



MZ Catering / Funerals (Pty) Ltd

4590/1 Link Road Extension 2 | Orange Farm | 1841

Tel: 0817390292 | Email: menzizonke@webmail.co.za

MZ Catering / Funerals is a Juristic Representative of Exodec FSP43212

Agent: _____

Branch: _____

APPLICATION FOR MEMBERSHIP TO THE 1 + 5 / 9 / 13 SOCIETY FUNERAL PLAN

Applicant ID number

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Policy reference number:

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Main Member Full Name and Surname: _____

Address: _____ Telephone no: _____

Cell phone no: _____

FAMILY DEPENDANTS (Option 1: entry age under 65) (Option 2: entry age under 70) (Option 3: entry age under 75)

Surname	Names	ID No / DOB	Relation
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
ADDITIONAL EXTENDED FAMILY MEMBERS (Max. 4)			
1.			
2.			
3.			
4.			

TICK YOUR CHOICE OF BENEFIT

Cover	1+5<65	1+5<70	1+5<75	1+9<65	1+9<70	1+9<75	1+9<80	1+9<85	1+13<65	1+13<70	1+13<75	Joining Fee
R 5 000	R 120	R 140	R 160	R 140	R 180	R 220	R 240	R 260	R 270	R 300	R 320	R
R 7 500	R 140	R 160	R 180	R 200	R 220	R 270	R 300	R 320				R
R 10 000	R 200	R 220	R 240	R 320	R 370	R 390	R 370	R 400	R 370	R 400	R 420	R
R 13 000	R 220	R 270	R 290	R 360	R 380	R 400			R 400	R 420	R 450	R
R 15 000	R 270	R 290	R 320	R 380	R 400	R 410			R 420	R 450	R 500	R
R 18 000	R 280	R 300	R 360	R 400	R 410	R 460			R 440	R 470	R 520	R
R 20 000	R 300	R 320	R 370	R 420	R 420	R 470			R 470	R 520	R 570	R
R 25 000	R 320	R 380	R 400	R 470	R 540	R 570						R
R 30 000	R 370	R 390	R 420	R 530	R 600	R 650						R

Extended Family Members

EXTENDED	R 5 000	R 8 000	R 10 000	R 15 000	R 20 000
00 - 21	R 11	R 16	R 20	R 25	R 40
22 - 64	R 30	R 40	R 60	R 65	R 110
65 - 74	R 80	R 100	R 150	R 210	R 270
75 - 84	R 180	R 200	R 280	R 350	R 480

Nominated Beneficiary of benefit at death of principal member

Name & Surname _____ ID _____

Inception date of policy: Cover to commence 1st day of new month: 01/ ____/20 ____

Monthly Premium: Must be before the 5th of every month.

I declare to the best of my knowledge and belief that the particulars given are true and correct. I am satisfied that the plan chosen by me best suits my needs. I am able to afford the monthly premium of the plan chosen by me. I have read and understand the summary of the Terms and Conditions and have received a copy thereof. (NOTE: No monthly payment - no cover)

Main Member Signature _____

Date _____

Administrator: Exodec 229 (Pty) Ltd FSP 43212 Email: info@exodecgroup.co.za Fax: 086 608 7594

Compliance: Leona Prinsloo CO4920 Email: lprinsloo@mweb.co.za

Fee's disclosure: 50% Risk premium, 2% Binder Fee, 16% admin, 16% marketing, 16% operational

Safrican Insurance Company Limited, Company Registration Number 1935/007463/06 is a registered insurer and authorised financial services provider (FSP: 15123)

General terms & conditions

- The maximum entry age for member and /or nominated family dependants is under 65 / 70 / 75 / 80 / 85 years (depending on the selected option).
- Cover for all nominated family members is whole life. (Children and extended family members included).
- Unmarried mentally or physically disabled children who are totally and completely dependent on the main member will be covered for as long as the policy is in force.
- Cover will be provided for a maximum of 5/9/13 nominated family members. (e.g. Spouse, additional Spouses, Children, Dependent Children, Extended Family Members)
- Once the principal member's cover ceases, the policy can be taken over by any nominated family member.
- For all cash premiums keep receipts as proof of payment.
- Premiums must be paid for the month and the 12 months premium payment history must show that all payments were made monthly.

