



APPLICATION FORM

FSP 51226

FUNERAL PLAN

APPLICATION FOR MEMBERSHIP FOR ANGELS BURIAL SOCIETY FUNERAL PLAN.
E-MAIL COMPLETED & SIGNED DOCUMENTS TO: applications@angelsburialsociety.co.za

POLICYHOLDER'S DETAILS

Surname: _____ First Names: _____

Marital Status: Married Single Divorced Widowed

I.D Number: _____ Date of Birth: _____

Cell No. _____ Tel No.: _____ Email _____

Physical Address.: _____

Code.: _____

Postal Address.: _____

Code.: _____

COVER CHOICE

*Circle desired cover and package

PERSONAL COVER	SINGLE PARENT COVER	FAMILY COVER	GOLDEN AGES COVER
Silver: R110pm/R20 000	Silver: R140pm/R20 000	Silver: R170pm/R20 000	Covers member from 70 years at inception. Gold: R220pm/R50 000
Gold: R150pm/R50 000	Gold: R180pm/R50 000	Gold: R240pm/R50 000	
Diamond: R190pm/R75 000	Diamond: R220pm/R75 000	Diamond: R320pm/R75 000	
EXTENDED FAMILY COVER			
Silver: R25pm/R8000.		Gold: R35pm/R20 000	Diamond: R45pm/R30 000.

*Tick chosen add-on benefit (R5000 benefit each for R35each/pm)

GROCERY TOMBSTONE TRANSPORT

SPOUSE'S DETAILS

Surname: _____ First Names: _____

I.D Number: _____ Date of Birth: _____

*Tick chosen add-on benefit (R5000 benefit each for R35each/pm)

GROCERY TOMBSTONE TRANSPORT

POLICYHOLDER'S CHILDREN

Add-on benefit (R5000 benefit each for R35each/pm)

NAME & SURNAME	I.D NUMBER	TICK BENEFIT
1.		<input type="radio"/> GROCERY <input type="radio"/> TOMBSTONE <input type="radio"/> TRANSPORT
2.		<input type="radio"/> GROCERY <input type="radio"/> TOMBSTONE <input type="radio"/> TRANSPORT
3.		<input type="radio"/> GROCERY <input type="radio"/> TOMBSTONE <input type="radio"/> TRANSPORT
TOTAL:		

EXTENDED FAMILY DEPENDANTS

Mark with an (x) according to the chosen cover above:

SILVER: R25pm GOLD: R35pm DIAMOND: R45pm

NAME AND SURNAME	ID NUMBER	MONTHLY PREMIUM	TICK BENEFIT
1.			<input type="radio"/> GROCERY <input type="radio"/> TOMBSTONE <input type="radio"/> TRANSPORT
2.			<input type="radio"/> GROCERY <input type="radio"/> TOMBSTONE <input type="radio"/> TRANSPORT
3.			<input type="radio"/> GROCERY <input type="radio"/> TOMBSTONE <input type="radio"/> TRANSPORT
4.			<input type="radio"/> GROCERY <input type="radio"/> TOMBSTONE <input type="radio"/> TRANSPORT
5.			<input type="radio"/> GROCERY <input type="radio"/> TOMBSTONE <input type="radio"/> TRANSPORT
6.			<input type="radio"/> GROCERY <input type="radio"/> TOMBSTONE <input type="radio"/> TRANSPORT
7.			<input type="radio"/> GROCERY <input type="radio"/> TOMBSTONE <input type="radio"/> TRANSPORT
8.			<input type="radio"/> GROCERY <input type="radio"/> TOMBSTONE <input type="radio"/> TRANSPORT
9.			<input type="radio"/> GROCERY <input type="radio"/> TOMBSTONE <input type="radio"/> TRANSPORT
10.			<input type="radio"/> GROCERY <input type="radio"/> TOMBSTONE <input type="radio"/> TRANSPORT
TOTAL:			

PREMIUM CALCULATION

TOTAL MONTHLY PREMIUM :

BENEFICIARY NOMINATION

I hereby nominate the following person, who is my dependent or nominee, for any benefits due to be paid in the event of my death.

