cover.
- Provided no claim has been submitted in this time, all premiums will be refunded.
- Thereafter the Life Assured may cancel the policy at any time by giving us 1 (one) month notice in writing, however, no premiums will be refunded.
- A Life Assured may amend any details on their policy by sending a please call me/ whatsapp to **061 922 3941** or by requesting an amendment form from info@affinitylife.co.za. No amendment will be affected unless all details of such amendment are clearly received in writing.
- This policy will cease:
 - 30 (thirty) calendar days after the last premium was received with an additional 15 (fifteen) day grace period, 45 (forty-five) calendar days in total.

DISCLOSURE NOTICES:

Summary of important information as required in terms of the Long-Term Insurance Act and Financial Advisory and Intermediary Services Act.

In terms of the Policy, all personal details regarding the Owner and Life Assured, the amount of cover and the premium payable are regarded as material for the purpose of establishing and maintaining Active Cover.

Very important information that may affect the validity of the Policy:

Agreement with the Assurer

- Although you have purchased this Policy through a broker, contact centre or website, the agreement with the Assurer for this life (long-term) Policy consists of the following three parts:
 - the full Policy wording contained in this document;
 - the Policy schedule; and
 - the Disclosure Notice read together.
- This document and not the telephone purchase conversation, is what forms the life (long-term) assurance agreement between you and the Assurer.
- The telephone conversation or purchase does not form part of this contract. The purpose of the telephone conversation was to assist you with important Policy information and to capture your information on the system. It was not intended to be a replacement for the written documentation. The limited time that was available means that all Benefits, limits and exclusions of this Policy could not be fully explained to you. If you do not read through the documents listed above in detail, it is possible that you may not fully understand the terms and conditions of this Policy.

Information about the Assurer, the Underwriting Manager and Broker

National Risk Managers (Pty) Ltd (Registration Number 2016/109644/07, FSP Number 47132) act as the Underwriting Manager of the Affinity Life Product and is responsible for the administration of this life (long-term) insurance Policy. What this means is that National Risk Managers assists the Assurer by performing a range of administrative activities related to your Policy on its behalf, like premium collection and claims administration.

Representative Status

Independent brokers are used to sell this product. These brokers are acting as an agent between you and us. They ensure that their representatives are guided by the overriding principle of treating customers fairly and acting in the best interest of their clients. Representatives of the broker are authorised to render financial services; however, no employee of the Assurer, Underwriting Manager or Broker may give advice on the appropriateness or not of a particular financial product. Some of the agents work under supervision, which is disclosed during the sales process and supervisory agreements are in place with all of these representatives under supervision. This Policy has been provided to you at your own request without us giving you any financial or other advice. It is therefore really important that you carefully read this document and make sure that this Policy meets your specific needs. If you have any questions, our dedicated team of client services staff are always on hand to assist. Please call us on **010 020 2302** for assistance.

For information or complaints, please contact the National Risk Managers Complaints Department.

- The Internal Complaints Resolution Policy is available on our website: www.affinitylife.co.za or can be made available on your request.
- Affinity is committed to maintain an internal complaint resolution system and procedures based on the following:
 - Maintenance of a comprehensive complaints Policy that outlines our commitment to, and system and procedures for, internal resolution of complaints;
 - Transparency and visibility: ensuring that you have full knowledge of the procedures for resolution of your complaints;
 - Accessibility of facilities: ensuring the existence of easy access to such procedures at any office or branch of the provider is open to members, or through ancillary postal, fax, telephone or electronic helpdesk support; and
 - Fairness: ensuring that a resolution of a complaint can during and by means of the resolution process be affected which is fair to both members and the company and its employees.

Compliments and Suggestions

We are committed to ensuring that our products and service meet your fullest expectations and therefore we value your honest feedback. Should you wish to compliment us or if you have any suggestions on how we might improve our products or service delivery, then we would love to hear from you. Kindly forward your compliments or suggestions to email: compliments@affinitylife.co.za.

How can you complain?

- We are committed to investigate and resolve all complaints in a fair, honest and professional manner. If you are not happy with the service you have received, please contact us at:

Complaints Department

Physical Address: 1 Dingler Street, Rynfield, Benoni, 1501

Postal Address: Postnet Suite 124, Private Bag X101, Farrarmere, Benoni, 1516

Telephone: 086 110 60 40

Email: compliments@affinitylife.co.za

When can you expect feedback?

