

uSecure



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# ALWAYS LOOKING OUT FOR YOU

**FAMILY FUNERAL PLAN | PREMIER**

**POLICY TERMS AND CONDITIONS**

**086000 8322 [ubank.co.za](http://ubank.co.za)**

ubank Ltd Reg No. 2000/013541/06. ubank is an authorised financial services (FSP No. 14740) and credit (NCRCP21) provider.

# IMPORTANT INFORMATION

Before you apply for this policy, it is important for you to understand how it works and be happy with what it offers. This booklet tells you clearly and simply how the policy works. This booklet, together with the membership certificate, contains the terms and conditions of your policy contract. If you want to know more, you can ask your ubank adviser.

The ubank Family Funeral Plan is a funeral insurance policy. It pays funeral benefits for participants who are covered on the membership certificate. The purpose of the ubank Family Funeral Plan is to provide money for funeral costs.

A Group Scheme is a scheme negotiated between ubank and Metropolitan Life Limited for the purpose of providing insurance products to ubank clients.

You need to read this booklet together with your membership certificate, which Metropolitan Life will send to you after your application for the ubank Family Funeral Plan has been approved. These two documents will then become your policy contract or agreement with Metropolitan Life.

You have 30 days to read through these documents from the day you receive the membership certificate to see if you are satisfied with the product you have bought. If you are not satisfied, you can send the membership certificate back to us and write "CANCEL", the date and your signature on it. Metropolitan Life will then cancel your policy, or the increased benefits under your policy, whichever is applicable. We will pay any premiums you paid towards the policy back to you if you haven't claimed anything in this time.

Metropolitan Life should be notified immediately of any of the following changes:

- Address.
- Bank details.
- Marital status.
- Children born after inception date.
- Children over 21 years of age.

# PARTICULARS OF THE POLICY YOU HAVE APPLIED FOR

You are the member and the policy owner. The following information was supplied by you and provides you with a summary of the cover levels for the person(s) you selected to be covered. They are all called the participants.

## YOUR PERSONAL DETAILS

Name and surname of member:	
Name and surname of life partner:	
Date of birth:	
Identity number:	
Name of beneficiary:	

## THE PLAN DETAILS

You have chosen cover under the following plans:

### Immediate family members to be covered

Plans	Participants	Cover level	Initial monthly premium
Plan A	Family		
Plan B	Member and child		
Plan C	Member and life partner		
Plan D	Member only		

### Initials and surname of children to be covered (where applicable)

Child 1	
Child 2	
Child 3	
Child 4	
Child 5	
Child 6	
Child 7	
Child 8	
Child 9	

**Parents to be covered (where applicable) – Plan E**

Participants	Initials and surname	Cover level	Initial monthly premium
Father			
Mother			
Father-in-law			
Mother-in-law			

**Extended family members to be covered (where applicable) – Plan F**

Relationship to member	Initials and surname	Cover level	Initial monthly premium
TOTAL MONTHLY PREMIUM PAYABLE			

**Funeral Services Benefits – Plan G**

Relationship to member	Initials and surname	Cover level	Initial monthly premium
Member only			
TOTAL MONTHLY PREMIUM PAYABLE			

This information will be shown on your membership certificate in more detail.

**BENEFIT AND PREMIUM REVIEW**

- Premiums and benefits are not guaranteed, and premiums will increase (or decrease) depending on the claims experience, ages, etc. of the scheme as a whole.
- Metropolitan Life will, from time to time, review the premiums in relation to the benefits, and will advise the member of any changes that may be necessary by giving the member written notice. The member will have the choice to either increase premiums or decrease benefits.
- Should any event occur that severely compromises the solvency of the scheme, as certified by the statutory actuary, Metropolitan Life shall have the right to increase the premiums or reduce the benefits across all lines of affected policies.
- Metropolitan Life will inform the member of any re-rates by written notification.

