

ACC NO.

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E-mail: info@sambakoop.comsaveel meer *vir my* | so much more *for me***Samba**

Koöperatief Bpk | Co-operative Ltd

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C/o Topsy Smith & TT Cloete Str
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Bloemfontein 9300
T: 051 448 0111
F: 051 430 7564**KIMBERLEY**Shop 68
North Cape Mall
Kimberley
8301
T: 053 831 1976/7
F: 053 831 2806**PORT ELIZABETH**Pickering Park
PO Box 27007
Greenacres
6057
T: 041 363 2727
F: 041 363 2737Name: Surname: ID Number: Samba Member Number: **APPLICATION FOR GROUP LIFE INSURANCE AND/OR FUNERAL COVER**

Samba Koöperatief Beperk Registration number 2001/000003/24

GROUP LIFE INSURANCE: UNDERWRITTEN BY AFRICAN UNITY LIFE LTD, A LICENSED LONG TERM INSURER AND AN AUTHORIZED FINANCIAL SERVICES PROVIDER, FSP 8447 (ONLY FOR APPLICANTS UNDER AND INCLUDING 45 YEARS OF AGE)

- 1.1 The premium is payable up to and till the date of the consumer or supplementary consumer's death of the date that the cover is cancelled. The value of the insurance cover reduces over time and will only be determined on the date of death of the consumer and/or the supplementary consumer as indicated in the table below.
- 1.2 The Applicant agrees that a quarterly premium will be added to his/her account and undertakes to settle this premium as long as the Applicant has a credit facility with the Credit Provider.
- 1.3 A waiting period of twelve (12) calendar months in the case of suicide applies as from the scheme entry date. However, should the cause of death be due to an accident the waiting period will not apply provided that the first premium has been received by the Insurer.
- 1.4 If the Applicant passes away the Credit Provider will pay the amount payable in terms of the policy to the next of kin or to the estate's executor at the Credit Provider's registered office, with the understanding that the balance payable to the Credit Provider at the time of passing will be calculated against the insured policy amount and the remainder will be paid to the estate's executor. The insured amount is calculated as shown in the table below.

A consumer will only be allowed to increase his/her benefit once a year in writing by choosing one of the available benefit options. For any amendments the following terms and conditions will apply:

- i) The consumer must be 45 years or younger of age on the date that the newly elected benefit category comes into effect
- ii) The newly elected benefit category will only come into effect twelve (12) calendar months in the case of suicide after the date of its implementation. During the waiting period the previous benefit category will apply. However, should the consumer / supplementary consumer die due to an accident the waiting period will not apply provided that the first premium has been received by the Insurer, the claim will be settled by the Insurer according to the newly elected benefit category

1.2

LIFE COVER IN RAND VALUE ACCORDING TO THE AGE OF THE INSURED AT PASSING (R5.20 PER UNIT*)

Quantity of Units	Premium for units	Under 30 years	30 – 39 years	40 – 49 years	50 – 59 years	60 years and older
2	10.40	10 400	7 800	4 800	2 900	1 500
3	15.60	15 600	11 700	7 200	4 350	2 250
4	20.80	20 800	15 600	9 600	5 800	3 000
5	26.00	26 000	19 500	12 000	7 250	3 750
6	31.20	31 200	23 400	14 400	8 700	4 500
7	36.40	36 400	27 300	16 800	10 150	5 250
8	41.60	41 600	31 200	19 200	11 600	6 000
9	46.80	46 800	35 100	21 600	13 050	6 750
10	52.00	52 000	39 000	24 000	14 500	7 500
11	57.20	57 200	42 900	26 400	15 950	8 250



Applicant's initial.....Spouse.....

GROUP FUNERAL INSURANCE: UNDERWRITTEN BY AFRICAN UNITY LIFE LTD, A LICENSED LONG TERM INSURER AND AN AUTHORIZED FINANCIAL SERVICES PROVIDER, FSP 8447 (ONLY FOR APPLICANTS UNDER 60 YEARS OF AGE)

FAMILY FUNERAL POLICY

2.1 Consumers who participate in the group funeral insurance scheme and any member of their immediate family i.e. the consumer's spouse and/or any minor single dependent children (including legally adopted children) qualify for this insurance cover.

2.2 Death benefits

On death of the participant AFRICAN UNITY LIFE will pay the following maximum cash amount

COVER		
PRINCIPAL MEMBER		R 21,100.00*
SPOUSE		R 21,100.00*
CHILDREN:	14 years and older	R 21,100.00*
	6 years and older, but younger than 14 years	R 10,800.00*
	1 year and older, but younger than 6 years	R 5,700.00*
	Younger than 1 year (including stillborn)	R 5,700.00*
QUARTERLY PREMIUM*		
Younger than 50 years		R 246.00*
50 years and older, but younger than 55 years		R 390.00*
55 years and older, but younger than 60 years		R 483.00*

The Applicant confirms that he/she wants to apply for the following as endorsed by African Unity Life:

Funeral Cover YES NO INITIAL _____

Group Insurance YES NO INITIAL _____

There is no limit to family size.

2.3 The premium is payable up to and till the date of the consumer's death thereafter the current cover at the same quarterly premium can be transferred to the surviving spouse by completing a written application. AFRICAN UNITY LIFE reserves the right to decline the transfer of cover.