- Treating customers fairly and keeping you informed is a crucial aspect of our customer relationship management. During the course of the complaint investigation and resolution process you can expect the following:
 - We will acknowledge your complaint in writing within 48 hours of receipt.
 - You will be notified of the name and contact details of the person that will oversee the complaint resolution process.
 - You will be informed of the expected timeframe required for an investigation to be conducted.
 - We will provide you with regular updates on the progress of your complaint.
 - When a decision has been reached, you will be provided with the outcome of such decision in writing with reasons for the decision reached.
 - We aim to resolve complaints as soon as possible, but within a maximum of 21 working days.
 - Where a complaint is resolved in your favour, we will ensure that full and appropriate corrective action is taken without delay.

What if you are unhappy with the outcome of your complaint?

- If you are unhappy with the outcome of your complaint or our complaint resolution process, please direct your complaint, in writing, to the Assurer at:

Lion of Africa Life Assurance Company Limited

Physical Address: 16th Floor, The Golden Acre, Adderley Street, Cape Town, 8001

Telephone Number: 021 461 8233

Email: info@lionlife.co.za

Appeal of rejected claims:

- We will acknowledge receipt of the appeal in writing within 48 hours of receipt from the Assurer.
- If your claim was rejected by us, you have 90 days from the receipt of the rejection letter to make representation.
- Subject to the above, we will make a final decision with the Assurer and will notify you in writing within 45 days after receipt of the rejection appeal.

External complaint resolution measures

- If you are unhappy with the outcome of all internal complaint resolution processes, or the resolutions have not been in your favour, you can have the decision reviewed by an authorised external party. These include the following:

Long-Term Ombud

Private Bag X45, Claremont 7735

Tel: 021 657 5000 / 0860 103 236

Fax: 021 674 0951

Email: info@ombud.co.za

This ombudsman's task is to mediate disputes between Policyholders and long-term assurance providers regarding assurance contracts. This is the correct ombudsman to approach for rejected claims.

FAIS Ombud

PO Box 74571, Lynnwood Ridge 0040

Tel: 012 470 9080 / 012 762 5000

Fax: 012 348 3447 / 012 470 9097

Email: info@faisombud.co.za

Website: www.faisombud.co.za

The FAIS Ombud deals with complaints against the conduct, service or advice provided by a financial services provider. If you are unhappy with the quality of any information or explanation provided then this is the correct ombudsman to approach.

About the Underwriting Manager and Product Supplier

National Risk Managers

The Binder Holder of this Product is National Risk Managers (Pty) Ltd (NRM).

FSP No: 47132
Reg No: 2016/109644/07
Physical Address: 1 Dingler Street, Rynfield, Benoni 1501
Postal Address: Postnet Suite 124, Private Bag X101, Farrarmere 1518
Tel: 0861 11 1610
Fax: 086 571 9163
Email: info@national-rm.co.za

Compliance Arrangements

Compliance Officer: Compliance & Risk Resources, John Symington
Physical Address: Co Number 1675 24 Chester Road, Bryanston 2191 PO Box 70698, Bryanston 2021
Telephone Number: 011 463 4356
Fax Number: 011 463 4356/08 649 9338
Email: lucy@yebo.co.za
Website: www.compliancerisk.co.za

About the Product

Affinity Life, a product of National Risk Managers

Tel: 086 111 1136,
Please call me/ whatsapp: 061 922 3941
Fax: 086 609 9268
Email: info@affinitylife.co.za

This Policy is subject to an annual increase effective 1 January every year.

Legal Status and Interest in Assurer

As Binder Holder, NRM is mandated by the Assurer to perform certain functions for and on behalf of the Assurer in connection with the administration of assurance policies. These functions include:

- Determining the wording of any long-term policy;
- Determining premiums under any long-term policy;
- Determining the value of policy benefits under any long-term policy;
- Settling claims under any long-term policy.

NRM is approved as Financial Services Provider and is permitted to provide advice and intermediary services for the following products:

- Long-Term Insurance Subcategory A
- Short-Term Insurance Personal Lines
- Short-Term Insurance: Personal Lines A1
- Long-Term Insurance Subcategory B1
- Long-Term Insurance Subcategory B2
- Short-Term Insurance Commercial Lines
- Pension Funds Benefits

The name, class or type of product and the nature and extent of benefits provided are set out in the accompanying policy documentation, which also includes information about the nature and extent of each party's obligations.

