



Address
Address

DATE

Dear [Title] [Surname]

We are pleased to inform you that your voluntary insurance policy [Plan Name] offered by The New Apostolic Church Burial Fund is underwritten by Clientèle Life Assurance Company Limited, a licensed life insurer and authorised Financial Services Provider. You can now rest assured knowing that your loved ones will be taken care of when you are no longer around.

Attached is your new Member Certificate. Please read it carefully and ensure that all the information relating to your policy is accurate. Should you need to correct or change your details please contact 0861 273 883 or email nacbf@fmscenta.co.za.

Please take note of your updated terms and conditions.

The valuable benefits of your policy include:

- Total Funeral Benefit: RXXXXXXX.
- Approved Funeral Benefit claims will be paid within 24 hours of a valid claim and receipt of valid documentation.

For more information please contact 0861 273 883 or email nacbf@fmscenta.co.za.

Yours sincerely,

The New Apostolic Church Burial Fund Plan

FUNERAL INSURANCE MEMBER CERTIFICATE

This certificate certifies that the member listed below participate in the benefits of the policy.

CONTRACT PARTY INFORMATION

Name of Insurer	Clientèle Life Assurance Company Limited <i>The intermediary and underwriter of the product and a licensed insurer and financial services provider</i>	Type of Insurer	Life Insurer
		FSP Licence Number	15268
		Telephone Number	011 320 3000
		Email Address	services@clientele.co.za
Name of Intermediary (Premium Collection) and Underwriting Manager Agent	AFS Financial Services a division of UniQ Benefit Solutions (Pty) Ltd <i>An authorised financial services provider</i>	FSP Licence Number	52006
		Telephone Number	0861 273 883
		Email Address	customercare@fmscenta.co.za
Name of Administrator	AFS Financial Services a division of UniQ Benefit Solutions (Pty) Ltd	FSP Licence Number	52006
		Telephone Number	0861 273 883
		Email Address	customercare@fmscenta.co.za

POLICYHOLDER INFORMATION

Individual Policy Number	XXXXXXXXXX	Participating Group	XXXXX
		Telephone Number	XXXXXXXXXXXX
		Email Address	XXXXX@XXXXX.XXX
Inception Date of Policy	DD/MM/YYYY		
Primary Payment Method	Payment Schedule		
Cooling-off Period	31 days		

INSURED LIVES

Name	Surname	Relationship	ID Number	Benefit Value	Entry Date	Entry Age
XXXXXXXXXX	XXXXXXXXXX	Principal Insured	XXXXXXXXXXXX	RXX XXX	2024/01/01	37
XXXXXXXXXX	XXXXXXXXXX	Spouse	XXXXXXXXXXXX	RXX XXX	2024/01/01	28
XXXXXXXXXX	XXXXXXXXXX	Child	XXXXXXXXXXXX	RX XXX	2024/01/01	1
XXXXXXXXXX	XXXXXXXXXX	Child	XXXXXXXXXXXX	RX XXX	2024/01/01	9

FUNERAL BENEFITS

In the event of your death, or the death of a member of your family, the following benefits are payable:

You as a primary member:	RXXXXX
Your spouse:	RXXXXX
Your dependent child aged between 14 years and 21 years at date of death:	RXXXXX
Your dependent child aged between 6 years and 13 years at date of death:	RXXXXX
Your dependent child aged between 0 years and 5 years at date of death:	RXXXXX
Your dependent stillborn child (defined as a pregnancy that is more than 28 weeks):	RXXXXX

BENEFICIARY

Name	Surname	Relationship	% Allocation
XXXXXXXXXX	XXXXXXXXXX		XXXXXXXXXXXX

FUNERAL POLICY TERMS AND CONDITIONS

Some words used in this document have a specific meaning which may differ from the standard dictionary definition.

