

Illustrative Quotation
Hollard Life Select

This quotation is for illustrative purposes only and is subject to underwriting approval. Hollard Life reserves the right to change the terms of this quotation at its discretion, prior to the acceptance. This quotation is valid until 7 September 2025.

CONTRACT NOTES			
Reference number	FUL38017-242022	Internal Replacement	No
Prepared by	Dylan Flint	Commission type	Mixed Commission (Upfront and Ongoing)
Phone no.		Commission percentage	1% - 1 %
Email	dylan@lifecheq.co.za	Commencement date	2025-09-01
Premium frequency	Monthly	Guarantee period	Fixed Guarantee
Premium pattern	Level Premium	Voluntary escalation	6% pa of Premium

POLICY OWNERS DETAILS	
Carol Corriolis	

LIFE INSURED 1 DETAILS			
Name	Mr Carol Corriolis	Date of Birth	1985-03-19
Gender	Male	Age next birthday (ANB)	41
Smoker	Non Smoker	Campaign	N/A
Qualification	3 year Degree	Marital status	Civil Union
Monthly income before tax	R75,000.00	Monthly income after tax	R53,599.00
Spouses income before tax	R0.00	Employment Type	Self-Employed
Occupation	Accounting Manager	Professional body	Actuarial Society of South Africa
Duty splits	40% Office bound	10% Supervisory office	10% Supervisory onsite
10% Travel	10% Light manual	10% Moderate manual	10% Heavy manual

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BENEFIT DETAILS						
Risk benefit description	Stand alone	Benefit amount	Large Premium Discount	Premium	Premium term	Guarantee term
Mr Carol Corriolis						
Life Cover	Y	R3,000,000.00		R681.83	Whole of Life	10 yrs
Final Expense	N			R0.00	Whole of Life	10 yrs
Max Critical Illness	Y	R500,000.00		R261.09	Whole of Life	10 yrs
Limited Disability Income to 65 - 1 month dp, 24 month payment	Y	R10,000.00		R61.63	24 yrs	10 yrs
Extended Disability Income to 65 - 24 month dp, payment to expiry	Y	R10,000.00		R112.05	24 yrs	10 yrs

PREMIUM SUMMARY DETAILS		
TOTAL PREMIUM: Mr Carol Corriolis		R1,116.60
Policy Fee		R25.00
TOTAL QUOTATION PREMIUM (with relevant discounts applied)		<u>R1,141.60</u>
I/ We authorise Hollard Life to accept this illustrative quotation and the accompanying application if the above illustrative premium changes by less than 10%. Y <input type="checkbox"/> N <input type="checkbox"/>		

ALTERNATIVE QUOTATION PREMIUM STRUCTURES			
Premium pattern	Level	5% compulsory	Age rated
Fixed Guarantee Period	R1,141.60	R793.03	R648.58

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ACCEPTANCE OF QUOTATION

I/We confirm all the details and information as it is presented on this quotation to be true and complete. I understand the recommended products may be limited to what the Representative/Independent Financial Advisor is accredited for. I understand the contents of this document and confirm that the information provided herein is true and correct. I further confirm that I have been provided with my own copy of the Advice records and related disclosure documentation by the Representative/Independent Financial Advisor, in relation to the advice provided and the product recommended. The terms & conditions/Product features and benefits and risks associated, of the product/s, as well as all applicable premium/benefit escalations, costs and charges were explained to me. I am satisfied that the advice and recommended products will address my current financial needs, in terms of my priorities, and what I can afford.

Signature of policy owner:

Carol Corriolis

Signature of life insured:

Mr Carol Corriolis

Date:

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STANDARD RISK BENEFIT EXCLUSIONS

The information below refers to specific benefits and their exclusions as quoted above. Refer to the first page of the Hollard quotation to see which selected benefits are applicable to the relevant life insured.

Disability Income (1st 24 months)	Self inflicted injury
Critical Illness	Alcohol or substance abuse (Kidney and Liver and Gastro-Intestinal Groups only)
	Self inflicted injury
	Pre-existing conditions (Catch-all Groups)
Disability Income	Self inflicted injury
Life Cover - WOL and Term	Own or assisted act with the intention of committing suicide within the first 2 years after commencement or reinstatement of a policy.
	Any applicable cover for spouse and children under the final expense benefit is restricted to accidental death during the first 12 months of the policy.