The provider does not hold more than 10% of the product supplier's shares. The provider does not earn more than 30% of its remuneration from the product supplier.

NRM is in possession of Professional Indemnity Insurance underwritten by Leppard Underwriting to the value of R10 Million.

NRM has in place a Conflict of Interest Management Policy providing the mechanisms for identification, measures for avoidance, measures for disclosure, internal controls and consequences for non-compliance. The Conflict of Interest Management Policy is in accordance with Section 3 of the FAIS General Code of Conduct and is available upon request.

Details of the Key Individual

Mr J Swart

Claims Procedure

Should you have a claim against your Policy, please contact us on **0861 11 1610** or email us at claims@affinitylife.co.za. When a claim arises, please refer to the accompanying policy documentation for details of the procedures to be followed. However, should you have any uncertainty in this regard, please contact NRM as per the contact details set above.

About the Assurer

The Assurer is Lion of Africa Life Assurance Company Limited

FSP No: 15283
Reg No: 1942/015587/06
Tel: 021 461 8233
Email: info@lionlife.co.za

Assurer's Compliance Arrangements

Compliance Office
Tel: 021 461 8233
Email: compliance@lionlife.co.za

Legal Status of the Assurer

Lion of Africa is approved as Financial Services Provider and is permitted to provide advice, automated advice, intermediary (scripted) and other intermediary services for the following products:

CATEGORY 1:

- Long-Term Insurance Subcategory A
- Long-Term Insurance Subcategory B1
- Long-Term Insurance Subcategory B2
- Long-Term Insurance Subcategory B2-A
- Long-Term Insurance Subcategory B1-A
- Long-Term Insurance Subcategory C
- Retail Pension Funds
- Pension Funds Benefits

To lodge a complaint with our Assurer please contact info@lionlife.co.za

Type of Assurance Policy

Your Policy is a long-term insurance category B1 (Life) policy.

Premium Obligations of the Policyholder/Owner

The extent of the premium obligation/s under the Policy is reflected on your Policy Schedule which is issued to you once your application for insurance has been accepted.

Premium Payment and Due Date

Monthly premiums are payable by Post bank gold card, commercial bank account or the nominated bank account as selected by the Owner, every month on the agreed pay date. Should the agreed pay date fall on a Saturday, Sunday or recognised South African public holiday, you authorise the Assurer or its nominee to debit your selected bank account at its discretion on the following or previous business day.

Consequences of non-payment

Cover commences on the Commencement Date subject to receipt of the first Premium, unless otherwise stated. Any premiums not received by the Assurer within 15 days following your premium due date, will result in the Policy being suspended.

Should a proportion of premiums be collected, then the same proportion of the Benefit will be paid in the event of a valid claim.

About the Intermediary/Brokerage

Independent Risk Distribution South Africa (Pty) Ltd

FSP Number: 46861
Registration Number: 2012/093979/07
Postal Address: Private Bag X6, Florida Hills, Florida, 1716
Physical Address: 4th Floor, Flora Centre, Cnr Ontdekkers Road and Conrad Drive, Florida North, 1710
Telephone No: 010 020 2302
Fax Number: 086 571 0237
Email: info@irdsa.co.za
Website: www.irdsa.co.za

Complaints:

The Internal Complaints Resolution Policy is available on the IRDSA website and upon request. If you have any complaints regarding the intermediary services please address your complaints to IRDSA in writing at info@irdsa.co.za.

Internal Compliance Officer:

Manakedi Xaba-Fonte
Email address: compliance@irdsa.co.za
Registration Number: CO 7530

Legal Status and Interest in Assurer

IRDSA is approved as Financial Services Provider and is permitted to provide advice and intermediary services for the following products:

- Long-Term Insurance: Category A
- Short-Term Insurance: Personal Lines
- Short-Term Insurance: Personal Lines A1
- Long-Term Insurance: Category B1
- Long-Term Insurance: Category B2
- Short-Term Insurance: Commercial Lines
- Pension Funds Benefits
- Health Service Benefits

The name, class or type of product and the nature and extent of benefits provided are set out in the accompanying policy documentation, which also includes information about the nature and extent of each party's obligations.