Surname: _____ First Names: _____

I.D Number: _____ Relationship: _____

Contact Details: _____

PAYMENT OPTION

DEBIT ORDER

Name of Bank: _____ Name of Account Holder: _____

Account Number: _____ Branch code: _____

I hereby authorize Angels Burial Society to commence a debit order withdrawal from my account on the 1st 7th 15th 25th 30th of the month and monthly thereafter.

I understand that the debit order will be run on the date selected; if for whatever reason it is not honoured, 2 (two) withdrawal runs will be submitted the next month. In the event that it's dishonoured, the policy will lapse. No cash payments are accepted for arrear or other premiums. I understand that this signed document is required 10 (ten) working days prior to elected deducted date. If not, the deduction will only qualify for the following calendar month deductions and cover will only commence the following month.

Signature of Account Holder: _____ Date: _____

DECLARATION

I hereby apply to join the Angels Burial Society Funeral Plan with effect from / / I declare to the best of my knowledge and belief that the particulars given above are true and correct. I understand and agree that any wilfully misrepresentation in this application will invalidate any benefit under this Policy and I undertake to abide by the terms and conditions of the policy. Angels Burial Society (pty) LTD shall not be liable for any amount until it has accepted this application and first premium. If over the age limit when joining, the claim will be repudiated and premiums refunded.

Policyholder Signature: _____ Date: _____

Broker/Agent Name: _____ Date: _____

TERMS & CONDITIONS

Please read this document carefully. If you need help, please ask:

Definitions: the following words have the following meaning in this document:

"Insured persons"

The people insured under this policy include the following, if the policy allows it.

"Main member"

You, the policy owner whose life is insured and are from the age of 18 years and younger than 69 when the policy starts, with the exception of the Golden Ages cover, for which the age must be older than 70 years.

"Immediate family"

Your spouse and up to three of your children under the age of 21 years.

"Spouse"

A person married to you under civil, common or customary law or regarded as your life partner with whom you live with and has been residing with for at least two years, in a long term open and acknowledged relationship capable of being registered under the South allowed to be covered. Should you get married after the policy starts, you may add your new spouse within the 12 months from date of marriage and you have not claimed the spouse benefit previously.

"Child"

Your own natural or adopted child or any other legally dependent child (who you support). Your child must be unmarried and younger than 21, unless full time student. A student must be younger than 25. We only cover legally adopted or fostered grandchildren where proof of adoption or foster care is available when required. You may include a new born, adopted or fostered child within 12 months of their birth, adoption or fostering. We also cover: Stillborn children after 28 weeks of pregnancy and allow a maximum of two claims. Any disabled child of any age who you support fully, if you have medical proof that they are mentally or physically disabled.

"Extended Family"

Other relatives, including parents and in-laws, you support fully younger than 75 years when the policy starts.

"Other dependent relatives"

Other dependent relatives you choose for cover under this policy, if they are younger than 75, when the policy starts. The other relatives must be: A dependant child (who this policy would not otherwise cover) An extra spouse or life partner (if you have more than one); or Any other relative you support, if you can provide that they are related to you.

"Pensioner"

An individual over the age of 70 years old, married or unmarried, on pension.

"Beneficiary"

The beneficiary is the person that you chose to be paid the funeral benefit to when you die. In the event that you have not chosen a beneficiary we will pay the benefit to your Spouse covered in the same policy. Should there be no Spouse we will pay benefit to your closest relative who can provide proof that they are related to you. If any insured person dies, we will pay benefit to you. The airtime will be sent to the policyholder in the event of the death of any insured person or the nominated beneficiary in the event of the death of the policyholder.

"Membership"

You and the people you name to be covered under this policy. You may name or replace members of your immediate or extended family for cover by notifying us. Before you can claim for a new member that you have added to the policy you have to wait for the six months waiting period.

"Third Party Policies"

A policy issued in the name of the policyholder and the monthly premiums are paid from another person's account and this person is the relative of the policyholder. Third party policies are limited to a maximum of R50 000 per policyholder, per identity number. The premium payer cannot be nominated as a beneficiary. Third party policies are limited to a maximum of two policies debited from the premium payer's transactional account.

