

ALL YOUR PRODUCT BENEFITS UNPACKED.

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Unlimit Your Life.

THE UNLIMITED

FSP 21473



underwritten by Santam Structured Life Limited
a registered life insurer and authorised financial services provider (1026)

The insurance benefit is underwritten by Santam
Structured Life Limited (Reg. No.: 2002/013263/06)

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INSURANCE POLICY WORDING

For the meaning of some of the words used in this policy, look at **Point 11** of this policy.

ACCIDENTAL INJURY CASH BENEFIT

1. DETAILS OF THE INSURER

Although Your policy is administered by The Unlimited (FSP Number 21473), Your Long-term Insurer is Santam Structured Life Limited, a registered life insurer and an authorised financial services provider (FSP Number 1026).

PLEASE NOTE THAT THIS IS NOT A MEDICAL SCHEME AND THE COVER IS NOT THE SAME AS THAT OF A MEDICAL SCHEME. THIS POLICY IS NOT A SUBSTITUTE FOR MEDICAL SCHEME MEMBERSHIP.

2. HOW WILL WE COMMUNICATE WITH YOU?

An SMS to the cellphone number you provided us with will be the agreed method of giving you any notice required by this policy or by law and our main method of communication will be by SMS to that number. Alternatively, we will send you an email, letter or we will give you a call if that is your preferred method of how we communicate with you. Let us know.

3. POLICYHOLDER CONTACT INFORMATION

It is important that we have your current contact number (cell phone number), email address, physical and/or postal address on record. If any of your contact details change, you must let us know as soon as possible because we will always communicate with you using your last known details.

4. WE WOULD LOVE TO HEAR FROM YOU



You can contact us on our Website www.theunlimited.co.za;



You can also contact us on Facebook (look for The Unlimited);



Twitter (our handle is @theunlimited); or



find us on LinkedIn as theunlimited.

5. FOR COMPLAINTS AND COMPLIANCE

It is important to us that you are happy with your policy. If you are unhappy for any reason, please call us on **0861 990 000** and give us a chance to see if we can set things right.

If you are still not happy, then refer to Point 5 (How to submit a complaint) of the FAIS DISCLOSURE NOTICE.

Please contact us for any amendments or further assistance.

6. MONTHLY PREMIUMS PAYABLE

Your premium for the cover of the main member is **R00.41 pm**. This will be paid on your behalf to the Insurer for a period of 12 months.

The 12 months is calculated from date of your acceptance of this benefit and for 12 months consecutive months.

7. WHEN DOES YOUR COVER START?

Your insurance benefits are available from the time we send you an SMS (the “**Start Date**”) and for a period of 12 consecutive months thereafter. As an example, if we send an SMS on the 5th June 2019, you will have cover from the 5th June 2019, up to 4th June 2020.

If You are unsure when Your cover starts, please contact us at any time to confirm the Start Date of Your insurance benefits.

8. YOUR POLICY BENEFITS

- 8.1. We agree to pay your claim/s subject to the terms, conditions, exclusions and cover limits; in consideration of, and conditional upon:
- i. the prior payment of the premium on your behalf and receipt of the premium thereof by us or on our behalf;
 - ii. any proposal/application or other information supplied by, or on behalf of you, including any recorded phone calls made to or received by you e.g. sales calls, will be the basis of this agreement of insurance and **must be true and complete or benefits may not be paid** (see 10.1.5 below);
 - iii. where the insurance is varied or extended, the insurance provided by such Additional Benefit, Special Clause, Variation and Extension or endorsement is subject to the terms, conditions, exclusions and limitations of this Policy;
 - iv. compliance by you with all the terms, conditions, limitations and exclusions contained in this policy, which is a condition precedent to our liability under the policy. Any breach entitles the Insurer to cancel the policy or reject any claim/s made; and
 - v. we will only provide cover for people whose names and birth dates you have given us. They must be South African citizens or have residential rights in South Africa.

ACCIDENTAL INJURY CASH BENEFITS		
Who is covered?	What is covered?	Benefit limits
You, the main member for whom the applicable premium has been paid (insured person/s).	We will pay you the daily amount stated under the Benefit Limits following your admission to hospital for a full day (that is 24 hours in a row) as a direct result of an injury caused by an accident (accidental injury) sustained in a motor vehicle collision where you were the passenger or the driver and where on your way to or from work.	Your maximum benefit limit is R100,000.00 per insured event . You will be covered for R1,000.00 per day for up to 100 days , for each full day spent in hospital as a direct result of an accidental injury. <u>No</u> Waiting periods apply (see 9.3 below).

8.2. Maximum payment (Accidental Injury Cash Benefits Only)

- 8.2.1. If You have any other health insurance policies, the maximum daily limit per insured person for hospitalisation for an accidental injury cannot exceed R3500.00 from all policies combined. We are not liable to pay or contribute more than our pro rata portion of the maximum payable daily limit, subject to the maximum limit provided by this policy whichever is the lesser.