Nominated Family Benefits.

- Brothers, sisters, parents and parents-in-law can be covered as part of the 5/9/13 nominated family members.
- Maximum entry age: under 65 / 70 / 75 / 80 / 85 years (depending on the selected option).
- Premiums for the basic benefit are quoted as a fixed Rand amount per month.
- Policy is a grouped policy and is annually renewable.

Exclusions

- A waiting period of 6 months applies on all ages and cover amounts from date of receipt of the first month's premium for claims due to natural causes.
- Children under 6 years will qualify for a maximum of R 20 000 cover, depending on the cover selected.
- No waiting period applicable on death due to accident on condition that the first premium is paid.
- **"No premium = no cover"** and should premiums not be paid in terms of the policy, cover ceases and should the member wish to re-join, they will be treated as a new entrant, with the commensurate 6 months waiting period. The policy will lapse after 2 premiums missed within a 12 month cycle. The policy will be cancelled should the 2 arrear payments not be paid in full.
- Active participation in war, riot and civil commotion or terrorism.
- All claims related to atomic, biological and chemical warfare or terrorism, the commission of a crime, or self-inflicted injury and deliberate exposure to exceptional danger will not be covered.
- Suicide will be excluded for the first 12 month.
- No stillborn included

Initial:

Funeral Benefit

- Safrican Insurance Company Limited must be notified of Funeral claims within 6 months of a member's death. Even if all the required information is not yet available, it must still be notified of the potential claim.
- Premiums must be paid for the month and the 12 months premium payment history must show that all payments were made monthly. 2 Premiums missed in a cycle of 12 months will result in the lapsing of the policy.
- The following information is required to process a claim (standard claims package):
 - Main member
 - Fully completed, signed and stamped claim form
 - Certified copy of death certificate
 - Certified copy of the deceased's identity document and B11663 (All pages)
 - Copy of the Society Application Form
 - Certified copy of the beneficiary identity document
 - If the cause of death is unnatural – a copy of the police report and page 1 of 1 of the medical Certificate of the cause of death is required
 - Copy of the premium schedule as well as proof of payments / receipts
 - Banking details of scheme / beneficiary
 - Nominated Family Members (e.g. Spouse, additional Spouses, Children, Dependent Children, Extended Family Members)
 - Fully completed, signed and stamped claim form
 - Certified copy of death certificate and B11663 (All pages)
 - Certified copy of the deceased's identity document
 - Certified copy of the main member's identity document
 - Copy of the Society Application Form
 - Copy of the premium schedule as well as proof of payments / receipts
 - Banking details of scheme / beneficiary
 - If the cause of death is unnatural – a copy of the police report and page 1 of 1 of the medical Certificate of the cause of death is required

Repatriation of mortal remains benefit: This is a Value Added Services Benefit, although included in product rates it is a stand alone benefit and can only be provided by an registered and approved service provider. Nominated extended family members excluded.

- Repatriation of Mortal remains within South Africa and neighbouring countries to a maximum of R10 000 per event. The annual limitation is R20 000 per policy per year. This includes embalming and advice on how to apply for death certificate and border crossing documentation.
- When a member's death occurs more than 100km from their normal place of residence / place of burial, the deceased will be transported to the place of burial irrespective of where the death occurred, or where the burial will take place, provided that the repatriation is within the defined territory. Allowance for one family member to travel with the deceased free of charge
- Funeral assistance service, all documentation, Referral to a pathologist if an autopsy is required and referral to a reputable undertaker
- Removal from place of death (anywhere in RSA) Minimum of 20km to a maximum of R900 per claim. Storage to a maximum amount of R1000 / 7 days.
- Standard waiting period as per product waiting period apply to new and existing policies
- 24 hours client and claims assistance service available.
- **Exodec Assist Repatriation call centre no: 0861 55 5515 Quote following: Exodec Society Plan, Scheme Name, Policy reference number**
- A maximum period of 6 months from the date of death is permitted to submit all funeral claim requirements. Failure to comply with this will result in closure of the file and no further evidence being considered for assessment and processing of a claim.