"Waiting period"

A waiting period is a period of time that must pass before some or all coverage begins. Waiting period starts thirty-one (31) days from the first premium being received.

"Commencement of cover"

Cover commences once the first premium has been received.

"Inception period"

Inception period commences at the time the customer signs and accepts the policy.

"Us"

Refers to Angels Burial Society.

"You"

Refers to the person who buys the policy and is the policyholder.

TERMS AND CONDITIONS OF YOUR INSURANCE POLICY

"Premiums"

Members have the option to pay the premiums via Cash Deposits or Debit Order or Retail Payments. Policy to be paid on the chosen day of the policyholder, every month. Policyholder responsible for the payment of premiums in order to ensure your cover is maintained. Policy number to be used as reference.

Additional Information

Children are partial (%) covered as follows:

Stillborn* – 5 years (8%)

6 years – 13 years (25%)

14 years – 21 years (50%)

Stillborn children are covered from 28 weeks of pregnancy.

Extended Family members are covered at 40% benefit amount.

Premiums paid per insured extended member.

Golden Ages cover applies to policyholders older than 70 years old and only covers policyholder.

"Beneficiary"

Should you die, we will pay the benefits to the beneficiary of your choice. In the event that a beneficiary was not chosen, we shall pay the benefit to your spouse covered in the same policy. In the case of no spouse, benefit will be paid out to the closest relative who can provide proof that they are related to you. Should any other insured person die, the benefits will be paid to you.

Maximum cover

An insured adult person is allowed to be covered up to a **maximum of R75 000**.

An extended adult is allowed to be covered up to a **maximum of R30 000**.

An insured child is allowed to be covered up to a **maximum of R37 500**.

This includes any number of plans the insured person may be covered under. Where the insured person is covered beyond the maximum benefit per category, either as a child or adult, only maximum benefit will be paid out.

Additional policies will be:

Refunded, provided there was additional premiums collected; If no additional premiums paid, the person will be deleted from policy or policy cancelled if deceased is the policyholder; If a person who dies is covered beyond their maximum benefit, it is the responsibility of their families to disclose cover in order to avoid over insurance.

TERMS & CONDITIONS

"Waiting period before cover starts."

A waiting period means that no benefits will be paid should an insured person die during that period. A person added after the policy start date, will have to wait for their applicable waiting period before benefits can be claimed. You must also have paid the monthly premiums during the waiting period.

The waiting periods are as followed:

Six (6) months and six (6) months premium paid for policyholder; immediate and extended family members life;

Nine (9) months and nine (9) months premium paid for additional benefits.

Twenty-four (24) months and twenty-four (24) months premiums paid for death by suicide.

"Migrating waiting period" Policyholders can apply to migrate from one plan to another; When migrating from a lower benefit plan to a higher benefit plan, an additional six (6) months waiting period will be applied to the difference in amount between the two policies from date of migration;

Making Claims

A claim must be submitted within six (6) months of the death of the insured person. We will not pay out benefits under this policy unless Angels Burial Society is sure that:

The claim is valid;

The right person will be paid;

You correctly filled in the important information on the application, such as birth dates/identity numbers, etc;

All approved claims are paid out within 48 hours after all correct documents have been received;

Should any of the insured person die, we will require proof of relation to the claimant (person making claim) or beneficiary;

You can claim by:

Checklist for claims

We need to see the following important documents, original and certified copies, when someone makes a claim:

Death certificate (Home Affairs form number B1 – 15);

Identity Document of the person that died;

Birth certificate, if no identity document or child is under 18;

Identity document of the claimant;

Marriage certificate or other proof of relationship with main member;

Notice of registration of death (Home Affairs forms B1 – 1663);

Burial order;

Bank statement of the claimant.

If we need any extra documents than someone on our Claims Helpline will ask you for this.

"Surrender value"

This policy does not have any surrender cash value; This means you cannot cash it in and we will not pay anything if you stop paying premiums.

"Fraud"

If you are dishonest when you claim, you give up all benefits under this policy. Angels Burial Society may cancel this policy and you will lose all premiums paid.

