

Policy Terms and Conditions:

- The '**Cover Start date**' will be the first of the calendar month following first successful premium receipt.
- Premiums must be **paid on or before the 25th** of each month in advance for the following month by the 'Premium-payer' to Tyvision
- Claims will not be paid on policies that are in **arrears with premium payments**
- A **waiting period of 6 (six) months** will apply to this policy
- Suicide will not be covered during the **first 12 months** from the Cover Start Date
- No Waiting Periods shall be applicable in the event of an **Accidental Death** of a Policy Member
- Should a Policy Member produce evidence of similar- or higher cover for an uninterrupted period at least exceeding the waiting periods detailed above, the waiting periods will be **waived in respect of such a Policy Member**, subject at all times to the waiting period applicable to the Main Member
- In the **event of a claim** the Intermediary should be contacted on admin@tyvisiongroup.co.za | (Tel) 0870 560 104
- Should the Main member pass away with **valid cover**, the cover amount will be paid to the **nominated beneficiary**, who has to be **18 years or older** and have a **valid South African bank account**
- If any **fraudulent means** are used by the Policyholder or any one acting on their behalf to claim under this Policy, all benefits shall be forfeited
- The Policyholder may cancel the policy within **31 days** from this application, provided that no benefit has been claimed or an event insured against has not yet occurred. All premiums paid to date will be refunded subject to cost of any risk cover enjoyed

Policyholder Declaration:

I hereby apply for the benefits contained in this member application form and I declare that I have not withheld any material information. I accept that this member application and declaration shall be the basis of the agreement between Tyvision Consulting and myself. I understand that any inaccurate, false or untrue statement may render my policy null and void and all premiums paid will be forfeited. I understand that the policy will only come into effect after Tyvision Consulting have verified the information contained herein and have received my 1st premium. I understand that claims will not be paid to the beneficiary if my premiums are in arrears for more than 1 month. I understand that the premium comprises various costs and fees including: risk cover; administration; advertising and intermediary fees. I have been informed of my rights of the policy protection rules and I declare that I understand and accept the terms and conditions applicable to this policy. I further declare that:

- The information supplied on this member application form is **true, complete, accurate and correct**
- I understand that the Cover for this Policy will only be in place following: **information verification; premium payment and confirmation of cover**
- I consent to the processing of my **personal information**, including the sharing of information for purposes of implementing this policy
- The **benefits, terms and conditions** of this policy have been explained to me and that **I understand and accept them**
- The **monthly premium** is affordable and that I can afford to pay for this policy
- The different costs contained in the premium have been explained to me and that **I understand the composition** of the premium
- I understand and accept the terms and conditions of any **add-on product** that I have selected
- I will receive a **participation certificate**, containing a summary of my policy terms and conditions.
- I understand and accept the contents of this declaration with **my signature below**:

Signature of 'Policyholder':

Date signed:

Time:

Any complaints must first be lodged with the Intermediary. Should the resolution not be satisfactory, the Insurer can be contacted on '0870 560 104' or via e-mail complaints@tyvisiongroup.co.za. Any complaints must be made in writing.

Should there be concerns about the information received, the Insurer's Compliance Department can be contacted on 086 11 22 222 or insurancecompliance@stangen.co.za. If resolution is still unsatisfactory, complaints may be lodged with the Regulators at the below addresses:

FAIS OMBUDSMAN

| **FSCA**

| **LONG-TERM INSURANCE OMBUD**

| **OUR HEAD OFFICE (JHB)**

(Tel) 012 762 5000 & 012 470 9080

| (Tel) 0800 203 722 / 012 428 8000

| (Tel) 021 657 5000

| (Tel) 0870 560 104

(Email) info@faisombud.co.za

| (Email) info@fsc.co.za

| (Web) www.ombud.co.za

| Office No. 10, 108 Jeppe Str

(Web) www.faisombud.co.za
2001

| (Web) www.fsc.co.za

| Newtown, Johannesburg,