Beneficiary Nomination	Please note that should the nominated beneficiary at time of claim, which is confirmed under the declaration to be completed by the rector / priest or coordinator, differ according to records available, claim will be pending confirmation, and verification before being processed. In the instance of no beneficiary being provided or on record, the rector / priest or coordinator will confirm such for claim to be processed.
Specific Conditions	<ul style="list-style-type: none"> • Only one claim per life assured, if approved, will be payable. • Where a dependent under the age of 21 years becomes an expectant mother, it is required for this member to apply for their own Policy and would no longer be considered a dependent but a Principal Insured. <p>All members living with a disability:</p> <ul style="list-style-type: none"> • Medical proof must be provided for all members living with a disability to the NACBF before being approved at application stage. Each case would be treated on merit for validation. • A member living with a disability will be covered under the main members policy as a dependent beyond the age of 21 years and must be under the care of the main member. • Please note that members living with a disability cannot have two (2) policies • If a valid claim is submitted, please note that the above-mentioned rules will apply, and will result in the second claim being repudiated if submitted. <p>Transfer of Benefits to New Principal Insured upon death event</p> <ul style="list-style-type: none"> • In the case where a couple gets divorced, the divorced spouse is allowed to continue to receive cover but on their own plan with its unique number (even if their age exceeds 65 years). The Principal Insured is to continue on their current plan. Minor children must be covered under one of the parent's policies.
Policy Inception Date	Please note that the above-mentioned policy will only be activated once the main member through its respective participating group has paid the respective annual premium.
Policy Waiting Period	<ul style="list-style-type: none"> • Death due to natural or unnatural causes (other than suicide) will be payable after 3 months. • The waiting period (i.e. 3 months) is calculated from the entry date of the insurance policy. If the Principal Insured had another active policy with similar benefits in the past 31 days, the waiting period will be determined from the commencement of that policy. Please note that a waiting period may restart if premiums are missed.
Claims Procedure	<p>Funeral Benefit</p> <ul style="list-style-type: none"> • All claims must be submitted within 6 months of death. • All supporting documents must be submitted and processed with 6 months of death. • Claimant to contact the claims centre on 0860 555 992 or email nacbf@fmscenta.co.za. • The claim administrator will enter into consultation with the claimant to assist him/her with the necessary forms, processes and required documents. • All required documents need to be completed and certified before submitting through for processing. • Once the claim is submitted, the claims centre will inform the claimant of the outcome within 48 hours.
Non-Premium Collection and Cancellation	<ul style="list-style-type: none"> • Premiums are collected and payable, annually. • All members enjoy a 31-day cooling-off period. One calendar month commencing on the first day of the month in which the premium was paid. Please note that this is applicable to the Funeral Benefits. • Should premium not be received on due date, please note that the Funeral Policy will be terminated in accordance with Rule 15 A of the Policy Protection Rules.
Exclusions	<p>Funeral Cover will not be provided in the following circumstances:</p> <ul style="list-style-type: none"> • Death due to a violation of an act of law. • Death in a month where the annual premium is not received. • Death in a waiting period due to any cause other than an Accident. • If the Principal Insured is no longer a member of the Scheme. • Death as a result of suicide within the first 12 months. • Where the claim is fraudulent in any way. • Death due to an Accident where such Accident occurred before policy commencement or reinstatement date (whichever occurred last).
Client Services	<ul style="list-style-type: none"> • Call centre: 0861 273 883 • Email: nacbf@fmscenta.co.za • Website: www.afsfinancialservices.co.za
Branch Address	<ul style="list-style-type: none"> • FSP Name UniQ Benefit Solutions (Pty) Ltd. • Physical address: 18 Sycamore Crescent, Atlas Gardens Business Park, Contermanskloof, Durbanville,7550 • Postal address: 18 Sycamore Crescent, Atlas Gardens Business Park, Contermanskloof, Durbanville,7550
Disclosure	<p>AFS Financial Services a division of UniQ Benefit Solutions (Proprietary) Limited is an authorised financial services provider, FSP no. 52006. Underwritten by Clientèle Life Assurance Company Limited, a Licensed Life Insurer and an Authorised Financial Services Provider, FSP 15268.</p> <ul style="list-style-type: none"> • AFS Financial Services a division of UniQ Benefit Solutions (Pty) Ltd holds professional indemnity cover. • Shareholdings in Insurers if 10% or more: None. • Policy Wording: A copy of the policy wording can be obtained from UniQ Benefit Solutions (Pty) Ltd. • Kindly take note that above mentioned Intermediaries will earn an intermediary fee of 1% calculated on the gross risk premium for rendering intermediary services. • A binder fee of 1% calculated in the gross risk premium will be earned by AFS Financial Services a division of UniQ Benefit Solutions (Pty) Ltd. <p>I hereby agree that this is a benefit offered to me by AFS Financial Services a division of UniQ Benefit Solutions (Proprietary) Limited, and that no needs analysis was conducted. I hereby agree that the information provided to me was sufficient for me to understand the benefit in order to make an informed decision on the effectiveness and cover provided by the above-mentioned policy type.</p>