**REMUNERATION OF INTERMEDIARY**

- ubank receives commission for the advice and service provided to the member during the term of the policy.
- The commission is used to meet expenses and provide the adviser with an income.
- Commission is also payable on future premium increases.
- Metropolitan Life will provide commission on each monthly premium which will be paid to ubank.
- Commission payable to ubank earned on monthly premiums or premium increases are as follows:

The maximum commission payable to the intermediary in the first year of my policy or in the first year after an increase in premium is calculated as follows: 3.25% of the yearly premium multiplied by the outstanding policy term, multiplied by 95%. For outstanding policy terms greater than 26 years the commission is calculated as follows: 85% of the yearly premium multiplied by 95%.

The maximum commission payable to the intermediary in the second year of my policy or in the second year after an increase in premium is one third of the commission payable in the first year. If I want to know the actual commission paid, I will contact the intermediary.

Name of adviser	Adviser commission code	Line manager code	ubank branch

# POLICY TERMS AND CONDITIONS

## What benefits can I get under this policy?

### FUNERAL BENEFITS

On your death, or the death of a participant you selected cover for, Metropolitan Life will pay the amount of cover indicated on your membership certificate, if all conditions in this booklet have been met.

## Who can I cover under this policy?

You can choose to cover either:

- The member only.
- The member and life partner.
- The member, your life partner and children.
- The member and children.

You can also change the cover level to a higher level, add another person to the policy or remove a person from the policy at any time as long as Metropolitan Life agrees to the change.

Additionally you can add cover for your parents and/or extended family members to any of the above choices or you can take cover for them on a standalone basis. This means that you can cover parents and/or extended family members without having to take cover for yourself first.

## Funeral Plan for the member only

If you select this plan, you the member, will be covered and the following cover levels are available:

Member's cover levels						
3 000	5 000	7 500	10 000	15 000	20 000	30 000

## Funeral Plan for the member and life partner

If you select this plan, you the member, as well as your life partner will be covered and the following cover levels are available:

Member and life partner's cover levels						
3 000	5 000	7 500	10 000	15 000	20 000	30 000

## Funeral Plan for the member, life partner and children

If you take cover for yourself, life partner and children, you can select from a cover level available in the table below:

Member and life partner's cover levels	Children's cover levels		
	14 years and older but younger than 21 years (26 if full-time student)	Six years and older but younger than 14 years	Younger than six years (including stillborn babies)
3 000	3 000	1 500	750
5 000	5 000	2 500	1 250
7 500	5 000	3 750	1 875
10 000	5 000	5 000	2 500
15 000	7 500	7 500	3 750
20 000	10 000	10 000	5 000
30 000	15 000	15 000	7 500

- This plan covers you the member and your life partner (your legal husband or wife, or a person living with you who is normally regarded by the community as your husband or wife).
- This plan covers one life partner at a time.
- This plan also covers your own or legally adopted children who are younger than 21 years old.
- A child older than 21 years will only be covered if he/she is a full-time student under the age of 26 years.
- Physically and mentally disabled children will also be covered and no age limit will apply.
- A child who is stillborn will also be covered provided that the foetus is older than 26 weeks from conception.
- Only children that are indicated on the membership certificate and for whom you pay a premium will be covered. Future children can be covered provided that these children's details are submitted to Metropolitan Life.
- If your child under age 14 is covered, the cover level will be increased as the child gets older as per the table shown above.

## Funeral Plan for the member and children

If you take cover for yourself and your children, you can select from a cover level available in the table below:

Member's cover levels	Children's cover levels		
	14 years and older but younger than 21 years (26 if full-time student)	Six years and older but younger than 14 years	Younger than six years (including stillborn babies)
3 000	3 000	1 500	750
5 000	5 000	2 500	1 250
7 500	5 000	3 750	1 875
10 000	5 000	5 000	2 500
15 000	7 500	7 500	3 750
20 000	10 000	10 000	5 000
30 000	15 000	15 000	7 500

This plan covers you the member.