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ILLUSTRATIVE VALUES FOR MR CAROL CORRIOLIS

Year	Life Cover	Max Critical Illness	Limited Disability Income to 65 - 1 month dp, 24 month payment
Year 1	R3,000,000.00	R500,000.00	R10,000.00
Year 2	R3,144,804.57	R521,926.28	R10,447.45
Year 3	R3,288,878.53	R543,155.18	R10,890.07
Year 4	R3,432,082.12	R563,708.24	R11,328.19
Year 5	R3,574,280.10	R583,608.78	R11,761.85
Year 6	R3,715,333.83	R602,881.38	R12,191.11
Year 7	R3,855,093.48	R621,551.60	R12,616.21
Year 8	R3,993,383.38	R639,645.84	R13,037.27
Year 9	R4,130,037.61	R657,205.22	R13,454.06
Year 10	R4,265,001.38	R674,326.98	R13,866.15
Year 11	R4,398,182.98	R691,029.34	R14,273.53
Year 12	R4,529,475.24	R707,328.52	R14,676.97
Year 13	R4,658,745.54	R723,239.34	R15,077.37
Year 14	R4,785,839.59	R738,777.18	R15,475.41
Year 15	R4,910,586.23	R753,956.74	R15,871.38

Year Extended Disability Income to 65
- 24 month dp, payment to expiry

Year 1	R10,000.00
Year 2	R10,448.73
Year 3	R10,895.17
Year 4	R11,340.87
Year 5	R11,787.17
Year 6	R12,235.35
Year 7	R12,688.13
Year 8	R13,148.37
Year 9	R13,619.15
Year 10	R14,102.70
Year 11	R14,605.56
Year 12	R15,130.85
Year 13	R15,682.26
Year 14	R16,263.96
Year 15	R16,880.73

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Total Premiums		
Year	Total Premium	% Premium Increase
Year 1	R1,141.60	0.00
Year 2	R1,208.60	5.87
Year 3	R1,279.61	5.88
Year 4	R1,354.88	5.88
Year 5	R1,434.68	5.89
Year 6	R1,519.26	5.90
Year 7	R1,608.92	5.90
Year 8	R1,703.95	5.91
Year 9	R1,804.69	5.91
Year 10	R1,911.48	5.92
Year 11	R2,024.65	5.92
Year 12	R2,144.64	5.93
Year 13	R2,271.82	5.93
Year 14	R2,406.62	5.93
Year 15	R2,549.52	5.94

Illustrative Quotation**Hollard Life Select****SUMMARY OF RISK BENEFITS SELECTED**

Benefit descriptions below are a brief overview of some of the most important features of the risk benefits that have been selected. Refer to the first page of the Hollard quotation to see to which selected benefits are applicable to the relevant life insured. Refer to the policy wording for a detailed explanation of the benefit terms and conditions. Alternatively visit www.hollard.co.za for all benefit information.

Extended Disability Income to 65 - 24 month dp, payment to expiry

This Disability Income Benefit is payable on a monthly basis following the expiry of the 24 month waiting / deferred period while the insured is disabled and unable to perform his/her own occupation. This benefit also pays an income should the insured become impaired in terms of one of the covered events. The monthly payment will be increased at each annual anniversary of the start of the claim by the lesser of 10% and the consumer price inflation. Payments will cease on benefit expiry. An additional once off payment of the benefit amount shall be made if the insured dies whilst in claim. The benefit also includes a Guaranteed Insurability Benefit and Drivers Benefit.

Final Expense

This benefit is included automatically at no extra cost. Final Expense benefit pays out R40 000 on the death of the insured (as an advance of the life cover), R20 000 on the death of the spouse, and R10 000 on the death of a child of the life insured. Benefits for the spouse and children do not accelerate the life cover and cover is restricted to accidental death only during the first 12 months of the policy. Cover for the spouse ceases on their 65th birthday.

Life Cover

The Life Cover benefit provides a lump sum payment of the insured amount on the death of the insured life within term specified on the schedule. An advance on the death benefit may be claimed if the insured life is diagnosed with a terminal illness prior to 2 years before the expiry of the term of the benefit or at any time if a whole life benefit. Interim Accident Cover: Cover is provided in the event of accidental death from the date of receipt of the original application by Hollard Life to the date of acceptance of the policy or declination of the policy if earlier, subject to a maximum of 30 days and limited to R500 000, or the sum assured if lower.

