



You always get
something out.

funeral plan
policy

Welcome to the OUTsurance Life family.

This document and your schedule is the contract between you and us. Please note that throughout this document “you” and “your” means the policyholder or the main life OUTsured, in the relevant context.

Your cover

Your OUTsurance Funeral Plan will pay out in the event of a valid death claim of one of the people covered under this policy (lives OUTsured). The lives OUTsured and the amount they are covered for (Sum OUTsured) are listed in your schedule.

The date that cover starts for each life OUTsured is also indicated on your schedule. Cover will only start once the first premium has been collected.

Who can be covered?

The main life OUTsured, as well as the following family members can be covered:

- a **spouse**, who must be a person who is married by law or customary law to the main life OUTsured;
- a **child**, who is the biological child, legally adopted child or stepchild of the main life OUTsured; and
- **parents**, who must be the biological parents, parents by adoption or the parents-in-law of the main life OUTsured.

All the people covered under this policy must be South African citizens and live in South Africa for at least 6 months in any 12 month period. The main life OUTsured has to have a valid South African ID number.

Additional Benefits

Your schedule will display what additional benefits you have selected.

Each of these benefits will be in addition to the Sum OUTsured paid out in the event of a valid claim for the main life OUTsured or spouse.

Stillborn benefit

We will pay out an amount of R5 000 in the event of a stillborn child after 26 weeks of pregnancy. The mother of the stillborn child has to be either the main life OUTsured or the spouse covered under the policy.

Premium waiver benefit

In the event that the main life OUTsured passes away and a valid claim is paid, cover for all other lives OUTsured on the policy will continue for another 3 months before the policy is cancelled. No premiums will have to be paid during this period.

Repatriation benefit

Your policy includes a repatriation benefit which provides for the transportation of the deceased to a funeral home chosen by the family, closest to the place of burial.

This benefit will be available if the place of death is in South Africa and where the chosen funeral home is more than 100km away from the place of death. Transport is provided to destinations within South Africa, and up to Lesotho, Swaziland, Zimbabwe, Namibia, Botswana or Mozambique.

Claims

All claims must be submitted to us within 3 months of the date of death. You will then have another 3 months to submit the documents requested by us, at your cost. If you do not supply this information, we cannot process and validate the claim.

For a valid claim, we will only pay out a proportion of the Sum OUTsured in the event that not all premiums were paid in the 12 months before the claim occurred (please see section below on Unpaid Premiums for more information on this).

Valid claims will be paid to:

- The main life OUTsured in the event of the death of a spouse, child or parent covered under the policy;
- The nominated beneficiary in the event of the death of the main life OUTsured; or

Should any person have multiple funeral benefits with OUTsurance, the maximum amount of funeral cover that will be paid within 48 hours will be limited to R100,000. The balance of the funeral cover will be paid after the claim has been validated.

Waiting Period

A waiting period of 6 months applies for death caused by health related or natural causes, provided you have paid 6 premiums. The waiting period will be extended until we receive six premiums. No waiting period shall apply in the event of death caused by an accident or unnatural causes.

If a spouse, child or parent is added to the policy, then a new waiting period will apply to that person.

If a Sum OUTsured is increased or additional benefits are added, a new waiting period will apply to the increase in the Sum OUTsured.

➔ *Example: If the Sum OUTsured is increased from R30,000 to R50,000 after you have paid premiums for 6 months (i.e. after the waiting period), then you will only qualify for the additional R20 000 i.e. the full R50,000, after another 6 premiums have been paid.*

Premiums

The premium is the monthly payment that must be paid for cover under the policy. The premium that is shown in your schedule is payable every month by debit order for the duration of the policy. It is your responsibility to ensure your payments are up to date.

We may review your premium by providing you with at least 31 days written notice. When making any changes to your premium we look at the experience of all clients with similar profiles, rather than individual circumstances.

Bonus month

For every 12 months of premiums you have paid, you will receive a bonus month of cover. During a Bonus month, you do not have to pay a premium but your cover will continue for the month. A maximum of 3 Bonus months can be accumulated at a time. You need to inform us whenever you would like to use one of your Bonus months.

The Bonus month will also be used automatically if you fail to pay your premium on the collection date and resubmission date.

Pause and Play

You can choose to pause your policy for up to 3 months. During this period you don't have to pay any premiums, but you will also not have any cover.

You can decide when you want to play your policy at any time during this paused period by notifying us. If you have not chosen to play your policy before the end of the 3 month period, we will play your policy automatically. Once your policy is played, we will attempt to collect premium from the next collection date. If we have collected premium, then your cover will start again without a new waiting period being applied.