- This plan also covers your own or legally adopted children who are younger than 21 years old.
- A child older than 21 years will only be covered if he/she is a full-time student under the age of 26 years.
- Physically and mentally disabled children will also be covered and no age limit will apply.
- A child who is stillborn will also be covered provided that the foetus is older than 26 weeks from conception.
- Only children that are indicated on the membership certificate and for whom you pay a premium will be covered. Future children can be covered provided that these children's details are submitted to Metropolitan Life.
- If your child under age 14 is covered, the cover level will be increased as the child gets older as per the table shown above.



## Funeral Plan for parents

The funeral plan for parents covers your own parents (legally recognised parent or legal guardian) as well as your parents-in-law. The following table indicates the cover level options available:

Parents' cover levels							
3 000	5 000	7 000	10 000	12 500	15 000	20 000	30 000

Parents can only be covered if they are younger than 85 years at entry or increase in cover level.

## Funeral Plan for extended family members (relatives)

A total of nine (9) extended family members can be covered under the funeral plan for extended family members. An extended family member can be an additional life partner, the member's or life partner's grandparent, grandchild, uncle, aunt, brother, sister, brother-in-law, sister-in-law, cousin, niece or nephew. The member can also include a parent who is regarded as a parent although this parent is not a legally recognised parent or legal guardian. A child who reached the age of 21, who is not a full-time student and is independent, can also be covered under extended family members. The following table indicates the cover level options available:

Cover levels	Age next birthday of extended family		
	14 Years and older	Six years and older but younger than 14 years	Younger than six years
3 000	3 000	1 500	750
5 000	5 000	2 500	1 250
7 500	7 500	3 750	1 875
10 000	10 000	5 000	2 500
12 500	12 500	6 250	3 125
15 000	15 000	7 500	3 750
20 000	20 000	10 000	5 000
30 000	30 000	15 000	7 500

Extended family members can only be covered if they are younger than 85 years at entry or increase in cover level.

## ACCIDENT BENEFIT

Should the member, life partner and/or children, who are over the age of 14 but younger than the chosen retirement age (60 or 65), die as a result of an accident, the accident benefit will be equal to the funeral benefit amount set out in the membership certificate. The accident benefit is in addition to the funeral benefit already provided.

The accident benefit is not available for a parent or extended family member, and is not available on the Funeral Services Benefit.

## CONTINUATION BENEFIT

If a member resigns, terminates or becomes a client of another bank, the member will have the option to continue with his/her cover and benefits under the policy, as long as he/she notifies Metropolitan Life within three months thereof. Metropolitan Life needs to approve this application.

## FUNERAL SERVICES BENEFIT

On the death of the member, Metropolitan Life will pay the amount of cover indicated on the membership certificate for this benefit, when it has been chosen and all policy terms and conditions have been met. The cover level of the Funeral Services Benefit may not exceed the cover level chosen for the member under the funeral benefit. Members can choose any one of the following cover levels:

Cover levels				
5 000	10 000	15 000	20 000	30 000

## PAID-UP BENEFITS

When a policy becomes paid-up it means that no further premiums will be payable and that cover will continue for participants under the paid-up policy. Paid-up benefits provide cover under any of the following events:

**Death of the member:** On the death of the member, the remaining participants become eligible for a paid-up policy, providing continuation of cover.

**Disability of the member:** When a member becomes totally and permanently disabled and unable to continue working as an employee for a salary he/she becomes eligible for a paid-up policy providing continuation of cover for the member and the remaining participants.

A member should have paid at least one year's continuous premiums and should be younger than the scheme's retirement age to be eligible for a paid-up policy. This is also applicable to increases in cover.

**Retirement of the member:** At retirement age of (as indicated on your membership certificate), the member becomes eligible for a paid-up policy providing continuation of cover for the member and the remaining participants.