ADDITIONAL AFS BENEFITS TERMS AND CONDITIONS

Additional products or services to the financial products provided are not regulated under the FAIS Act and therefore are not afforded the same protections as financial products or services in terms of the FAIS Act.

Funeral Support and Repatriation of Mortal Remains	<ol style="list-style-type: none"> 1. Funeral Support Services shall mean the services that we will provide to an eligible person, and which depending on the requirements and on the circumstances of the eligible person will include the following: <ol style="list-style-type: none"> 1.1. Repatriation as contemplated in 1.2 below. 1.2. Transportation arrangements for a single relative to accompany the mortal remains to the nearest funeral home of choice closest to the place of burial. 1.3. Accommodation for a maximum of one night, if required, for a single relative accompanying the mortal remains to place of burial. 1.4. Legal assistance regarding the funeral procedures e.g., death certificate, removal of body, etc. 1.5. Assistance in the arrangement of a funeral or cremation, it being recorded that any costs shall not be for the account of UniQ Benefit Solutions. 1.6. Assistance in obtaining a death Certificate. 1.7. Referral to pathologists if required. 1.8. Referral to a psychologist or psychiatrist if required. 1.9. Referral for special counselling particularly relating to the loss of a child if required. 1.10. Territory shall mean the Republic of South Africa, Namibia, Zimbabwe, Botswana, Swaziland, Lesotho, and Mozambique (south of the 22-degree parallel). 2. Repatriation shall mean the repatriation of mortal remains of the eligible person to the funeral home of the eligible person's choice, closest to the place of burial. The place of death must fall within the Territory and the place of burial must fall within the Republic of South Africa.
Trauma, Assault & HIV Support	<p>This is a 24-hour emergency assistance helpline, which will arrange for the necessary help an eligible person may require in a situation where assault, accidental exposure to HIV or any other trauma occurs.</p> <p>Assault is defined as "a bodily injury sustained by violent external and visible means" Eligible persons will receive medical treatment for bodily injury. In the case of trauma, the eligible person will receive psychological counselling from a public trauma centre or a private institution. An eligible person may call the helpline in the event of any of the following happening to an eligible person (close family member):</p> <ul style="list-style-type: none"> • Rape • Hi-jacking • Child abuse • Suicide of close family members • Fire • Motor Vehicle Accident • Death of next-to-kin • Domestic violence and/or abuse • Kidnapping / Abduction • Woman abuse <p>Trauma & Assault</p> <ul style="list-style-type: none"> • A helpline that arranges the nearest local emergency assistance service for the eligible person, as well as providing emergency transport to the nearest, most appropriate medical facility as a result of a bodily injury. • Where necessary the eligible person will be stabilised before transportation is provided (Note: Inter-hospital transfers are not included). • The helpline is manned by professional resource nurses, maintaining a high level of service. • Cover for Assault is R7,000 (seven thousand rand) per eligible person with a maximum of R10,000 (ten thousand rand) per family per occurrence in respect of medical indicated treatment for bodily injury. • The resource nurses also assist with referrals for psychiatric consultations. • Cover for Trauma (where relevant, in addition to the above amount in respect of an Assault) is R5 000 (five thousand rand) per eligible person with a maximum of R10 000 (ten thousand rand) per family per occurrence in respect of Psychiatric Consultations. <p>HIV Protection Treatment</p> <p>The HIV Protection Treatment Service enables the eligible person to make use of, at his/her own discretion, of the following services:</p> <ul style="list-style-type: none"> • 24-hour access to trauma counsellors, providing telephonic trauma counselling as well as counselling for post-traumatic stress disorder. • 3 (three) Psychiatric consultations (per incident) with a specialist, which can be either a general practitioner, trauma trained registered nurse or trauma counsellor. <p>Provided that the accidental exposure to HIV has been established, and strictly on the treating doctor's orders, if the person is HIV negative (following a rapid test) he/she will also be provided access to:</p> <ul style="list-style-type: none"> • A 30-day starter pack of antiretroviral medication. • A 7-day course of STI (Sexually Transmitted Infections) medication. • A 'morning after pill' to prevent pregnancy (for women who are raped). • Registration for an HIV management programme, where applicable. • 24-hours-a-day, 365-days-a-year telephonic access to our HIV counselling centre for information, advice, and support. • In the event of rape each survivor will be handled by a case counsellor for a period of 12 months post incident. This will be done telephonically on a monthly basis. Treatment costs are excluded. <p>Should the person be HIV positive at the time of the event, he/she will be provided access to:</p> <ul style="list-style-type: none"> • 24-hours-a-day, 365-days-a-year telephonic trauma counselling. • 24-hours-a-day, 365-days-a-year telephonic HIV counselling. • 3 (three) consultations (per incident) with a specialist, either a general practitioner, trauma trained registered nurse or trauma counsellor. • A 7-day course of STI medication. • A 'morning after pill' to prevent pregnancy (for women who are raped).