NB: the above are extracts and summaries from the policy and do not replace the official policy, which contains all rights of members

On signing this document Exodec Funeral Administration Solutions confirm the offer of Insurance has been accepted on behalf of Safrican Insurance Company Limited. Cover will commence on receipt of the first premium.

Fee's disclosure: 50% Risk premium, 2% Binder Fee, 16% admin, 16% marketing, 16% operational

Administrator: Exodec 229 (Pty) Ltd FSP 43212 Email: info@exodecgroup.co.za Fax: 086 608 7594

Compliance: Leona Prinsloo CO4920 Email: lprinsloo@mweb.co.za Fax: 0880126646257

Safrican Insurance Company Limited, Company Registration Number 1935/007463/06 is a registered insurer and authorised financial services provider (FSP: 15123)

Exodec 229 (Pty) Ltd FSP 43212 Disclosure in terms of the FAIS Act

Your policy is administered by Exodec 229 (Pty) Ltd, Registration Nr: 2016/486897/07 converted from 2011/008688/23 a licensed funeral policy administrator, license nr 43212. Marieta Pretorius is the responsible person for Exodec 229 (Pty) Ltd, and should you wish to complain regarding your policy, she will be the person to whom you will address your complaint in writing. She can be contacted at:

Tel Nr: 016 362 0334 Fax: 086 608 7594 exodec.funeral@gmail.com	Postal Address: PO Box 934, Meyerton, 1960
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The compliance of Exodec 229 (Pty) Ltd is monitored by Leona Prinsloo and her contact details are as follows:

Tel Nr: 012 6646257	Fax Nr: 0866381067	Email Address: lprinsloo@mweb.co.za
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Your Policy is underwritten Safrican Insurance Company Limited, and it forms part of the Safrican Insurance Company Limited. Their contact details are as follows:

Physical Address: Safrican House, 21 9 th Street, Houghton Estate, 2198	Tel: 011 778 8000
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Should these two parties above be unable to address your concern to your satisfaction, you could lay a complaint with one of the following Ombudsman:

Particulars of FAIS Ombud: P O Box 35655, MENLO PARK, 0102 E-mail: info@faisombud.co.za Tel: 086 032 4766, Fax: (012) 348 3447	Particulars of Long-Term Insurance Ombud: Private Bag X45, Claremont, Cape Town, 7735 E-mail: info@ombud.co.za Tel: 086 066 2837 / (021) 657 5000, Fax: (021) 674 0951
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Exodec 229 (Pty) Ltd does take responsibility for the actions of its representatives and carries professional indemnity but only within the scope of their mandate. Please ensure that the representative does disclose and explain the scope of the mandate to you.

Exodec 229 (Pty) Ltd has a mandate with Safrican Insurance Company Limited for the administration of funeral policies and a society plan. The FSP does not own interest in Safrican Insurance Company Limited nor does Safrican Insurance Company Limited own interest in Exodec 229 (Pty) Ltd. The FSP does have a formal conflict of interest policy which is available on request, and should there ever be any conflict of interest between the FSP and a client, it will be declared.

Kindly note that you should never sign a blank application form. You also should take care that all information submitted to the Insurer is factually correct, as any non-disclosure or incorrect information given on the application form, could lead to the repudiation of your claim and or cancellation of your policy. Please ensure that you receive a receipt at all times when paying premiums in cash, and that it is the receipt of Exodec 229 (Pty) Ltd.

On signing this document Exodec Funeral Administration Solutions confirm the offer of Insurance has been accepted on behalf of Safrican Insurance Company Limited.

The FSP and all its employees are serious about treating our customers fairly! We encourage you to communicate to us in the event that you feel you have not been treated in this manner.

The FSP earn commission and administration fees while the representative collects administration fees from the client.

Main Member Signature

Date