A member should have paid continuous premiums for at least five years to become eligible for a paid-up policy. If a member made continuous premium payments for more than five years, his/her paid-up benefits will be calculated according to the following table:

Premium payment period	Paid-up benefits
Less than five years	Nil
Five years	50% x cover level
Six years	60% x cover level
Seven years	70% x cover level
Eight years	80% x cover level
Nine years	90% x cover level
10 years or more	100% x cover level

If a member made continuous premium payments for more than 10 years, he/she will receive a fully paid-up benefit equal to the full cover under each plan.

Any member, who retires and is not eligible for a paid-up policy, may buy a paid-up policy by paying a premium determined by Metropolitan Life. Unfortunately you will not be able to buy a paid-up policy for your parents or extended family members.

Please ensure that you request a paid-up policy at disability or retirement by contacting our Customer Services Offices or you can call us on 0860 724 724.

## FAMILY ASSISTANCE BENEFITS

In terms of this product you qualify for certain Family Assistance Benefits that are provided by Europ Assistance Financial Services (Pty) Ltd. These benefits currently are:

- Funeral Assistance Benefit
- Legal Assistance
- Repatriation of Mortal Remains
- Emergency Medical Services
- EA Touch: Trauma, Assault and HIV protection cover

### What is Funeral Assistance Benefit?

The bereaved family and next-of-kin will receive assistance with the funeral and cremation arrangements. This includes the following:

- Referrals and arranging for bereavement counselling.
- Establishing the whereabouts of the deceased, if unknown.
- Arranging and facilitating overnight accommodation (to the maximum of R500 per family per event) for an accompanying next-of-kin in order to identify the body.
- Transportation of the deceased to and from the mortuary.
- Advising and referring the bereaved family to a reputable undertaker.
- Assistance with procedures prior to, during and after the funeral.
- Assistance with choice of coffin and delivery thereof to the undertakers.
- Booking of the grave or crematorium with the relevant authorities.
- Arranging of hearse, flowers, catering, marquee and other equipment as needed.
- Advising on how to apply for a death certificate, and where applicable, the necessary documentation if the deceased is to be buried outside the borders of South Africa.
- 15% discount for funeral services at Doves Funeral Services.
- Assistance with interpretation of any legal documentation such as the funeral policy and the procedure to be followed:
  - Referral to a pathologist where an unnatural death has occurred;
  - Telephonic counselling and referrals for face-to-face counselling sessions.

### What kind of Legal Assistance will I receive?

A telephonic advice line manned by qualified and experienced in-house attorneys who will provide guidance and information on legal matters, 24 hours a day.

The advice will take the form of:

- A free 30-minute consultation with an attorney, who's firm is a member of Europ Assistance Financial Services' national panel of attorneys, anywhere in South Africa where such attorneys practice. This is in addition to any advice received through the helpline.
- This benefit also provides for assistance with the following:
  - Understanding the terms and conditions of policies, i.e. funeral policies and short-term insurance policies.
  - Telephone assistance with the interpretation of legal documents.
  - Employment contracts and general working conditions.
  - Credit rehabilitation.
  - Domestic workers' agreements and conditions of UIF.
  - Instituting a claim against the Road Accident Fund.
  - Drawing up and lodging of a will.
  - Unlimited telephonic advice on all death related legal issues.



### **What is Repatriation of Mortal Remains?**

Assist the bereaved family and next-of-kin with the repatriation of the insured life's mortal remains, to a funeral home closest to their normal place of residence. This also includes the transfer of the ashes to their place of normal residence after the cremation. This service is also extended to insured lives resident outside the borders of RSA, but limited to residents in SADC countries. Consideration is given to religious customs for correct removal of the body.

You can receive assistance with the following:

- Obtaining the death certificate.
- Documentation to move the deceased across the border.
- Referrals for autopsy/pathology.