"Cession"

Nobody may transform any benefit under this policy to anyone else. You may not sell, donate, cede, or assign any benefit or pledge it as security.

"Limited allowance for unpaid premium"

After your first year, in the case you have paid all your monthly premiums, we will allow you to miss one monthly premium; For each following year, and up to three monthly premiums in total; If there is a claim after we allowed you to miss the monthly premiums, we may deduct the same amount from claim benefit.

"Lapse and reinstatement of policy"

If premiums are not paid for three (3) months in a row, the policy will lapse (cancel). You may reinstate (restore) the policy within two (2) months of the last premiums paid by paying all the late premiums. You can only reinstate a policy once. Re-instatement fee of R150 applies. No one will be covered without the policy being reinstated. This means we do not have to pay any benefits if someone dies within a period of two (2) months from reinstatement. Should a policy lapse and not be reinstated the same year it was opened, the policy is subject to current/updated premiums.

"Currency"

Premiums and benefits are shown and paid in South African Rands.

IMPORTANT

Leaving out material information

If you: Do not disclose any material information that is relevant; or Disclose any information that appears to be wrong; Angels Burial Society may regard any claim as invalid and may also cancel the policy in its entirety and you will lose all premiums paid.

"Change of policy"

No change of policy is valid unless in writing and signed by someone with authority from us. We may change or cancel any term of this policy. And we may also change premiums and benefits based on our experience of many claims. Instead of raising premiums, Angel Burial Society may take away some of the benefits under the policy. We must notify you of any changes by giving you a 31-day notice by either mail; e-mail or any method of communication of your choice. You may cancel policy immediately by writing to us if you do not accept the changed terms of premiums.

"Cancellation of policy"

You have the right to cancel your policy within 31 days after receiving the terms and conditions, at no cost to you. This is the cooling-off period. After the lapse of this cooling period, you need to provide us with 31-day notice of your request to cancel your policy. Should we wish to cancel your policy, we will provide you with 30-day notice at your last known postal address or E-mail address. You may not add any new insured person to the policy after the letter cancelling it has been delivered to us. We will not refund any unused proportion of the premiums if the policy is cancelled.

"Jurisdiction"

South African Law governs this policy. The South African courts may hear any disputes about this policy.

"Exclusions"

The policy does not cover accidental death because of any illegal act caused by the insured person.

"Policy limited to South Africa"

Policy covers only people who live in South Africa permanently or people who work in South Africa and have legal working permits of at least six (6) months. All children covered under this policy must also live in South Africa.

"Fixed Premiums"

Pay the same premium for the duration of your policy, unless adjustments are made to reduce or increase benefits.

Angels Burial Society will commit to settle claims within 48 hours, provided all the claims criteria has been met. Submitted documents must be clearly certified and details of the Commissions of Oaths clearly visible. Documents submitted other than those submitted will not be submitted. Affidavits not accepted. Posted documents MUST be sent via registered post. Should a member have unpaid he's/her premium, the benefit payable in respect of claim may be proportionally reduced to the underpayment at Angels Burial Society's discretion. NB. The policyholder has the right to be provided policy documents.

Your policy is underwritten by: Angels Burial Society ("Angels") Reg. no. 2019/261713/07, an Authorized Financial Services Provider (FSP No. 51226). Angels is authorised to sell Long-Term Insurance subcategory A and Friendly Society Benefits. Angels holds professional indemnity and fidelity insurance cover.

Should you require assistance or need to submit a claim, kindly contact: Angels Head Office, Soweto Business Hub First Floor Maponya Mall 2127 Chris Hani Road Klipspruit Soweto 1809. TEL: 010 823 2270. www.angelsburialsociety.co.za info@angelsburialsociety.co.za claims@angelsburialsociety.co.za

If you have any reason to complain, kindly contact our compliance officer on compliance@angelsburialsociety.co.za

Should complaints not be resolved to your satisfaction, you may escalate the complaint to either the FAIS Ombudsmen or the Long-Term Insurance Ombudsmen.

Policyholder Signature: _____ Date: _____