IRDSA is a private company with limited liability and no direct financial interest in the Assurer. IRDSA does not hold, directly or indirectly, more than 10% of the shares of its product suppliers nor does it have any equivalent substantial interest in any such supplier. During the preceding 12 months, IRDSA has not received more than 30% of their earnings from the Assurer. The Intermediary earns up to 3.25% commission.

IRDSA is in possession of Professional Indemnity Insurance for an amount of R1 million, as well as Directors and Officers Liability Insurance to ensure our clients' safety in case of non-performance, breach of duty of care or professional negligence. Due to the fact that

IRDSA does not hold money or premiums on behalf of a client or product supplier in the course of rendering financial services, no FG or IGF Cover is necessary.

The Company has Policies, Procedures and Structures in place to effectively manage conflicts of interests or potential conflicts of interest in the company.

Details of the Key Individuals

Hannelie Botha
 Minette Roberts-Meyer
 Michael Craig Terblanche
 Ashley Van Niekerk

Representatives

Status of Representatives in terms of section 13 of the FAIS Act

Representatives of the Company are authorised in the rendering of financial services in the categories as stated under the Company's details. Supervisory Agreements are in place with all Representatives under Supervision.

Responsibility of IRDSA towards its Representatives

IRDSA confirms that we accept responsibility for the activities of the individual representatives whilst operating in the course and scope of their employment. We have been satisfied by our internal process that they are competent to render financial services in the noted categories, subject to the supervision standard, where applicable and noted above. We have been satisfied that representatives possess the personal characteristics of honesty and integrity. All representatives are monitored and reviewed continuously in terms of compliance with the FAIS Code of Conduct, all applicable legislation, as well as the Company's Code of Conduct.

- You must be informed of any material changes to the above information.
- If any complaint is not resolved to your satisfaction, you may submit your complaint to the FAIS Ombudsman or Long-Term Ombudsman.
- If your premium is paid by debit order, the debit order must be in favour of one persona and may not be transferred without your approval.
- The Product Supplier or its appointed representative, and not the broker, must give reasons in writing for the rejection of any claim submitted by you.
- The Product Supplier must give you written notice of its intention to cancel your Policy.
- You are entitled to a copy of your Policy free of charge.

- Do not sign any blank or partially completed application form.
- Complete all forms in ink.
- Keep all documents handed to you.
- Make notes as to what is said to you.
- Ask for a letter or representation from your advisor.
- Do not be pressured into buying the product.

INFORMATION WITH REGARD TO THE PROTECTION OF PERSONAL INFORMATION ACT NO 4 OF 2013

◦ **Sharing and Protecting of Information**

- In terms of the Protection of Personal Information Act (POPIA), you are notified that the information provided and obtained in order to issue this Policy is mandatory and is collected by the Intermediary, held and processed to provide you with access to the services and products by the Underwriting Manager and its affiliated Assurer and Re-Assurers.
- When submitting any personal information, the information that is received from you will be used only for the purpose for which it is required and to enable the Intermediary, Underwriting Manager and Assurer to comply with its obligations and to comply with certain legal requirements under this Act, as well as the FAIS Act.
- The South African Insurance Association created a shared database for storing assurance information. The shared information assists in limiting assurance fraud, and to underwrite and assess every risk fairly.
- In terms of South African legislation your underwriter may reveal or share information in order to prevent fraud and to underwrite your Policy fairly.
- It is recorded that information relating to the parties to this agreement or to persons whose interests are protected by this agreement may be processed for the conclusion or performance of this agreement, or to protect those interests, or to comply with legal obligations, or for pursuing our legitimate interests or those of any third party to whom the information is supplied.
- The basis for cover applicable to your Policy will be stated in the Policy Schedule and Policy wording.
- You hereby warrant and understand that we may:

◦ **Collect Information**

- From your engagement and interaction with us, from public resources and shared databases with third parties.
- You renounce your right to privacy with regard to assurance claims and credit information obtained by us.
- You acknowledge that any assurance information provided by you may be stored in a shared database and used for any decision pertaining to the continuance of your Policy and meeting of any claim you submit. You agree that such information may be given to any Assurer, or its agent or authorised agents, advisors, partners and service providers and contractors.
- You acknowledge that we may verify the information against legally recognised sources or databases.
- Your information will be confidential and will only be processed if you consent thereto, or if it is necessary to conclude or perform in terms of a contract with you.
- We may process your information. Information includes, amongst others, assurance history, marital status, national origin, age, gender, language, birth, education, financial history, identification number, email address, physical and mental health, disability, biometric information, race or ethnic origin and name.
- Processing of information includes the collection, storage, updating, use, making available and destruction thereof.
- You must be authorised to provide any personal information of third parties to us. In doing so, you

indemnify us against any and all losses by or claims made against it as a result of not having the required authorisation.