### **What is included under Emergency Medical Services?**

In any medical emergency, it is important for injured people to reach the most suitable care facility in the shortest possible time. The care received in the period immediately after the incident together with proper care in hospital may determine the patient's survival and recovery. Lack of proper treatment may worsen injuries and cause permanent damage and/or disability.

This benefit provides 24-hour emergency medical assistance, which includes the following benefits:

- Medical information over the telephone.
- Appropriate emergency transportation and evacuation.
- Referrals to doctors and other facilities.
- A maximum of R2 000 for the admission to hospital – refundable by the member or the member's medical aid.
- Arrangements for the escorted return of minors after an accident.
- Repatriation of mortal remains after a fatal accident to an appropriate facility at the deceased's normal place of residence.

### **What is EA Touch: Trauma, Assault and HIV protection cover?**

This is a 24-hour emergency assistance helpline, which will arrange for the necessary help an insured life may require in a situation where (violent and non-violent), Trauma and/or Assault and/or HIV infection as a result of an assault occurs, within the borders of South Africa. These benefits include:

- Medical treatment for bodily injury (to the value of R5000 per insured person with a maximum of R10 000 per family, per occurrence).
- In the case of Trauma, the insured life will be able to receive psychological counselling from a public trauma centre or a private institution (limited to R5 000 per insured person with a maximum of R10 000 per family per occurrence).
- The HIV protection service provides insured lives with peace of mind because in the event of violent forms of assault such as rape or accidental exposure to the virus, the insured life has access to the following:
  - Hospital care (subject to limits)
  - Treatment to manage the consequences (E.g. Antiretroviral Medication)
  - Psychological counselling

Metropolitan Life will not be liable for any damages arising out of the provision or non-provision of such services.

Metropolitan Life may remove or alter the Family/Assistance Benefits by providing you with written notification. These benefits are also only provided as long as your policy remains in force and will only be provided if the premiums have been paid during a particular month.

Family Assistance Benefits cease when premium deductions cease, or you become eligible for a paid-up policy, or when you reach your retirement age 60 or 65 as chosen by you.

If you or the participants have multiple policies each having Family Assistance Benefits, you will only be able to claim once per event.

### **When does my policy start?**

Your policy starts on the first day of the month in which you start paying your first premium. This is called your policy's entry date and is shown on your membership certificate.

### **When do I have to pay my premium?**

Your premium must be paid every month from the entry date. We give you 30 days to pay each premium. You must pay your premium until you die or until you cancel your policy. You have to pay your premium in South African rand.

### **When will my cover start?**

**Members, life partners and children:** Cover, or increased cover for member, life partner or children will commence once a waiting period of three calendar months have expired, and three months' premiums have been received, commencing on the first day of the month in which the first monthly premium in respect of the policy has been deducted.

Notwithstanding anything to the contrary contained herein, should death occur as a direct result of an accident, no waiting period will apply and claims will be considered.

**Parents and parents-in-law:** Cover, or increased cover, for parent/s and/or parent/s-in-law will commence once a waiting period of three calendar months have expired, and three months' premiums have been received, commencing on the first day of the month in which the first monthly premium in respect of the policy has been deducted.

Notwithstanding anything to the contrary contained herein, should death occur as a direct result of an accident, no waiting period will apply and claims will be considered.

**Extended family members:** Cover, or increased cover, for extended family members will commence once a waiting period of six calendar months have expired and six months' premiums have been received, commencing on the first day of the month in which the first monthly premium in respect of the policy has been deducted. Notwithstanding anything to the contrary contained herein, should death occur as a direct result of an accident, no waiting period will apply and claims will be considered.

### **What happens if I miss one premium and I need to claim?**

If you have missed only the last premium, you will still be covered and we will consider your claim. Unfortunately we will have to deduct the premiums that you missed from the claim amount.

### **What happens if I miss more than one premium in a row?**

You can miss one premium for every 12 months since the entry date. While you have the policy, you may not miss more than six premiums in total. However, should you have missed more than six premiums and you did not pay the last premium, your cover will stop and we will not consider your claim. Unfortunately we will have to deduct the premiums that you missed from the claim amount.

