19 July 2021

Dear Policy Takeup Automation

Your FNB Funeral Plan: Fl3382787

Plan start date: 2021/06/25

Thank you for choosing the FNB Funeral Plan. Our Funeral Plan aims to offer you peace of mind knowing that you and your family will have the financial support you need, when you need it the most.

This document contains the benefits of your Funeral Plan which is subject to the Terms and Conditions. Please ensure that all the information is correct to enjoy all the benefits, hassle-free.

Some of the great benefits we offer on the Funeral Plan:

- Double the cover amount will be paid if you or your nominated spouse pass away due to an accident.
- Up to 15% back in eBucks every month
- Up to 21 family members can be covered on a single plan
- Claims are paid out within 24 hours of receipt of all relevant documentation, with 1 in 5 claims currently paid in 30 minutes.
- We will look for your loved ones to pay the benefit, even if they do not claim

You can make changes to your FNB Funeral Plan on the FNB App or online at www.fnb.co.za.

Click on the Insurance icon to:



Alternatively, you can make changes on mobile banking by dialling *120*321#. These changes exclude adding family members.



Debit Order Information

Your Current Premium: R134.00, escalating 5% annually

Monthly Collection Date: 8th of every month

Bank: First National Bank

Account Number: XXXXXXX6700

Billing Reference: FNB Funeral Fl3382787

If your Plan is in arrears, we will collect up to two premiums.

Projected cover and premiums

Below is an illustration of the total projected premiums and cover amount for the Plan Holder and the Funeral Plan for the next 20 years:

Year	Plan Holo	ler	Plan		
	Cover Amount	Premium	Cover Amount	Premium	
2021/07/19	R20 000.00	R49.50	R60 000.00	R134.00	
2022/06/25	R21 000.00	R51.97	R62 500.00	R140.69	
2023/06/25	R22 050.00	R54.57	R65 125.00	R147.73	
2024/06/25	R23 153.00	R57.30	R67 882.00	R155.12	
2025/06/25	R24 310.00	R60.16	R70 775.00	R162.87	
2030/06/25	R31 027.00	R76.78	R87 567.00	R207.87	
2035/06/25	R39 599.00	R98.00	R108 997.00	R265.31	
2040/06/25	R50 539.00	R125.08	R137 924.00	R338.62	

Premiums and cover amounts increase by 5% yearly on the policy anniversary and on all insured lives between ages 18 and 64. However, you can choose to opt-out from the premium and cover increase every year. If a death occurred before the yearly premiums and cover increase, the claim pay-out will not include the increased amount.

Your Beneficiary

In the event of your death, your nominated beneficiary will receive the proceeds of the Funeral Plan. Your nominated beneficiary is:

Beneficiary: Test Auto Beneficiary

ID Number / Date of Birth: 0201012719088

Contact detail: 0730380697

Please ensure that you keep your beneficiary details up to date.

The Funeral Plan premiums are reviewed between October and December every year. If the review results in any changes to your Plan, you will be notified before the changes are implemented.

Please visit www.fnb.co.za for the Terms and Conditions, to see the applicable exclusions and waiting periods on your Funeral Plan, and more information on how your Plan works.

Queries:





Insured Persons

Below is a summary of the insured persons covered under this plan, initial cover amounts and premium as well as the waiting periods. Please review your cover frequently to ensure that it continues to meet your needs.

Insured Person Name	ID or Passport number / Date of birth	Relationship to plan holder	Cover Amount- Out of Waiting Period	Cover Amount – Within Waiting Period	Waiting Period- End Date	Premium
Policy Takeup Automation	0201013870096	Plan Holder	N/A	R20 000.00	2021/12/25	R49.50
Koketso Mohlala	1986/06/10	Spouse	N/A	R20 000.00	2021/12/25	R49.50
Ch One	2019/10/10	Child	N/A	R10 000.00	2022/01/19	R0.00
Ef	8810104800085	Extended Family	N/A	R10 000.00	2022/01/19	R35.00
Discount					R17.00	
Total Premium						R134.00

^{*} Please note: The waiting periods above are only applicable for deaths caused by natural causes.