<p>Trauma, Assault & HIV Support continued</p>	<p>Exclusions Compensation will not be payable as a result of the eligible person's:</p> <ul style="list-style-type: none"> • Participation in any riot, civil commotion, labour disturbance, strike or lockout or public disorder or any act of activity which is calculated or directed to bring these about. • Willful misconduct. • Performance or attempt to perform: <ul style="list-style-type: none"> ○ Any act on behalf of any organization, body or group of persons calculated or directed to overthrow or influence any state or government, or any provincial, local, or tribal authority with force, or by means of fear, terrorism, or violence. ○ Any act which is calculated or directed to bring about destruction or damage or bodily injury in order to further any political aim, objective, or cause, or to bring about any social or economic change or in protest against any state or government or any provincial, local, or tribal authority for the purpose of inspiring fear in the public or any section thereof. <p>AFS Financial Services a division of UniQ Benefit Solutions will not be liable for:</p> <ul style="list-style-type: none"> • Any claim which is in any respect fraudulent. • Loss, damage, or bodily injury deliberately caused by the insured person or any person acting in collusion with the insured person, consequential loss, or damage except as specifically provided.
<p>Emergency Medical Assist</p>	<p>Through its network of service providers, we will render medical services to eligible persons. Alternatively, it will make use of the most appropriate service providers to perform medical services on the principles set forth below:</p> <ul style="list-style-type: none"> • Emergency medical treatment shall mean medical treatment administered in response to an episode of illness or injury that of necessity requires immediate medical attention. • Illness shall mean bodily illness, sickness, or disease. • Injury shall mean bodily injury caused by accidental (unintentional or unplanned), violent, external, and visible means. • Accident shall mean an external unexpected event that is not traceable even indirectly to the eligible persons' state of mental or physical health before the event. • Medical Emergency shall mean any injury or illness that threatens human life, and which requires immediate medical intervention to preserve life.
<p>Legal Service</p>	<p>The legal service is a broad-based service that affords the eligible person legal assistance. It is a legal service provided to the eligible person by admitted attorneys whether or not they are practising attorneys. The service comprises:</p> <ul style="list-style-type: none"> • A 24-hour telephonic legal advice line; • A standard legal document service; and, • A direct legal consultation service. • 24-hour advice line, in the first instance, serves as a portal for the eligible person who have legal enquiries. • The free 30 (thirty) minute consultation service is available to the eligible person provided it takes place at a firm that is within the magisterial district within which the eligible person resides, but if this is not practical, then in a nearby jurisdiction. Upon an eligible person consenting to attend such meeting, the relevant advisor will arrange the meeting and revert to the eligible person to confirm. • If, after the consultation, the eligible person wishes to mandate the attorney at the eligible person's own cost and expense, it will be the eligible person's prerogative to do so. • 50% discount on attorney transfer fees, bond registration fees, prescribed attorney fees for personal injury claims, and Executor fees on winding up of estates only when using our panel of attorneys.
<p>Grocery Benefit</p>	<p>Upon the death of the Principal Insured, the nominated beneficiary will receive a Shoprite /Checkers voucher valued at R500, redeemable at any till point nationwide. If the benefit is transferred to the surviving spouse who becomes the new Principal Insured, no additional voucher will be due if one has already been issued within the same annual policy period i.e., 1 July – 30 June. Therefore, only 1 voucher is payable annually in the event of the death of a Principal Insured member.</p>
<p>Claims</p>	<p>In order to claim for any of these further benefits, please call 0861 273 883 or email customer@fmscenta.co.za.</p>