### **What if I didn't miss the premiums I was allowed to miss?**

You can carry forward the missed premiums you didn't use. For example, if you have had your cover for four years and you have not missed any premiums from the entry date, you can miss up to four premiums, and still be covered. We will, however, deduct the missed premiums from any claim amount.

### **What happens if I pay my premiums by bank debit order and I don't have enough money in my account?**

We will try and deduct two premiums in the next month. You will have to pay any bank charges if we can't deduct the premium and the bank debit order is rejected.

### **If my cover stops when I have missed more premiums than I was allowed to, will I be able to start again?**

Yes, you can start to pay your premiums again as long as three months have not passed since you were last covered.

This is known as a reinstatement.

### **If my cover stops when I have missed more premiums than I was allowed to, and I reinstate (start again), will I have to wait again before I can claim?**

When the member's cover stops because he/she missed more premiums than he/she was allowed to, and the policy is reinstated (starts again), a waiting period of three months will apply for the member, the life partner and the children. Waiting periods for parent cover of three months and extended family cover of six months will apply.

### **Will Metropolitan Life ever deduct any premiums from my claim amount?**

Yes, unfortunately we will deduct all the missed premiums from your claim amount. Please note that any premiums that you missed before your cover stopped will be carried forward if you reinstate (start again) and will be deducted from your claim amount.

### **Will my premium ever be increased?**

Premiums can be increased if more people with this type of funeral policy die than expected. If we increase the premium, we will give you three months written notice before the premium is increased. This process is known as a re-rate.

If you are not satisfied with the increased premium, you can ask us to tell you about the other options you have, such as reducing your benefits. Your premium will also increase if you ask for an increase in the cover levels or if you add more participants.

### **Will my cover level ever be decreased?**

Cover level can be decreased if more people with this type of funeral policy die than expected. If we decrease the cover

level, we will give you three months written notice before the cover level is decreased. This process is known as a re-rate.

If you are not satisfied with the decrease in cover level, you can ask us to tell you about the other options you have, such as increasing your premiums.

Your cover level and premium will also increase if you ask for an increase in the cover levels or if you add more participants.

### **Will you ever decide not to pay my claim, even if I have paid all my premiums?**

Yes, Metropolitan Life will not be liable under this policy and no benefits shall be provided if a participant commits suicide, attempted suicide or wilfully self-inflicts an injury within the first two years of the policy or cover level increase, whether the participant is of sound or unsound mind.

If a participant dies as a direct result of using excessive alcohol, drugs, narcotics, harmful substances, or any medicine other than prescribed by a doctor, the funeral benefits will **not** be paid. If a participant dies as a result of any violation of the law, war or civil uprising, the funeral benefits will not be paid.

If you have increased your cover within the previous two years, we will still consider a claim on the original cover amount.

If you gave any information that is not correct, you should correct it immediately. If you misled Metropolitan Life by the information you gave, for example you said that you are not sick on your application and you were sick, we will unfortunately not honour the claim. The policy will be cancelled with no benefits and no refund of any premiums.

Please always supply us with the correct information. If you commit fraud, or try to commit fraud when you claim your benefits, we will not pay your claim and we will not refund your premiums.

### **When will my cover stop?**

Your cover will stop when any one of the following happens:

- When you missed more premiums than you are allowed to miss and you have not paid the previous premium.
- When you write a letter to us and tell us that you want to cancel your policy.
- When all participants have died.

### **How do I make a claim?**

A claim in respect of a deceased participant must be submitted to any ubank, or written notice given thereof within six months of the date of death of such a participant. Metropolitan Life may in its sole discretion accept late claims and reserves the right to request any evidence as is deemed necessary in this regard. Please remember that we will pay all claims in South African rands.