Terms and Conditions: FNB Funeral Insurance Plan

The FNB Funeral Insurance Plan (or this "Plan") is subject to the terms and conditions set out in this document and must be read with the Plan Schedule and, where applicable, your Customer Agreement.

1. Who is the insurer of the Plan?

FirstRand Life Assurance Ltd ("FirstRand Life") is the Insurer of the Plan. Any reference to "we, us, our, ourselves" in this document shall mean FirstRand Life, FNB, or eBucks, as the case may be.

2. Who is the Plan Holder?

The owner of the Plan who pays the premiums. For the purposes of this document, the Plan Holder will be referred to as "you, your, yourself". You can only be a Plan Holder on one Plan.

3. Who can be insured under the Plan?

You, your Immediate Family and Additional Family members can be insured and will be referred to as "Insured Person(s)".

All Insured Persons must for the duration of cover have either:

- A valid bar-coded RSA ID, RSA Smart ID card or passport; or
- A valid unabridged South African birth certificate (for children younger than 18 years).

If you do not have an RSA ID or RSA Smart ID, you need to have a permit/visa that allows you to be in South Africa for the duration of this Plan.

The Insured Person's name, personal details and the amount for which they are insured for is stated in the Plan Schedule and, where applicable, in the Customer Agreement.

It is your responsibility to ensure that all the Insured Persons' relationship to you are correctly specified and that their personal details are correct. We may confirm Insured Persons' relationship to you and their personal details at any time. Incorrect personal details could be considered a material misrepresentation which will result in us disputing or rejecting any claim, cancelling cover or the Plan itself

Immediate Family refers to:

a) Spouse:

- The person who you are married to, or have entered into a civil union with, in terms of South African law.
- Your partner who you are living with for at least 24 months, in a long-term, open and acknowledged relationship, capable of being registered under South African law.
- The biological parent of your biological child.

Only one Spouse can be covered under Immediate Family. You can cover your additional spouses under Additional Family.

b) Child(ren): Your biological children, legally adopted children, grandchildren and stepchildren. Only eight Children, who must be under the age of 18 when you add them to the Plan, can be covered under Immediate Family. You can cover your additional or older Children under Additional Family.

Additional Family refers to:

 a) Parents: Your biological and legally adoptive parents, step-parents, parents-in-law and legal guardians.

b) Extended Family:

- Your additional Spouse(s)
- Your additional Child(ren) or Child(ren) who are 18 years and older
- Sibling/s: Your Parents' Children (brother or sister)
- Uncle/Aunt: Your Parents' sister or brother
- Niece/Nephew: Your Sibling's Child
- Cousin: Your Uncle/Aunt's Child
- Grandparents: Your Parents' Parents
- Your other child(ren) who live with you, who you care for and for who a court could assign contact and care in terms of South African law
- Your adoptive parent(s), who you lived with, who took care of you and who a court could have assigned contact and care rights to, in terms of South African law.

4. What are the Insured Persons covered for?

This Plan is a life policy and pays out your chosen cash benefit for an Insured Person, as stated in the Plan Schedule or Customer Agreement, if the Insured Person dies.

In the event of the Accidental Death of the Plan Holder and/or the Spouse insured under Immediate Family, double the applicable cover amount will be paid. Accidental Death means a death caused solely by injury sustained during an Accident, during the cover of this plan, which is independent of all other causes, within 90 days after the Accident. Accident means any injury caused solely and unexpectedly, directly and independently of all other causes, sustained by external, violent or physical means. For example, a car crash.

5. When will the Plan and cover start?

This Plan and cover start on the day the Insurer accepts your application. We will notify you once accepted. The contract, which includes the Plan Schedule, Customer Agreement and Terms and Conditions will take effect from the cover Start Date, as stated in your Plan Schedule. The cover of other Insured Persons starts on the date that we add them to the Plan.

6. What must you pay for the Plan and when?

You must pay the premium amount stated in the Plan Schedule. Premiums are payable monthly in advance. Partial payment of premium will not be accepted.