**STATUTORY NOTICE TO LIFE INSURANCE POLICYHOLDERS
IMPORTANT PLEASE READ CAREFULLY
DISCLOSURE AND OTHER LEGAL REQUIREMENTS**

(This notice does not form part of the Insurance Contract or any other document) As a Life Insurance Policyholder, or prospective Policyholder, you have the right to the information below:

About the Insurer

Clientèle Life Assurance Company Limited ("Clientèle Life") is an authorised Financial Services Provider (FSP No. 15268) in terms of the Financial Advisory and Intermediary Services Act ("FAIS Act"), authorised to render advice and intermediary services in respect of Category I, Subcategory 1.1 (long-term Insurance: Category A), 1.3 (Long-term Insurance: Category B1), 1.4 (Long-term Insurance: Category C), and 1.20 (Long-term Insurance: Category B2), 1.21 (Long-term Insurance: Category B2-A), 1.22 (Long-term Insurance: Category B1-A). Clientèle Life is also a licensed Life Insurer in terms of the Insurance Act and the product supplier. Clientèle Life accepts responsibility for the actions of its representatives in rendering intermediary services to the extent that such representative acts within the course and scope of its mandate.

Registration No. 1973/016606/06

VAT No. 4230/166/979

The Insurer holds Professional Indemnity Insurance

Postal address: P O Box 1316, Rivonia, 2128

Physical address: Clientèle Office Park, Cnr Rivonia and Alon Roads, Morningside

Nature and extent of benefits, when they are realisable or payable	Refer to Policy Documentation
Restrictions, limitations, exclusions, or penalties for early termination	Refer to Policy Documentation
Charges, fees and investment component	Refer to Policy Documentation
Commission, consideration, fees and charges payable	Refer to Policy Documentation
Cooling off rights	A 31-day cooling off period applies

Details of complaints or services department

For any policy queries or additional information, please contact our National Contact Centre on 011 320 3000 or email services@clientele.co.za. Website: www.clientele.co.za.

Complaints Procedure:

- Should you wish to lodge a complaint please contact the National Contact Centre on 011 320 3000 or email services@clientele.co.za.
- In the event that your complaint is not satisfactorily resolved, then you may refer the complaint to the Office of the Independent Arbitrator at complaintsarbitrator@clientele.co.za or on 011 320 3000. The Independent Arbitrator has the independence and authority to overturn the initial findings and will only consider cases having previously gone through step (1).
- In the unlikely event that you are still not satisfied with the decision then you can forward your complaint to the FAIS Ombud on 012 470 9080/012 762 5000 and/or the National Financial Ombud Scheme South Africa NPC (the NFO) on 0860 800 900.