Limited Disability Income to 65 - 1 month dp, 24 month payment

The Disability Income Benefit is payable on a monthly basis following the expiry of the waiting / deferred period while the insured is disabled and unable to perform his/her own occupation during the term of the benefit specified on the schedule. This benefit also pays an income should the insured become impaired in terms of one of the covered events. On the annual anniversary of the start of the claim payments, the monthly income benefit will be increased by the lesser of 10% and consumer price inflation. Payments will cease 24 months after the date of disability. An additional once off payment of the benefit amount shall be made if the insured dies whilst in claim. The benefit also includes a Guaranteed Insurability Benefit and Drivers Benefit.

Max Critical Illness

This benefit provides the life insured and his/her children with cover for all major body systems in the event that they should be diagnosed with a specific illness, suffer from a specific condition or undergo a specific listed procedure. The benefit includes a comprehensive range of critical illness events including less frequent events. The Life Cover benefit amount is unaffected by a claim paid on this benefit. The benefit for heart attack, coronary artery disease requiring surgery, stroke and cancer is the full sum assured irrespective of the severity level. The critical illness levels in the table below are per the Standardised Critical Illness Definitions of the Association for Savings and Investments SA (ASISA). The four main critical illnesses are heart attack, cancer, stroke and coronary artery bypass graft (CABG).

	Severity A	Severity B	Severity C	Severity D
Heart attack	100%	100%	100%	100%
Stroke	100%	100%	100%	100%
Cancer	100%	100%	100%	100%
CABG	100%	100%	100%	100%

Policy Fee

The policy fee forms part of the total premium payable on the policy. It is level and does not increase with compulsory or voluntary escalation rates.

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STANDARD UNDERWRITING REQUIREMENTS

Our underwriting requirements are set to balance risk management and keeping medical tests to a minimum. Underwriting requirements will be based on this quote and information contained in the application form. This means that we no longer have standard requirements and you will be notified of the specific requirements for this application.

We advise against sending clients for any medical tests until we have confirmed the underwriting requirements with you. We will not cover the cost of any tests that are not part of our requirements.

CONTRACT NOTES

1. This policy is underwritten by Hollard Life.
2. This quotation is for illustrative purposes only and is subject to underwriting approval. Hollard Life reserves the right to change the terms of this quotation at its discretion, prior to acceptance.
3. This quotation is only valid for 30 days.
4. This policy has no investment element.
5. It is anticipated that the premiums quoted will be sufficient to provide for the benefits over the entire life of the policy, unless future expected experience differs from what we priced for. This quote provides for a fixed guarantee period during which the premium rates will not be increased, even if experience is worse than expected. If the premium rates are increased or decreased after the guarantee period, the new premium rates may then be guaranteed for a further guarantee period, to be determined at the review date.
6. Benefits indicated as standalone (Y) do not reduce the life cover in the event of a claim.
7. Depending on the amount of premium payable (for qualifying benefits only), you may have qualified for a large premium discount. Should the amount of premium payable on any of the discounted benefits be reduced due to any change made to the policy, the discount amount on the respective benefits will be reduced accordingly.

Illustrative Quotation**Hollard Life Select****STATUTORY DISCLOSURES**

Hollard Life Assurance Company Limited (Reg No. 1993/001405/06), a Licensed Life Insurer and an authorised Financial Services Provider

Physical address 1st Floor Florence House, Hollard Campus, 22 Oxford Road, Parktown, 2193
 Postal address PO Box 2944, Pinegowrie, 2123
 Telephone 0860 00 00 11
 E-mail mypolicy@hollard.co.za

If you have a complaint about Hollard Life's service, the policy contract, and information provided or the products please contact our Complaints Department:

Telephone 011 351 4150
 Postal address PO Box 2944, Pinegowrie, 2123
 E-mail mycomplaint@hollard.co.za

Complain to Hollard's Office of the Internal Adjudicator (OIA)

If you are still unhappy with the Hollard Life complaints department's outcome after their review, you may email Hollard's independent OIA. The OIA is not tied to any division so will provide an independent, objective and fair investigation of your complaint. Please send all your documentation to Email: lifeoia@hollard.co.za.

The Hollard Life compliance officer contact details are:

Telephone 011 351 5000
 Postal address PO Box 87428, Houghton, 2041
 E-mail hlcompliance@hollard.co.za

To claim a benefit contact your financial adviser or the Hollard Life call centre on 0860 00 00 11 who will inform you of the procedures to follow. Claim forms are available on the Hollard Life website www.hollard.co.za

The contact details for the ombuds who oversee the long-term insurance industry are:

Ombud for Long-Term Insurance Tel: 021 657 5000 or 0860 103 236 E-mail: info@ombud.co.za
 FAIS-ombudsman Tel: 012 762 5000 E-mail: info@faisombud.co.za

Commission is payable to your Financial Adviser in accordance with the regulations under the Long Term Insurance Act 1998. On R1,116.60 of the initial monthly premium, once off upfront commission is payable as follows:

First Year : R112.43
 Second Year : R37.48

Ongoing commission of R11.17 per month is payable to your Financial Adviser, on R1,116.60 of the initial monthly premium.