9. CLAIMS PROCESS CONDITIONS

These are detailed claims conditions and must be in place or complied with by you so that you can enjoy the benefits of the policy.

9.1. When can You claim?

9.1.1 As soon as you have accepted this benefit, you are entitled to claim your insurance benefit if an insured event occurs (the **Start Date**). You can only claim for the benefit covered under this policy if you have complied with this Policy.

9.1.2. The insured event must have happened in **South Africa** and after the Start Date.

9.2. Time period to submit a claim?

9.2.1. Your claim form and supporting claim documents (see 9.4 below) must be submitted to us within **30 days** of the insured event. If you do not provide us with the information we need to process your claim, the Insurer is entitled to reject your claim.

9.3. Waiting Periods?

9.3.1. There is no waiting period for Your Accidental injury cash benefit.

9.4. How do You claim Your insurance benefits?

9.4.1. It's simple, go to <http://theunlimited.co.za/Free-commuter-cover/customer-care> and we will guide you through the process.

9.4.2. Process for **ACCIDENTAL INJURY CASH BENEFIT** claims:

- a. You will be required to provide us with a completed claim form, a clear certified copy of the insured persons ID document (who received hospital treatment) as well as the specific medical and other information we require to process Your claim (refer to 9.2 above for the time period in which to do so).
- b. The medical information, in the form of Hospital admission forms/Hospital records detailing treatment, that You need to provide us with must be obtained by you from the clinic/hospital or the doctor/nurse that treated you. That medical information must contain at least the following information:
 - the date and time of the insured person's admission into, and discharge from, the hospital/clinic;
 - contact details of the hospital;
 - the final diagnosis of the accidental injury/s and the reason for the time spent in hospital;
 - all medication and treatment administered to the insured person;
 - details of any procedures the insured person underwent; and
 - the long-term prognosis for the insured person's injuries.
- c. The motor vehicle collision must be reported to the SAPS and you must be recorded on a SAPS accident report as an occupant who was injured; we require you to provide us with a copy of the police or accident report.
- d. We will also require a letter on a company letterhead or an affidavit confirming your employment or work.

Please note that the documents should record that you were an occupant in the motor vehicle involved in the motor vehicle collision.

- 9.4.3. If we approve your claim; you will be required to provide us with a copy of your bank statement, that clearly shows the name of the account holder, the account details, as well as the Bank date stamp.
- 9.4.4. All costs incurred in submitting a claim are for your account.
- 9.4.5. Your claim documents can sent to us by any of the methods below:

THE UNLIMITED – CLAIMS DEPARTMENT

Postal Address:	Private Bag X7028, Hillcrest, 3650
Physical Address:	1 Lucas Drive, Hillcrest, 3610
Email Address:	claimsdocs@theunlimited.co.za
Fax Number:	086 206 4069

- 9.4.6. Failure by you to comply with our reasonable requests, non-cooperation in the investigation of claims or the submission of specific claim documents/information, may result in the rejection of your claim by the Insurer.
- 9.4.7. There are some more important details under Point 5 (How to claim) in the FAIS DISCLOSURE NOTICE attached to this policy.

9.5. Who will We pay?

- 9.5.1. We will pay you, by payment into Your South African Bank Account. If you have died, we can pay your spouse or the executor of your estate BUT they will need to give us proof of their status (for example, identity details or letters of executorship) (**see above**). Payment to any of them will discharge our liability.
- 9.5.2. If the person we have to pay ("the beneficiary") does not live in South Africa, the insurer may make payment into a foreign bank account, however:
- the beneficiary will need to meet any requirements of the insurer; and
 - the claim will be paid to the value of the Rand amount and subject to any requirements by South African law and the laws of the country where the bank account is held.
- 9.5.3. Neither we nor the insurer will be responsible for meeting any legal requirements the beneficiary must meet to receive payment of a claim in South Africa or another country.

9.6. Claim rejections

- 9.6.1. If the insurer rejects Your claim, we will notify You of the rejection; then You have **90 days** from the date of the notification of the decision to challenge the insurer's decision on a claim by writing to us or the Insurer with reasons and representations. If the insurer's decision remains unchanged, and You want to start a legal process, You have an additional **180 days** to do so from the date the final decision is notified to You or Your claim will lapse.
- 9.6.2. There are some more important details under Point 5 (How to claim) and Point 8 (How to submit a complaint) in the FAIS DISCLOSURE NOTICE attached to this policy.

10. COVER EXCLUSIONS

Exclusions are specific items, losses or events that are not covered in terms of Your policy. These are specified below and it is important that You read and understand Your policy.