You can use the Pause and Play benefit up to three times over the lifetime of your policy. You have to have paid at least one full premium since the last time your policy was paused before you can pause it again. This benefit is only available once the policy is out of any waiting period.

Unpaid Premiums

If your premium is not paid on the payment date, you have a 15 day grace period after which we automatically deduct the premium from the same account (resubmission) to ensure your cover continues. If this premium is also not paid and you do not have a Bonus month available, you will have no cover for the month for which you did not pay.

We will automatically pause your policy if your monthly premiums are not paid for two months in a row (on the payment date or the resubmission date).

For valid claims, we will pay out a proportion of the Sum OUTsured based on the number of successful premiums collected in the 12 months before the month of the claim incident. If it has been less than 12 months since cover has started, the ratio will be taken from the start of cover. We will not take the month in which the claim happens into account when determining this ratio.

- *Example 1: If there have been 6 attempts to collect premium since the start of cover and only 3 were successful, then only 50% of the Sum OUTsured will be paid in the event of a valid claim.*
- *Example 2: If a valid claim is submitted 25 months after cover starts and 9 out of 12 premiums were successfully collected from month 13 to month 24, then 75% of the Sum OUTsured will be paid.*

Policy Cancellations

You may cancel your policy at any time with immediate effect.

Your policy will automatically be cancelled under the following circumstances:

- If you are within the waiting period and your monthly premiums are not paid for two months in a row (on the payment date or the resubmission date).
- When you have enjoyed the Pause and Play benefit and the next month's premium is not paid (on the payment date or the resubmission date) after your policy has been played again.
- If you fail to pay your premium by cancelling or stopping your debit order.

Exclusions

We will not provide cover in the event of death arising directly or indirectly from any of the following:

- Intentional or self-inflicted injury or illness, including suicide within the first 2 years from the start of cover.
- Driving while the concentration of alcohol in your blood exceeds the legal limit.
- Intentional intake of drugs, narcotics or medication unless prescribed by a registered medical practitioner and used as prescribed
- If you refuse any treatment recommended by a registered medical practitioner.
- If you (or any person acting on your instruction) were involved in any criminal activity.
- Active participation in war, armed international conflict, rebellion, civil commotion, sabotage or any activity associated with the forgoing or the defence, investigation or containment thereof by any security force.
- Active participation in any act of terrorism by any person or group, whether acting alone or under instruction.
- Radioactivity and nuclear explosion.

Terms and Conditions

Claim payments

This policy is subject to the laws of South Africa and any claim payments will be made into South African bank accounts in Rand. No interest will accrue or be payable on any claims payments due.

True and complete information, material misrepresentation, or non-disclosure

In the event it is determined that incorrect, misleading, fraudulent or false information was provided when you applied for cover or submitted a claim and as a result thereof the claim is rejected and/or policy declared invalid, you will not be entitled to any refund in premiums already paid.

Leaving the country

You need to inform us if a person covered under the policy leaves the country for more than 3 months in a row. This may affect the terms and conditions of the contract, as well as whether or not cover can continue. If we are not informed, we have the right to reject any claim and/or terminate the policy, in which event premiums will not be refunded.

Changes in the Law

In the event of changes to or the introduction of new laws which affect your policy, we reserve the right to amend the terms and conditions thereof. These changes may include changes to the pricing of your policy. You will be provided with at least 31 days written notice of any amendment.

Sharing of information

We respect the confidentiality of your information. In terms of the laws applicable to all insurance companies, we require your consent to confirm and disclose information relating to claims, insurance and financial history with other insurers, government bodies and credit bureaus. This is applicable to anyone who is covered under this policy. This will enable us to ensure sound insurance practices, prevent fraud and to offer our product effectively. If you are not willing for this information to be confirmed or disclosed we will not be able to provide you with cover. By taking this policy you acknowledge that you have provided the required consent.

Disputed claims

If you dispute the outcome of a claim you have 90 days from the day you are first informed of the outcome to notify us about your objection. Immediately following this, you have a further six months within which to serve us with a summons. If you do not do so within this period, your right to challenge the decision is forfeited.

Fraud or dishonesty

We have a responsibility to all our policyholders to ensure that fraudulent claims are eliminated in order to keep premiums as competitive as possible. If your claim is rejected you will need to reimburse us for any expenses we incur relating to the claim. If you or anyone acting on your behalf submits a claim, or any information or documentation relating to any claim that is in any way fraudulent, dishonest or inflated, we will reject that entire claim and cancel your policy retrospectively to the reported incident date or the actual incident date, whichever date is earliest.