### **To whom will the claim be paid?**

This amount will be paid as follows:

- At your death, to the person(s) you have nominated as the beneficiary(ies).

- If you have not nominated a beneficiary(ies) or if the beneficiary(ies) dies before you, your current life partner, not necessarily the life partner nominated, will receive the amount of cover on your policy. If your current life partner is not alive, we will pay the money into your estate.
- If you, the policy owner, are still alive and any other participant who is covered dies, the benefit will be paid to you.

### **What is a beneficiary and how do I nominate (choose) a beneficiary?**

A beneficiary is a person who will receive your funeral cover on your policy when you die, and is a person that you, as a policy owner, have nominated. When you apply for the policy, you must nominate the beneficiary(ies) by telling us in writing whom you would want Metropolitan Life to pay the cover to when you die.

You can change the beneficiary(ies) at any time during your policy.

### **What do you need from me when I want to claim?**

The following documents (original or certified copies thereof) will be required when a claim is made:

#### **All claims**

- Declaration by next of kin obtainable from ubank.
- Claim form obtainable from ubank.
- Original or certified copy of identity document of the person who died.
- Original or certified copy of identity document of the person who is claiming.
- Membership certificate, if available.
- Latest salary statement (if you pay your premiums by stop order), or bank statement (if you pay your premiums by bank debit order). This will only be required if premiums cannot be traced.
- The death certificate of the deceased (BI 5 or BI 20). In the case of stillborn babies: BI 14 and BI 12; or BI 24 and BI 6. Only "Proof of Death" stamped with the official Home Affairs stamp with the number in black will be accepted. Affidavits are not acceptable.
- Certified copy of BI 1663/DHA 1663 – notification of death.

#### **Claims for life partners**

Original or certified copy of the marriage certificate as proof of relationship, or if this is not available:

- Two sworn statements:
  - One from a minister of religion; and
  - One from a third party who will not benefit from the claim confirming that the policy owner's life partner was regarded by the community as his/her life partner.

#### **Claims for children**

- All children – a birth document/clinic card/baptismal document.
- If the child is over the age of 21 and a full-time student, documentary proof from the educational institution concerned.
- For physically or mentally disabled children, a letter of confirmation from a medical practitioner confirming the infirmities of the child.
- For stillborns, a report from the attending medical officer indicating the stage of foetal development.

- For legally adopted children, a copy of the birth certificate and affidavit and/or any official documentary proof, issued by the Department of Child Welfare or any other government department whose functionality it is to deal with the administration of adoptions.
- If the child's surname is different to that of the policy owner, official documentary proof from Department of Home Affairs, or a sworn affidavit explaining the difference must be submitted.

#### **Claims for parents**

- Should the surnames of the parents differ from the policy owner, original or certified copy of the marriage certificate of parents, or a declaration from a minister and another party explaining the difference in surnames is required and should be added to the claim form.

#### **Accident claims**

- Medical reports completed by the doctor treating the member. Costs in respect of such a report will be borne by the claimant.
- A letter from the employer confirming the date of accident.
- An inquest and/or police report if death was the direct result of an accident.

#### **Disability claims**

- Medical reports completed by the doctor treating the member. Costs in respect of such a report will be borne by the claimant.
- A letter from the employer confirming the date of disability.

#### **Paid-up policies**

- In all cases, identity documents must be supplied for all surviving participants to be covered under a paid-up policy. A list containing the names of all participants will be requested.

#### **Retirement claims**

- At retirement you will receive a letter from Metropolitan Life to inform you to claim for a retirement paid-up benefit.
- You need to comply with the requirement under "All claims" (where applicable).
- Additionally you will be required to complete a "List of dependants" form.

#### **Claims on Family Assistance Benefits**

- To claim any benefit under Family Assistance Benefits, please phone 0861 666 111 24 hours a day, 365 days a year.