You authorise us to collect your premium each month on your chosen premium collection date by debit order, or by other acceptable means.

You cannot borrow money under this Plan or use it as security for a loan.

Debit order payments:

Premiums must be debited from your own South African bank account. Please ensure that there is enough money in your account.

If your chosen debit order day is within seven days after the Plan's Start Date, your first debit date will only be the following month on your chosen debit order day. You may change your debit date at any time. However, changes requested within four days from the next debit date will only be applied from the following month.

If you do not have enough money in your account for us to debit the premium(s), our electronic tracking service may continue to check your account. The unpaid premium(s) can be debited should there be enough money in your account.

To keep your cover and prevent the Plan from lapsing, we may contact you to change your debit date to the date you receive your income

If the debit date falls on a Sunday or a South African public holiday, we will debit you on either the business day before or after your chosen date. You may change your bank account details, provided your new bank account is in your name and we are able to debit from it. Every December, your premium may be debited on your income date if this is different to the rest of the year.

If you cancel or dispute the debit order, your Plan and cover will also end. You authorise us to debit up to four times your initial premium to allow for future cover and premium increases. If we transfer the Plan to another insurer, then the mandate that you have given to us to debit your account will also be transferred to the new insurer.

What happens if I miss a premium?

Through the **Budget Assistance** benefit, you can at any time be up to four premiums in arrears and still be covered. If you are in arrears (missed a premium payment), we will debit your account with up to two premiums every month until you are no longer in arrears.

Your Plan will lapse when you are four premiums in arrears and we are unable to collect a premium 30 days after the last unpaid premium. If there is a successful claim, while in arrears, we will recover any missed premiums from the claim payment.

Premium and benefit escalations (increases): On every Plan anniversary, the premium and cover amount will increase by 5% for all Insured Persons who are between the ages of 18 and 64.

We will tell you 31 days before the Plan's anniversary about the yearly increase. Every year you can choose not to have the premium and benefit increase apply for that year.

7. eBucks Rewards

This Plan may allow you to earn eBucks back on your premiums, if you have met the qualifying criteria (eBucks Rewards Terms and Conditions apply). The monthly premiums on your qualifying FirstRand Life Insurance Products must be paid on time from an FNB Fusion Account or FNB Cheque Account/RMB Private Bank Fusion Account/RMB Private Bank Cheque Account. You will not earn eBucks for any month where premiums are not paid — either because you didn't make payment that month, or because FirstRand Life chose to waive your premium that month for any reason.

Your participation in the eBucks Rewards Programme allows us to better assess your risk enabling you to earn back a percentage of your premium in the form of eBucks and/or collect points towards your rewards level.

The earn rules are subject to change and changes are effective on 1 July every year. For more details on the eBucks Rewards Programme, how to become a qualifying eBucks member and how to earn points, please visit www.eBucks.com. If you have any queries regarding eBucks Rewards, please contact the eBucks Contact Centre on 087 320 3200.

8. When will the cover and Plan end?

The Plan and all cover ends:

- When the Plan is cancelled:
- If you do not pay the premiums as agreed;
- Immediately upon the death of any Insured Person, if they are the only one covered on the Plan; or
- Three months after your death, if you have insured a Spouse under Immediate Family, and they do not choose to carry on with the Plan as per the continuation option (see Clause 15).

Cover for an Insured Person ends on the day they are removed from this Plan or upon their death.

Waiting Periods and Exclusions (when will an Insured Person not be covered?):

Cause of death	Waiting period	
Accident	None	
Natural causes	6 months from the Start Date	
Suicide	12 months from the Start Date	

No claim will be paid for an Insured Person's death that happens within the waiting period.

Your newborn Children will qualify for immediate cover, if they are added to the Plan within three months of their birth and if you have completed your natural causes waiting period.

Waiving of Waiting Periods: We will waive any waiting periods that you or the Insured Persons on your Plan have already served on another registered insurer's policy, for the same type of benefits, if you give us a copy of the policy schedule and proof of cancellation of the policy. Both of which must not be older than one month from the Start Date of this Plan.