10.1. We will **NOT** pay a claim (note these are general exclusions that apply to all benefits):

- 10.1.1. if you participate in war, invasion, act of foreign enemy, hostilities, civil war/unrest, rebellion, riot, revolution, terrorist attack;
- 10.1.2. for loss which is a direct result of nuclear reaction or radiation;
- 10.1.3. for any events that occurred before you accepted this benefit in terms of this policy;
- 10.1.4. if Your claim is because of your attempt to commit or willingly involving yourself in any unlawful act (**this can include, as an example, where you drive without a valid licence**), any dangerous conduct, self-inflicted harm and/or substance abuse (for example, drugs and alcohol); and
- 10.1.5. if you have committed fraud, or you have not told us the truth (see 8.1(ii) above) or you have not given us all your correct details including about your health (now or when you claim).

10.2. In addition to the above general exclusions in 10.1 above, We will **NOT** pay an **ACCIDENT CASH** benefit claim:

- i. if your injuries are treated in a 'casualty unit', or if You are or should be an outpatient or a day case at a hospital;
- ii. if additional treatment and/or where treatment of another medical condition/medical complication caused and/or prolonged Your admission to hospital;
- iii. if Your treatment was for pain relief, physiotherapy and/or traction, soft tissue injuries including all admissions for the treatment of sprain and strain injuries and/or for any planned procedure (as examples, pregnancy related treatment or operations), and for treatment for congenital, mental or psychological conditions;
- iv. If you were not on your way to or from your place of work;
- v. If you were not at the time of the motor vehicle collision a passenger in or the driver of one of the motor vehicles involved in the collision; and
- vi. If your injury was not caused directly because of the motor vehicle collision.

10.3. Sanctions

- 10.3.1. Your insurer cannot provide cover and the insurer will be liable to pay any claim or provide any benefit under this policy to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose the insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.
- 10.3.2. The insured has the right, at its own discretion, not to provide cover or to void and/or cancel any insurance policy, section and/or item upon the disclosure by You of such activities as mentioned 9.5.1 above, or should We become aware of any breach of the Sanctions Exclusion.

11. GENERAL POLICY TERMS AND CONDITIONS (that apply to the entire policy)

These and the other terms and conditions in this Policy set out the general and special arrangements, provisions, requirements, legal rules, specifications, and standards that form an integral part of the agreement between You and us. Your policy document/wording is a very important document and You must read and understand it.

11.1. We may in our sole and absolute discretion offer to increase your cover at no additional cost or obligation to you. We will notify you of any increases by SMS to the number you provided to us. If the premium or cover benefits change for any reason, you will be given 31 days' prior written notice to that effect to the number you provided to us.

11.2. Premiums:

11.2.1. Your premium will be paid to the Insurer on your behalf.

11.3. Cancellation of Policy:

11.3.1. You can cancel your Policy at any time.

**IF YOU WANT TO CANCEL THIS POLICY, CALL US ON
0861 990 000 OR EMAIL US
CUSTOMERCARE@THEUNLIMITED.CO.ZA**

11.3.2. We can cancel this Policy at any time should you not fulfil your duties under this policy by:

- a. Us notifying you immediately in writing of cancellation for fraudulent or dishonest actions; OR
- b. Us notifying you of cancellation after 31 days' notice in writing (or such other period as may be mutually agreed and/or otherwise prescribed by this policy).

12. WHAT DO THESE WORDS MEAN WHEN USED IN YOUR POLICY?

Subject to all the terms and conditions of this Policy and the contract:

- 12.1. **"accident cash benefit"** means the cover payable by the Insurer in the event You or an insured person covered under the policy being admitted to hospital as a direct result of an accidental injury sustained in a motor vehicle collision.
- 12.2. **"accidental injury"** means an injury sustained as a direct result of a motor vehicle collision which causes you to be admitted by a doctor to a hospital for a period of 24 hours in a row or more such periods and which injury could not have been attended to as an out/day patient or at home.
- 12.3. **"additional treatment"** means any treatment You or any other insured person receives for conditions other than the treatment received or required to be received directly related to the insured event for which You or any other insured person are covered.
- 12.4. **"insured event"** means a single motor vehicle collision which results in an insured person's admission/s to hospital because of an accidental injury from any cause not excluded under this Policy.
- 12.5. **"insured person"** means you, the main member who is covered under this insurance policy.
- 12.6. **"motor vehicle collision"** is a single incident between two or more motor vehicles that collide and where there is an unplanned impact between the motor vehicles concerned, causing damage to the motor vehicles involved and the persons being transported in the said motor vehicles.
- 12.7. **"premium"** means the monthly amount payable to the insurer for the cover.

- 12.8. **"spouse"** means a named person who You are married to by civil law, tribal custom or in terms of any religion. A spouse also includes Your life partner who normally lives with You in South Africa.
- 12.9. **"We/Us"** means The Unlimited Group (Pty) Limited acting on its own behalf or on behalf of the insurer. We provide intermediary and binder services in respect of this policy.
- 12.10. **"You/Your"** means the policyholder under this Policy.