About the Intermediary (FSP) and Binder holder

Clientèle Life has entered into a binder agreement with UniQ (Pty) Ltd, in terms of the Long Term Insurance Act for the performance of various administrative functions including entering, varying and renewing policies, determining policy premiums, determining policy wording, determining benefits and settlement of claims on Clientèle Life's behalf. The Intermediary is also mandated to collect premiums on Clientèle Life's behalf. The intermediary is an authorised Financial Services Provider, FSP 52006, in terms of the Financial Advisory and Intermediary Services Act ("FAIS Act") and is authorised to under FAIS to render advice and intermediary services in respect of the products which it sells. These products are included in the following categories: Category I, Subcategory 1.1 (Long-term Insurance: Category A), 1.3 (Long-term Insurance: Category B1), 1.20 (Long-term Insurance: Category B2), 1.21 (Long-term Insurance: Category B2-A) and 1.22 (Long-term Insurance: Category B1-A). The Representative must inform you whether he/she is currently performing advice/intermediary services under Supervision in terms of the FAIS Act. The Intermediary receives maximum statutory regulatory commission in terms of the Long Term Insurance Act as well as a Binder Fee of R15.00 of risk premium. The Intermediary holds Professional Indemnity Insurance Cover. The Intermediary does not directly or indirectly hold more than 10% of the Insurer's shares, or has any equivalent substantial financial interest in the Insurer. The Intermediary has not received more than 30% of its total remuneration during the preceding 12 months from the Insurer.

Registration No. 2020/791335/07

Telephone number: 0861 273 883

Email address: customercare@fmscenta.co.za

Postal address: 18 Sycamore Crescent, Atlas Gardens Business Park, Contermanskloof, Durbanville, 7550

Physical address: 18 Sycamore Crescent, Atlas Gardens Business Park, Contermanskloof, Durbanville, 7550

Details of complaints or services department

The Insurer has entered into a binder agreement with UniQ Benefit Solutions (Pty) Ltd. For any policy queries or additional information, please contact them on 0861 273 883.

Complaints Procedure:

- Should you wish to lodge a complaint please contact AFS Financial Services a div of UniQ Benefit Solutions (Pty) Ltd on 0861 273 883.
- In the event that your complaint is not satisfactorily resolved, then you may refer the complaint to the Office of the Independent Arbitrator at complaintsarbitrator@clientele.co.za or on 011 320 3000. The Independent Arbitrator has the independence and authority to overturn the initial findings and will only consider cases having previously gone through step (1).
- In the unlikely event that you are still not satisfied with the decision then you can forward your complaint to the FAIS Ombud on 012 470 9080/012 762 5000 and/or the National Financial Ombud Scheme South Africa NPC (the NFO) on 0860 800 900.

Compliance Officer:

(Moonstone Compliance)

Address: 25 Quantum Street, Technopark, Stellenbosch

Telephone: +27 21 883 8000

Fax: +27 21 883 8005

E-mail: SGerald@moonstonecompliance.co.za

Website: <https://www.moonstone.co.za>

Details of compliance department

Clientèle Life has an active Compliance Department. The Head of Compliance and the Department can be contacted on 011 320 3000.

Details of claims procedure and department

Procedures for the submission of claims are detailed in your policy and are important. If you have any difficulty in determining the correct procedures, please contact the Claims Department on 0860 555 992.

Extent and nature of premium obligations

Your policy document reflects the premiums payable, the due date of payment and the frequency of payment (e.g. monthly or annually). If the premium is paid by debit order, it may only be in favour of the Insurer and may not be transferred without your approval.

Consequences of non-payment of premiums

The due date for the payment is reflected on your policy schedule. Your payment should be made on or before the due date reflected to avoid the lapsing of the policy.

Warning

Do not sign any blank or partially completed application form. Complete all forms in ink. Keep all documents you receive. Make notes of what is said to you. Do not be pressured into buying the product, make this decision on your own. Incorrect, or full non-disclosure of relevant information may impact any claims arising from your contract of Insurance.

Matters of importance

1. We must give you reasons in writing for the rejection of any claim submitted by you; 2. You are entitled to a copy of your policy free of charge.

Conflict of Interest

We have considered the conflict of interest provisions in terms of the FAIS Act 37 of 2002 and have not identified any actual or potential conflicts of interest, either ownership interest, financial interest, third party relationships, associates or distribution channels as defined. A conflict of interest management policy is available to clients upon request.

Waiver of Rights

The General Code of Conduct stipulates that no financial services provider may request or induce in any manner a client to waive any right or benefit conferred on the client by/or in terms of any provisions of the said Code, or recognise, accept or act on any such waiver by a client. Any such waiver is null and void.