Exclusions: We will not pay any amount, including benefits or refund of premiums, where:

 Death arises from active participation in war, invasion, act of foreign enemy, criminal acts, hostilities or war-like operations (whether war has been declared or not), civil war, military uprising, military or usurped power, martial law, insurrection, rebellion or revolution;

- The death of a non-South African Insured Person occurs while they are outside South Africa and/or the death is not registered with the South African Department of Home Affairs;
- The Terms and Conditions of this Plan are not met; or
- Any information provided upon taking out this Plan, or updating any of the Plan details, or the submission of a claim is materially incorrect, fraudulent, misrepresented or omitted.

10. Changes to cover or Insured Persons:

The Plan Holder may increase or decrease cover amounts, as well as add or remove Insured Persons on the Plan. Increases in cover or cover of new Insured Persons will be subject to the waiting periods in Clause 9 and the same eligibility criteria applied on a new Plan. The minimum and maximum entry ages on the Plan's Start Date, or if added later, are as follows:

Life insured	Minimum age at entry	Maximum age at entry
Plan Holder and Spouse	18	74
Children	Birth	17
Parents and Parents-in-law	35	74
Extended Family members	Birth	74

You can cancel a change to your Plan at any time. We will refund any additional premium paid as a result of this change within two months of making it, provided there has been no successful claim.

11. How and when to make a claim?

The claimant (you, a family member or appointed executor) must notify us of a claim as soon as possible after the claim event. If the claimant does not notify us within 12 months of the claim event happening, the claim will prescribe and we shall not be liable to pay any benefits under this Plan for such claim. Notification can be done on the FNB App, FNB website, at the nearest FNB Branch, to FNB Life telephonically on 087 736 7772 or by email on fnblifeclaims@fnb.co.za.

12. What documentation is needed for a claim?

The following documents are required to process the claim:

- Certified copy of the fully completed BI1663 form (Notice of death);
- Certified copy of the claimant's identity document or valid passport;
- Deceased's identity number or a certified copy of their valid passport:
- Digital submission or completed claim form; and
- Statement by the police (only if death was due to unnatural causes).

We reserve the right to request any additional information to verify or process the claim, which must be provided at the claimant's cost.

13. Who will we pay if an Insured Person dies?

If any Insured Person, other than yourself, dies, the funeral benefit will be paid to you.

If you die and if you have nominated a beneficiary, we will pay the funeral benefit and any refunds due to you to the nominated beneficiary.

If you die without a nominated beneficiary or your beneficiary is untraceable, we may pay the benefits of this Plan to your estate or to the claimant who submitted the required claim documents. If the beneficiary dies before or together with you, then the Plan's benefits will be paid into your estate. We will only pay benefits into a South African bank account.

Nominating a beneficiary: You can choose a beneficiary when the Plan is taken out or at any stage before your death. The following rules apply:

 The beneficiary must be a natural person, in South Africa, 18 years or older, and cannot be a company, business, charity or trust

- The beneficiary must fall within the category of your Immediate or Additional Family.
- You must let us know if you want to change the beneficiary. For the change to be effective, it must have been received and noted by us before to your death. It is your responsibility to ensure that we have the correct personal details and contact number of your beneficiary to avoid any claim delays.
- We reserve the right to ask for, at any time, additional information to verify the beneficiary's identity and relationship to you.

What do I do if my claim gets rejected?

We may reject your claim or cancel your Plan with no refund of premiums if there is:

- Misrepresentation, non-disclosure, or an inaccurate statement or information about your Plan or about any Insured Persons made by you, or on your behalf.
- A fraudulent claim.
- A claim occurs due to a deliberate, wilful or intentional act committed by you, or with your involvement, or anyone acting on your behalf.
- Any breach of, or non-compliance with, any condition of this Plan.