Note that the commission illustrated here is on the basis that this is a new business quotation. If the quotation is prepared for an endorsement or upgrade to an existing policy, the amount of commission will be lower.

Commission on any future premium increases will be in a similar proportion to the premium increase.

Hollard Life is not eligible to receive any ownership or financial interests, nor does it have any relationships with third parties that result in a conflict of interest as defined in the Financial Advisory and Intermediary Services Act such that the performance of its obligations or rendering of services to a policyholder will be influenced or biased. Hollard Life's Conflict of Interest Management Policy can be found on the Hollard website at www.hollard.co.za

If a premium is not received on or before the commencement date, a grace period of 30 days will be allowed - if the premium is not paid within this grace period the benefits will cease.

If you are not satisfied with your policy, you have the right to cancel it within 30 days of issue and get a refund of premiums paid.

If this policy is intended to replace another policy, it is important that your Financial Adviser discusses the implications with you. If the policy arising from this quotation is a replacement of an existing Hollard Life policy then this policy will qualify for commission as follows:

Existing policy duration in force	Initial upfront commission	Ongoing commission with each premium payment
0 to 6 months	R112.43	R11.17
7 to 23 months	Nil	R118.69
24 months or more	Nil	R84.78

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STATUTORY DISCLOSURES

POPIA DISCLOSURE:

Hollard cares about your privacy. In order to provide you with our service, we and our service providers have to process the personal information you provide us with by completing this form. We will treat this information with caution and we have put reasonable security measures in place to protect it.

ANTI MONEY LAUNDERING:

Anti-Money Laundering Money Laundering & Financing of terrorism risks (Anti-Money Laundering) are governed by relevant applicable legislation. At Hollard, we've taken the necessary steps to implement the Anti-Money Laundering legislation that deals with preventing money laundering and combatting the financing of terrorism. We are required by anti-money laundering legislation to obtain specific information from you and certain related parties, to enable us to establish and verify your and related parties' identity. You understand that different information will be required depending on the type of client and related party and we may require supporting documentation. This requirement applies when we receive the application, on an ongoing basis while the policy is in force and when a claim is made under the policy. You and the related parties agree to co-operate fully with us and to provide us with all such information and documentation requested as soon as possible or within a timeframe that will be communicated to. You further understand that if we do not receive the information and documentation requested from you or from a related party within a reasonable time, we may be unable to provide you with insurance cover or pay a claim and in terms of the anti-money laundering legislation we will be required to cancel your policy, and any other existing policies thereafter. You consent to the processing of your personal information and those of spouse and beneficiary and the disclosure thereof to any Regulatory body, Tax authority, Credit Bureau, Anti-money laundering legislation and other applicable legislation. You consent to us conducting ongoing monitoring of your transactions and activities related to your business relationships with us, as required by anti-money laundering legislation, and understanding that we are not required to disclose our monitoring activities to you. If we are unable, for whatever reason, to conduct ongoing monitoring of your transactions and activities, we may be unable to provide you with Insurance cover and may have to cancel your existing policies. We will therefore be unable to process a claim before the claimant has provided us with the required information and documents for us to establish and verify their identity.

FICA DISCLOSURE:

In accordance with applicable anti-money laundering laws in South Africa, we are required to obtain specific information and evidence to verify your identity (and in many cases the identities of related persons, such as directors, beneficial owners and persons instructing us on your behalf (where applicable)) when applying for cover and on an on-going basis. If we ask you for information or documents (including originals or certified copies) you must provide them to us as soon as possible. If we do not receive adequate information and evidence within a reasonable time of our request we may be unable to provide you with cover or may cancel the policy in accordance with applicable law.

GENERAL:

Please refer to your policy contract for full details on cancellations and Cooling off periods for the recommended products. Please note that where the Intermediary providing advice is a not Hollard Specialist Life Representative, they are an Independent Financial Advisor, and all relevant legislative information and disclosures would need to be provided in the Client advice record or supporting documentation provided by the Intermediary. Please refer to your Policy Schedule for this section under Intermediary details to confirm the Brokerage and Intermediary details.