#### **General**

Metropolitan Life has the right to ask for:

- Proof of relationship/dependency, marriages, documents or similar proof for life partners.
- Any additional documentation required by Metropolitan Life to consider the claim.

### Can I borrow any money on my policy?

No, you cannot borrow any money on a funeral policy.

### Can I cancel my policy and get money back?

If you did not cancel your policy within 30 days from the date you received your membership certificate, you will not get back any money that you paid in if you cancel your policy or cancel improved benefits under your policy. Please note that if you claimed in the first 30 days and you cancel the policy, you will not get back all the money that you paid in.

### What happens if I die in another country?

If any of the participants under the policy have not stayed in South Africa or Lesotho for more than 12 months following each other before he/she died, we will not pay a claim if that person dies.

### Why is it important to keep on paying my premiums?

It is important to make sure that you pay your premiums each month. If you do not pay your premiums regularly or check that your payments are made, it is possible that your cover can stop and that you will not be able to claim any money in the event of a death from the policy.

### Can I cancel another policy to take out this one?

If you were told to cancel or change a policy that you had before, so you can take out this policy, you must be told why this can be bad for you. This can result in:

- Paying charges twice.
- Higher premiums because of your age and the age of the other participants under the policy.
- Not being able to insure yourself and the other people insured.
- Not being able to claim benefits during the waiting period.
- Early cancellation charges on the old policy.

Ask your adviser or previous insurance company if you want to know more.

### General

If any part of this booklet does not agree with the membership certificate, the membership certificate will be seen as correct.

You can change the cover level to a higher level, add another person to the policy or remove a person from the policy at any time as long as Metropolitan Life agrees to the change.

### Surrender

The policy may not be surrendered and no surrender values will be available.

### Cession

The policy may not be ceded.

## ENQUIRIES OR MORE INFORMATION

### For claim forms or additional information:

Visit your nearest ubank branch.

ubank Call Centre: 086000 8322

Fax: 086 641 5993 or 086 518 2480.

Postal: ubank Customer Care, Private Bag 101, Sunninghill, 2157.

### Metropolitan Life Limited

Registration number: 1949/032491/06

Metropolitan Life is committed to service excellence and fully subscribes to the terms and conditions of the Policyholder Protection Rules.

### Should you have any queries or complaints please contact:

#### Metropolitan Life Call Centre

PO Box 2212, Bellville, 7535

Tel: 0860 724 724

Fax: 021 940 6142

Email: [info@metropolitan.co.za](mailto:info@metropolitan.co.za)

#### Claims

To claim any of the benefits under this policy, please contact your nearest ubank branch. To claim any benefit under Family Assistance Benefits, please phone 0861 666 111, 24 hours a day, 365 days a year

#### Queries and complaints

If you received inadequate information or unsatisfactory service, you should complain in writing to Metropolitan Life's Complaints/Compliance office.

#### Complaints Resolution Office/Compliance Office

PO Box 2212, Bellville, 7535

Tel: 021 940 4682

Fax: 021 940 4934

Email: [complaints@metropolitan.co.za](mailto:complaints@metropolitan.co.za)

As a last resort, if any problem is not resolved to your satisfaction, you may then approach the following independent offices.

#### Particulars of Long-term Insurance Ombudsman

Private Bag X45, Claremont, 7735

Tel: 021 657 5000

Fax: 021 674 0951

Share Call: 0860 103 236

Email: [info@ombud.co.za](mailto:info@ombud.co.za)

#### Particulars of FAIS Ombudsman

PO Box 74571, Lynwood Ridge, 0040

Tel: 012 470 9080

Fax: 012 348 3447

Toll free: 0860 324 766 (0860 FAISOM)

Email: [info@faisombud.co.za](mailto:info@faisombud.co.za)

#### Particulars of Registrar of Long-term Insurance

Financial Services Board

PO Box 35655, Menlo Park, 0102

Tel: 012 428 8000

Fax: 012 347 0221

Toll free: 0800 110 443