2.4 A waiting period of twelve (12) calendar months in the case of suicide applies as from the entry date of the policy. However, should the cause of death be an accident the waiting period will not apply provided that the first premium has been received by the Insurer. Details of immediate family members requiring funeral cover:

Surname	First name	Gender (M/F)	Identity number

*Cost, fees and Interest rates are subject to change as determined by the Credit Provider. Applications is subject to approval. Samba Co-operative Limited is an authorised Financial Service Provider (Nr.18212) and a registered credit provider (NCRCP1270). Terms and Conditions apply.

3. GENERAL CONDITIONS OF THE GROUP FUNERAL INSURANCE

3.1 The consumer agrees that a quarterly premium may be added to his/her account and undertakes to pay the premium when due and for as long as he/she remains a member of Samba or the cover is cancelled. Failure to pay the premium for 2 consecutive months will result in the policy lapsing as per Rule 15A of the Policyholder Protection Rules.

3.2 These schemes or any policies issued in terms of these schemes have no surrender value.

3.3 AFRICAN UNITY LIFE LTD (the insurer) has the right to alter the terms, conditions and premiums of the schemes with a 31 calendar day notice.

3.4 It is a condition of any payment made by the consumer that:

i) Any payment received from the consumer will firstly be appropriated to their Samba purchase account and any other amounts due to Samba and shall only be considered to be paid if the consumer's Samba account is settled in full.

ii) If a consumer's membership is terminated in any manner whatsoever, the consumer will not be entitled to any refund of premiums already paid.



Applicant's initial.....Spouse.....

- 3.5 The premiums are payable quarterly and will, once collected from the consumer, be paid to AFRICAN UNITY LIFE (the Insurer) by Samba.
- 3.6 The following terms and conditions are applicable to Section 20 and 21 of this application form. Information in terms of Section 5 to 9 of the FAIS Act is also included.
- 3.7 The Applicant understands that the Group and Funeral insurance is available on a basis of no advice, despite the fact that the Credit Provider might have provided factual information regarding this policy.
- 3.8 The Applicant understands that relating to the policy:
- 3.8.1 A full analysis in respect of the Applicant referred to in subsection (8)(1)(b) of the General Code of Conduct for FSP's could not be undertaken;
- 3.8.2 There may be limitations on the appropriateness of the policy; and
- 3.8.3 The Applicant should take particular care to consider on its own whether the policy is appropriate considering the Applicant's objectives, financial situation and particular needs.
- 3.9 The Credit Provider will only be acting in the capacity of an intermediary and no advice will be given to the Applicant with regards to the abovementioned policies.
- 3.10 The Credit Provider has the necessary fidelity cover needed in terms of legislation.
- 3.11 The authorized representative of the Credit Provider that is licensed to provide intermediary services, has given a mandate to the personnel of the Credit Provider to provide the necessary administrative services that may lead the Applicant to become part of the Samba group and funeral insurance.
- 3.12 Commission for the provision of the intermediary services as percentage of the total premiums are payable to Samba as follows:
- 3.12.1 On the group insurance: a maximum of 7.5%, subject to the provisions of the Long Term Insurance Act, Act 52 of 1998;
- 3.12.2 On the Funeral fund: 20% plus VAT, subject to the provisions of the Long Term Insurance Act, Act 52 of 1998.

Insurance is subject to the Insurer accepting, at its own discretion, the application made herein by the applicant & proposed Principal Insured

CONTACT DETAILS & COMPLAINTS PROCEDURE

Samba Co-Operative key individual and representative:

Mr. Rudi Besselaar
PO Box 911
Bloemfontein, 9300
Tel: 051-448 0111

JJ Ferreira (Compliance Officer)

Chief Compliance Officer
African Unity Life Ltd
Tel: 086 123 4555
Fax: 021-180 4725

Samba Co-operative Compliance Officer:

Me Alene Boonzaaier
Masthead
7 Collins Avenue
Arboretum
Bloemfontein
9301

African Unity Life Complaints Resolution Office

109 Jip de Jager Drive
Springfield Office Park
Bellville, 7530
Tel: 086 123 4555
Fax: 021 180 4725
E-mail: complaints@africanunity.co.za

African Unity Life contact persons:

Vivien Dick
Client Services Consultant
Tel: 086 123 4555

Email: Vivien.Dick@africanunity.co.za
109 Jip de Jager Drive
Springfield Office Park
Bellville 7530
Postal address:
P.O. Box 4061
7550
Webadres: www.africanunitylife.co.za

The Ombudsman

Private Bag x45
Claremont 7735
Share call: 0860 103 236
Tel: 021-657 5000
Fax: 021-674 0951
E-mail: info@ombud.co.za

Ombudsman for Financial Services

PO Box 74571
Lynnwood Ridge
0040
Tel: 012-470 9080
E-mail: info@faisombud.co.za
Share call: 0860 324 766 (0860 FAISOM)
Fax: 012-348 3447

The Registrar of Long term Insurance

Financial Services Board
PO Box 35655
MENLO PARK
0102
Tel: 012-428 8000
Fax: 012-347 0221

SIGNED AT _____ ON THIS _____ DAY OF _____ 20_____

Signature Member

Signature Spouse

Signature Witness

Full name and surname: _____

ID Number: _____