If we reject your claim, you have 90 days to ask us in writing for a review of the decision. When we receive the request, we will review it and tell you of our decision in writing. If you are still not satisfied upon receiving our reviewed decision and do not serve a summons on us within 180 days from the day when we tell you of our final decision, we will then be relieved of our liability and your claim will prescribe. The 180-day period is in addition to the 90 days referred to above.

If we still reject your claim and you are not satisfied with the reason that we give for the rejection, or if you have any unresolved dispute about this Plan, you may refer the matter to the Ombudsman for Long-term Insurance: Third Floor, Sunclare Building, 21 Dreyer Street, Claremont, Cape Town, 7700. Private Bag X45, Claremont, 7735. Tel: (021) 657 5000 Fax: (021) 674 0951. Email: info@ombud.co.za. www.ombud.co.za.

Unclaimed Benefits: The Plan Holder or beneficiary will be contacted if a claim was approved and remains unpaid. If we are unable to make contact, the benefit will be deemed unclaimed. Costs incurred in tracing a beneficiary will be recovered from the Plan. We will follow the ASISA standard on unclaimed benefits.

14. Reinstatement

If your Plan lapses after we have received at least one premium, it can be reinstated within 60 days of lapsing. No additional waiting periods will be applied if missed premiums are paid up, or we have successfully collected a double premium at the next debit order date after reinstatement. Reinstatements after 60 days of lapsing will be treated as taking up a new Plan and will be based on prevailing pricing and product rules. New waiting periods will apply. There will be no cover between the time your Plan lapsed and the first successful premium collection after reinstatement.

15. Waiver and Continuation Option

If you die, the Plan will remain in force for three more months without needing any person to make premium payments. The Spouse, insured under Immediate Family, must inform us during this three-month period if they choose to continue with the Plan as the new Plan Holder. They will only start paying the Plan's premiums for the Insured Persons that are still covered on the Plan after the three-month period.

16. Reviews and Cancellations

We have the right to change or cancel the Plan, benefits, premiums and/or eBucks rewards for any reason, including but not limited to:

- complying with legislation or other rules applicable to this Plan;
- ensuring the Insurer's reputation remains intact and/or is not compromised;

- products/plans no longer remaining financially feasible for the Insurer. This may be applicable to a product line and/or an individual policy;
- undesirable and/or criminal activity.

In addition, we may place the Plan on hold and/or refuse any transaction, instructions or take any other action that we consider necessary to comply with the law and prevent or stop undesirable and/or criminal activity. Any legal issues will be decided in accordance with South African Law. This Plan does not have any surrender or paid-up value.

At times, we may be lenient in enforcing the Terms and Conditions of the contract or the rights that we have in terms of it, if it is to your benefit. Such leniency will not prevent us from being able to enforce any existing or future right we have under the Plan.

Premiums will be reviewed between October and December every year and may be adjusted if it is not viable for us to provide cover at the current pricing. Changes to premiums, will be done for everyone who has this Plan and not only you.

We will notify you via post, SMS, email or any other means at least 31 days before we make any changes or cancellations.

You may cancel the Plan telephonically or in writing at any time by giving us 31 days' notice. We will refund any premiums paid if you cancel the plan within two months from the Start Date (this is known as the **Cooling-off Period**), provided you have not yet claimed, otherwise no premiums will be refunded.

17. How do we communicate with you?

The main form of communication to you regarding this Plan will be via SMS, but we may communicate by email, post, or other means or provide information to you on or from a digital platform. We will communicate to you using the contact details you have provided/confirmed to us.

18. Insurance Complaint Process & Regulatory Information Product Supplier and Underwriter: FirstRand Life is a licensed life insurer. Licence No. 00102/001. Registration No. 2014/264879/06. 3rd Floor, 5 First Place, BankCity, 9 Kerk Street, Johannesburg, 2000. PO Box 1153, Johannesburg, 2000. Tel. 087 736 7772. Email: fnblife@fnb.co.za.

Complaints: If you have any complaints about this Plan or a claim, please contact the Complaints Department. Tel: 087 575 9408. E-mail: care@fnb.co.za. You can also contact the compliance officer on 087 736 7772 or E-mail: insurancepillarcompliance@fnb.co.za.