◦ **Process your information for the following reasons:**

- To enable us to assess risk and underwrite policies fairly.
- To comply with legislation and compliance requirements, codes of conduct, industry agreements and to fulfill reporting requirements.
- To detect, prevent and report theft and fraud related crimes, as well as money-laundering.
- To enforce agreements if you are in breach thereof, for example tracing and instituting legal proceedings;
- To conduct market research and promotions.
- To do an analysis to determine whether you qualify for products.
- To develop, test and improve products and services.
- For statistical purposes.
- To process payments and payment instructions.
- To do affordability assessments.
- To manage and maintain your Policy and our relationship.
- 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.
- For marketing and supplying you with products, goods and services.
- To protect your legitimate interests and to pursue our interests, as well as that of third parties to whom your information was provided.

◦ **Share your information with the following persons, who has the obligation of keeping your information safe and confidential:**

- Payment processing service providers, merchants, banks and other persons that assists with the processing of your payment instructions.
- Assurers, 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 departments, local and international tax authorities and other persons that we under the law have to share your information with.
- Our partners, service providers, agents, sub-contractors and other persons we use to offer and provide products and services to you.

- Persons to whom we cede our rights and delegate our obligations to under agreements, e.g. collection agencies, outsourced parties, etc.
- You have the right to access the information we have about you by contacting us at: National Risk Managers (Pty) Ltd at the email address info@national-rm.co.za or telephone number 086 111 1610.
- You have the right to request us to correct or delete the information we have about you if it is inaccurate, irrelevant, excessive, out-of-date, misleading, obtained unlawfully or no longer authorised to be kept. You must inform us of the request.
- You may object to the processing of your information on reasonable grounds. You may not object to the processing of your information if you have provided consent or if legislation requires the processing thereof.
- You can withdraw your consent to process information, however, we will continue to process the information if the law permits it.
- You have the right to file a complaint with us, or with the Information Regulator once established.

SERVICE DELIVERY AND TCF (TREATING CUSTOMERS FAIRLY)

Approach to Service Delivery

- The Financial Services Conduct Authority has outlined six key themes, which are central to the TCF initiative. These outcomes and the fair treatment of clients are at the forefront of all decision-making. The six key outcomes of the TCF principle are as follows:
 - Customers are confident that they are dealing with a provider where the fair treatment of customers is central to its culture.
 - Products and services marketed and sold in the retail market are designed to meet the needs of identified customer groups and are targeted accordingly.
 - Customers are given clear information and are kept appropriately informed before, during and after the time of contracting.
 - Where customers receive advice, the advice is suitable and takes account of their circumstances.
 - Customers are provided with products that perform as providers have led them to expect, and the associated service is both of an acceptable standard and what they have been led to expect.
 - Customers do not face unreasonable post-sales barriers to change products, submit a claim or make a complaint.

Standards of Service Delivery

- The aim of TCF is to put our customers at the heart of our business. Therefore, we shall adhere to the TCF outcomes as follows:
 - The Company's approach in dealing with Policyholders is one of equity. Proper governance structures ensure that the Company culture of integrity and honesty is constantly maintained.
 - Products and services sold to the target market are designed to meet the needs of the identified customer groups and are targeted accordingly.
 - Customers shall be given clear information and be kept appropriately informed before, during and after the time of contracting.
 - Representatives only give advice on products of the Company for which they have received training. The quality assurance department also ensures that no advice is given on any other products.
 - Information provided to customers at point of sale is clear and fair to enable customers to make an informed decision with regards to products and services. Furthermore, regular testing of service standards or surveys shall be conducted to test customer satisfaction.
 - We honour representations, assurances and promises that lead to legitimate customer expectations. Legitimate expectations must not be unsatisfied by unreasonable post-sale barriers. Claims and complaints are handled timeously, fairly and consistently.