19. Financial Service Complaint Process & Regulatory Information

FNB is a registered financial services provider for this class and type of product. FNB takes responsibility for the actions of its authorised representatives insofar as they are providing financial services. Some representatives may be rendering services under supervision and will inform you accordingly.

FirstRand Life and FNB hold professional indemnity insurance.

FNB and FirstRand Life are associates in terms of the FAIS Act.

Financial Service Provider: First National Bank ("FNB"), a division of FirstRand Bank Limited, Registration No. 1929/001225/06. FSP No. 3071. 3rd floor, 1 First Place, Simmonds Street, BankCity, 2001. PO Box 1153, Johannesburg, 2000.(visit the FNB website). Tel: 087 575 9404. E-mail: fnblife@fnb.co.za

A Financial Services Provider in terms S3A(2)(a) of the FAIS General Code of Conduct is required to have a Conflict of Interest Policy. A copy of the FirstRand FAIS Conflict of Interest Policy, that also covers this FSP, can be found at https://www.firstrand.co.za/investors/governance-and-compliance/

Complaints: If you have any complaint about FNB, you can contact the Complaints Call Centre on 087 575 9408; or email care@fnb.co.za. You can contact the compliance officer on 011 371 7953.

Unresolved Complaints: If after you have contacted FNB and you have an unresolved dispute about the financial service provided to you, you can contact the FAIS Ombudsman. Physical address: FAIS Ombudsman Kasteelpark Office Park, 2nd Floor, Orange Building, Cnr Nossob & Jochemus Streets, Erasmuskloof, Pretoria or PO Box 74751, Lynnwood Ridge, 0040. Tel: 012 470 9080 / 012 762 5000. Email: info@faisombud.co.za. Website: www.faisombud.co.za.

Policy Information: It is your responsibility to provide all policy information accurately and properly. You remain responsible for the accuracy and completeness of all answers, statements or other information provided by you or on behalf of you. Misrepresentation, non-disclosure of a material fact or an incorrect or inaccurate statement or information by you or on your behalf may lead to the rejection of a claim or the cancellation of this Plan and no refund of any premiums. You are entitled to request a copy of any transaction on your Plan.

FirstRand Privacy Term and Privacy Notice:

- Your personal information (which, for the purposes of this term, includes special personal information) will be held by entities within the FirstRand Group.
- To better understand the entities that form part of the FirstRand Group and how your personal information is treated, please refer to FirstRand's Privacy Notice which forms part of this privacy term. The Privacy Notice can be found on our Platform (for example our banking app or website) or contact us to request a copy.
- In this privacy term references to "we", "us" or "our" are references to the entities in the FirstRand Group, and all affiliates, associates, cessionaries, delegates, successors in title or third parties (authorised agents and contractors), when such parties are acting as responsible parties or operators in terms of applicable privacy laws, unless stated otherwise.
- By accepting these Terms and Conditions or by utilising any products or services ("Solutions") offered by us, you acknowledge that in order to:
 - conclude and fulfil contractual terms or obligations to you;
 - · comply with obligations imposed by law; or
 - to protect or pursue your, our, or a third party's legitimate interests, including offering Solutions that best meet your needs:

your personal information may be processed through centralised functions and systems across entities in the FirstRand Group and may be used for the purposes, in the manner, and with the appropriate controls as set out in our Privacy Notice.

- Where it is necessary to obtain consent for processing outside of this privacy term, we will explicitly seek your consent separately.
- We want to ensure that you fully understand how your personal
 information may be used. We have described the purposes for
 which your personal information may be used in detail in our
 Privacy Notice. We have also set out further information about
 accessing, correcting or objecting to the processing of your
 personal information in our Privacy Notice. We strongly advise
 that you read our Privacy Notice.
- For the purposes of these Terms and Conditions the responsible party is the party with whom you are contracting a Solution, as well as other entities in the FirstRand Group, which are listed in our Privacy Notice as responsible parties.
 For the contact details of these responsible parties, please see our Privacy Notice.